

How to Apply for the 2016 PTT Grants Program

Please read the Call for Proposals to be certain your project complies with the general requirements of the PTT Grants Program. All applications must be submitted through the Grants.gov website. In order to help guide you through this process, NCPTT staff have compiled the following guidance:

PTT proposal submittal in Grants.gov requires completion of six documents:

1. SF424
2. Key Contacts Form
3. Project Abstract
4. Project Narrative
5. SF-424A Budget
6. SF-424B Assurances for Non-Construction Programs
7. SF-LLL Lobbying Assurances

Download, fill-out, and submit forms at grants.gov

For the 2016 PTT Grants Program use opportunity number P15AS00360.

An application package containing the seven forms can be found by searching on the opportunity number or the CFDA number (15.923).

SF424

Please enter the following information in the Application for Federal Assistance form, SF-424. Guidance for applicants can be found at <http://www.grants.gov/web/grants/applicants/applicant-resources.html>

1. Type of Submission: Mark Application box
2. Type of Application: Mark New box
3. Date Received: Leave this field blank. This date will be assigned by the Federal agency.
4. Application Identifier: Leave this field blank.
5. Federal Entity Identifier: Leave this field blank
6. Date Received by State: Leave this field blank.
7. State Application Identifier: Leave this field blank.
8. Applicant Information: Enter the following in accordance with agency instructions:
 - a. Legal Name: (Required) Enter the legal name of applicant that will undertake the assistance activity. This is the organization that has registered with the System for Award Management (SAM). Information on registering with SAM may be obtained by visiting www.Grants.gov.

- b. Employer/Taxpayer Number (EIN/TIN): (Required) Enter the employer or taxpayer identification number (EIN or TIN) as assigned by the Internal Revenue Service. If your organization is not in the US, enter 44-4444444.
 - c. Organizational DUNS: (Required) Enter the organization's DUNS or DUNS+4 number received from Dun and Bradstreet. Information on obtaining a DUNS number may be obtained by visiting www.Grants.gov.
 - d. Address: Enter address: Street 1 (Required); city (Required); County/Parish, State (Required if country is US), Province, Country (Required), 9-digit zip/postal code (Required if country US).
 - e. Organizational Unit: Enter the name of the primary organizational unit, department or division that will undertake the assistance activity.
 - f. Name and contact information of person to be contacted on matters involving this application: Enter the first and last name (Required); prefix, middle name, suffix, title. Enter organizational affiliation if affiliated with an organization other than that in 7.a. Telephone number and email (Required); fax number.
9. Type of Applicant: (Required) Select up to three applicant type(s) in accordance with agency instructions.
- A. State Government
 - B. County Government
 - C. City or Township Government
 - D. Special District Government
 - E. Regional Organization
 - F. U.S. Territory or Possession
 - G. Independent School District
 - H. Public/State Controlled Institution of Higher Education
 - I. Indian/Native American Tribal Government (Federally Recognized)
 - J. Indian/Native American Tribal Government (Other than Federally Recognized)
 - K. Indian/Native American Tribally Designated Organization
 - L. Public/Indian Housing Authority
 - M. Nonprofit
 - N. Private Institution of Higher Education

O. Individual

P. For-Profit Organization (Other than Small Business)

Q. Small Business

R. Hispanic-serving Institution

S. Historically Black Colleges and Universities (HBCUs)

T. Tribally Controlled Colleges and Universities (TCCUs)

U. Alaska Native and Native Hawaiian Serving Institutions

V. Non-US Entity

W. Other (specify)

10. Name of Federal Agency: Enter National Park Service

11. Catalog Of Federal Domestic Assistance Number/Title: Enter 15.923 and National Center for Preservation Technology and Training

12. Funding Opportunity Number/Title: (Required)

a. Enter **P15AS00360, 2016 PTT Grants Program**

13. Competition Identification Number/Title: Leave this field Blank.

14. Areas Affected By Project: This data element is intended for use only by programs for which the area(s) affected are likely to be different than the place(s) of performance reported on the SF-424 Project/Performance Site Location(s) Form.

15. Descriptive Title of Applicant's Project: (Required) Enter a brief descriptive title of the project.

16. Congressional Districts Of: 15a. (Required) Enter the applicant's congressional district. 15b. Enter all district(s) affected by the program or project. Enter in the format: 2 characters state abbreviation – 3 characters district number, e.g., CA-005 for California 5th district, CA-012 for California 12 district, NC-103 for North Carolina's 103 district. If all congressional districts in a state are affected, enter "all" for the district number, e.g., MD-all for all congressional districts in Maryland. If nationwide, i.e. all districts within all states are affected, enter US-all. If the program/project is outside the US, enter 00-000.

