# Cover Page (Web-form questions)

**Document Overview:**
These instructions refer to the full application cover page web form that can be found in the [full application portal](https://applications.chips.gov/).

Applicants for the CHIPS Incentives program submitting a full application should complete this web form according to the instructions in this document.

Please refer to the CHIPS Incentives Program—Commercial Fabrication Facilities Notice of Funding Opportunity (CHIPS-CFF NOFO) section IV.I. for details on the full application. Please also refer to the FAQs on the CHIPS website (at https://chips.gov/frequently-asked-questions) for general information on the full application.

Throughout the review process, the Department may request additional information and/or revisions regarding this submission

**Instructions:**

Please populate all applicable and required fields to complete the Full Application Cover Page web form. If fields are pre-populated based data previously submitted, they must be verified for accuracy.

* **Name of Application:** Provide a descriptive name for the application / project(s) for which the entity is requesting CHIPS incentive funds.

*Applicant Organization Information*

* **Applicant Name:** Provide the legal name of the entity applying for CHIPS Incentives (not the individual filling out the application)
* **Corporate Parent Name *(If applicable):*** Provide the legal name of the corporate parent of the entity applying for CHIPS Incentives.
* **Mailing Address:** include street address, city, state, and zip for US addresses and equivalent information for foreign addresses, including country/location. If you do not know the 9-digit zip code for your U.S. location, enter “0000” for the last four digits.
* **Organization Website:** Provide a URL address for the applying entity’s website (or corporate parent if entity does not have a website).
* **Is the applicant a consortium?:** Select Yes or No to indicate whether the applicant is a consortium. A consortium application involves an umbrella entity and multiple participating entities. For more information on consortium applications, refer to section III.A.1. of the CHIPS-CFF NOFO.
* **Have you registered for a SAM.gov account?** Choose “Yes” or “No” from the dropdown menu to indicate whether the potential applicant has applied for an account in the federal government’s System for Award Management (SAM.gov). A prerequisite for any award by the Department is an active registration in the System for Awards Management (SAM). Applicants are strongly encouraged to begin the process of registering for SAM.govas early as possible. While this process ordinarily takes between three days and two weeks, in some circumstances it can take six or more months to complete due to information verification requirements. CPO is unable to issue a CHIPS Incentive to an entity that lacks an active SAM.gov registration.
* **UEI # [Optional]**: If the entity has already received a Unique Entity Identifier (UEI) via SAM.gov, enter the number. If the entity has not yet received a UEI, leave this box blank.

*Applicant point of contact*

Please enter information for the applicant point of contact, who should be an individual legally authorized to submit an application on behalf of the entity.

* **Full Name:** The full name of the point of contact
* **Title:** The official title of the point of contact at the applying entity
* **Email Address:** A business email for the point of contact
* **Phone Number:** A business phone number to reach the point of contact

Partnership information

* **Are there other entities (e.g., customers, suppliers, investors, advisors) you are partnering with in a meaningful way?**: Choose “Yes”, “No”, or “Not Determined at this Time” from the dropdown menu to indicate whether the applicant is partnering with other entities.
	+ **Please describe any potential partners referred to above:** Provide names and brief description of any potential partners (maximum 1500 characters), as well as how the broader partnership will be governed.