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**KEY CONTACTS FORM**

**Authorized Representative:** Original awards and amendments will be sent to this individual for review and acceptance, unless otherwise indicated.

# Name: Title: Complete Address:

Phone Number:

**Payee:** Individual authorized to accept payments.

# Name: Title: Mail Address:

Phone Number:

**Administrative Contact:** Individual from Sponsored Program Office to contact concerning administrative matters (i.e., indirect cost rate computation, rebudgeting requests etc.)

# Name: Title: Mailing Address:

Phone Number: E-Mail Address:

**Principal Investigator:** *Individual responsible for the technical completion of the proposed work.*

# Name: Title: Mailing Address:

Phone Number: E-Mail Address:

Web URL:

# NOTICE

All NOAA COP applicants be asked to submit a COP Key Contact form in the specified format upon application submission. The use of the Key Contact format will provide the applicants contact information and is compatible with the format in use by other agencies.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed and completing and reviewing the collection of information.

Send comments regarding this burden estimate or any other aspects of this collection of information, including suggestions for reducing this burden, to the National Ocean Service, CSCOR/COP Office, 1305 East-West Highway, Silver Spring, MD 20910. Grant files are subject to the Freedom of Information Act (FOIA). Confidentiality will not be maintained--the information will be made available to the public. However, unpublished research results shall not be published without prior permission from the recipient.

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