17. Proposed Project Start and End Dates: (Required) Enter the proposed start date and end date of the project. PTT Grants are limited to one year project funds. NCPTT plans to award funds by June 1, 2016. Start dates should be around that time. End dates should be no later than June 1, 2017.

18. Estimated Funding: (Required) Enter the amount requested, or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines, as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses.

19. Is Application Subject to Review by State Under Executive Order 12372 Process? (Required)
Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order

12372 to determine whether the application is subject to the State intergovernmental review process. Select the appropriate box. If "a." is selected, enter the date the application was submitted to the State.

20. Is the Applicant Delinquent on any Federal Debt? (Required) Select the appropriate box. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of federal debt include; but, may not be limited to: delinquent audit disallowances, loans and taxes. If yes, include an explanation in an attachment.
21. Authorized Representative: To be signed and dated by the authorized representative of the applicant organization. Enter the first and last name (Required); prefix, middle name, suffix. Enter title, telephone number, email (Required); and fax number.

Key Contacts Form

Please provide information for the Principal Investigator or Project Manager. This is the person principally responsible for completing the work.

Application Organization Name: Enter the legal name of applicant that will undertake the assistance activity. This is the organization that has registered with the Central Contractor Registry (CCR).

Contact 1 Project Role: Enter Principal Investigator or Project Manager

Contact Person: Prefix, First Name, Last Name, Suffix, Title, and Organizational Affiliation

Contact Address: Street, City, State, Country, Zip/Postal Code

Contact Phone: Telephone, Fax

Contact Email

Project Abstract

Summary of proposed work suitable for dissemination to the public (100 words). The project abstract will be a file attachment in the application. Please create the file in Microsoft Word or Word compatible software.

Project Narrative

The project narrative will be a file attachment in the application. Please create the file in Microsoft Word or Word compatible software.

The project narrative must follow the outline below:

1. **Project Title.**

2. **Discipline.** Include archeology, architecture, engineering, collections, historic landscapes, or materials conservation
3. **Research Priority.** Include the NCPTT research priority related to your proposal, if applicable.
4. **Innovation.** Describe how the project is innovative (100 words).
5. **Project Description.** Describe the background and the approach to the project. Include a discussion of the technical soundness of the methods (1000 words).
6. **Bibliography.** Include references cited in the project description.
7. **National Need.** A statement about how the proposal addresses an identifiable national need in preservation technology (250 words).
8. **Schedule.** Include schedule and project tasks. (500 words).
9. **Dissemination.** Describe how your work will be share with others (250 words).
10. **Deliverables.** Describe deliverables or products associated with project (500 words).
11. **Qualifications.** Summary of the expertise and project-related experience of the principal investigator (500 words) and of the research team (1000 words).
12. **Project Income.** If the project is expected to generate income, please indicate the nature and source of the income. How will these funds be used to offset costs for the project?

SF-424 A Budget Information for Non-Construction Programs

Guidance to filling out the forms can be found in the applicants guide at

<http://www.grants.gov/web/grants/applicants/applicant-resources.html>

This form is designed so that application can be made for funds from one or more grant programs. NCPTT assumes that the applicant is only requesting funds from the PTT Grant program and no other federal grant program at this time.

Section A. Budget Summary

1. Grant Program or Activity: Enter "2016 PTT Grants Program"

Catalog of Domestic Federal Assistance: Enter "15.923"

Estimated Unobligated funds Federal: Enter the total amount of funds requested from NCPTT, NOT TO EXCEED \$40,000.

Estimated Unobligated funds Non-Federal: Enter the total amount of funds and in-kind services provided by the applicant.

Leave all other fields blank. Totals should automatically calculate.

Section B. Budget Categories

6. Object Class Categories

Grant Program, Function or Activity:

In Column (1) Enter "2016 PTT Grant Program"

In Column (2) Enter Applicant Organization's Name for matching funds.

For each column show the amount requested from NCPTT and the amount provided by the applicant as a match. Matching funds can be cash or the value of in-kind services. Use only the budget categories outlined below.

- a. Personnel: This category includes applicant's staff gross salaries. (Salaries cannot exceed \$715 per day).
- b. Fringe Benefits: b) Payroll expenses for applicant's staff salaries — benefits, taxes, etc. — paid by applicant, organization, or institution.
- c. Travel: This category includes travel costs for applicant's staff. For travel funded by NCPTT, lodging, meals and incidental expenses may not exceed federal rates by location. For federal rates by location, see
- d. Equipment: Rental is preferred. Purchase of equipment will be considered if shown to be cost-effective.
- e. Supplies: This are consumable materials or supplies used in the project.
- f. Contractual: This category includes fees and travel costs for consultants. Principal investigators and others who are not on applicant's staff are considered consultants. Consultant salaries are not to exceed \$752 per day.
- g. Construction: Itemize costs for construction: mockups or samples, purchasing construction materials required to complete the proposed project.
- h. Other: This category can be used to show matching funds from the difference between NCPTT's allowable indirect cost rate and the indirect cost rate agreement approved by a federal agency. (See line 6j).
- i. Total Direct Charges (sum of 6a-6h): this amount will be automatically calculated in the form.
- j. Indirect Charge: Organizations or institutions with an indirect cost agreement approved by a federal agency. Indirect costs funded by NCPTT shall not exceed approved rate or one-third of total direct costs, whichever is less. Organizations or institutions without an indirect cost agreement approved by a federal agency: Show \$0 for NCPTT funds requested for indirect costs.
- k. TOTALS (sum of 6i and 6j): this amount will be automatically calculated in the form.

7. Program Income: Enter the estimated income if any expected to be generated from this project. Do not add or subtract this amount from the total project amount. Show under the project narrative statement the nature and sources of income. The estimated amount of income may be considered by NCPTT in determining the total amount of the grant award.

Section C. Non Federal Resources

Lines 8-11 Enter amounts of non-Federal resources that will be used on the grant.

Column (a) -Enter the program titles identical to Column (a), Section A. A breakdown by function or activity is not necessary.

Column (b) -Enter the contribution to be made by the applicant.

Column (c) -Enter the amount of the State's cash and in-kind contribution if the applicant is not a State or State agency. Applicants which are a State or State agencies should leave this column blank.

Column (d) -Enter the amount of cash and in-kind contributions to be made from all other sources.

Column (e) – Enter totals of Columns (b), (c), and (d).

Line 12 -Enter the total for each of Columns (b)-(e). The amount in Column (e) should be equal to the amount on Line 5, Column (f), Section A.

Section D – Forecasted Cash Needs

Leave lines 13-15 in this section blank.

Section E – Budget Estimates of Federal Funds Needed for the Balance of the Project

Leave lines 16-20 in this section blank.

Section F – Other Budget Information

Line 21 -Use this space to explain amounts for individual direct object class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.

Line 22 -Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.

Line 23 -Provide any other explanations or comments deemed necessary.

SF-424 B Assurances for Non-Construction Programs

1. Title: Enter the title of the official certifying that the applicant organization will comply with the requirements set forth in this assurance form
2. Applicant Organization: Enter the name of the applicant organization

Proposal Submission

To prepare a proposal to NCPTT, go to the grants.gov website. Your Authorized Organization Representative (AOR) will submit the package.

- You will need to be a registered applicant.
- The you will need the organization's Taxpayer identification Number (TIN) and DUNS number.
- In the red sidebar, choose applicant login, and login with your username and password.
- In the second paragraph in this page you can choose Apply for Grants.
- Click on Download A Grant Application Package.
- Search for the Preservation Technology and Training Grant Opportunity using the opportunity number or the CFDA number
 - Opportunity Number:
 - **For 2016 PTT Grants Program, opportunity number P15AS00360**
 - CFDA NUMBER: 15.923
- You can click on the application package and choose to download it to your computer.
- Fill out the six forms in the application package.

TIPS for filling out forms:

- The form requires a nine digit zip code, if your grant doesn't have one, look it up at <https://tools.usps.com/go/ZipLookupAction!input.action>
- To find the congressional district, <http://www.govtrack.us/congress/members>. you will use the first to letters of the state and three numbers for the district. For example, the Sixth congressional district of Idaho is ID006.

Submitting your package

- Upon completion of your forms, go to the top of the application page, and click "check package for errors." The program will highlight issues on the forms that can be corrected. Click the "check package for errors" button again.
- Once the forms have passed, you will go to the save button on top of the application package and save a copy on your computer.
- The "Save and Submit" button will become active after you have saved your form to your computer.
- Submit the package by clicking on "Save and Submit." You will receive a confirmation on your computer screen when the package is successfully submitted.

Questions

For more information contact:

Andy Ferrell, Chief, Architecture & Engineering

andrew_ferrell@nps.gov

Dr. Mary F. Striegel, Chief, Materials Conservation
mary_striegel@nps.gov

Tad Britt, Chief, Archeology & Collections
tad_britt@nps.gov

Debbie Smith, Chief, Historic Landscapes
debbie_smith@nps.gov

NCPTT
645 College Avenue
Natchitoches, LA 71457
Telephone: 318/356-7444 Fax: 318/356-9119
E-mail: ncptt@nps.gov
Website: www.ncptt.nps.gov