

Guidelines for Completing Recreational Trails Grants Fiscal Paperwork

On the RTP website, you will find copies of the "Request for Verification of Taxation Reporting Information" (W-9) form, "Commonwealth Terms and Conditions" form, "Standard Contract" form, "Signature Verification" form and "EFT Form". Note: All applicants must fill out all five forms. If you have previously worked with the state but your address has recently changed, you **MUST** indicate this with a signed letter stating your change of address, or all financial correspondence will continue to be sent to the old address. **Just ONE copy of the forms with ORIGINAL SIGNATURES must be submitted with your RTP application.**

Here are some guidelines for filling out the forms:

1. W-9 Form

- Fill in your organization's name and legal address. *You must provide a street address.*
- Enter your organization's "Taxpayer Identification Number," and the appropriate "Organization Type."
- If you are a federally tax-exempt 501(c) organization, check the box in Part III *and attach a copy of your IRS determination letter. [If you are not a tax-exempt organization, but are partnering with a tax-exempt organization as a "pass-through," all four required forms should be filled out by the pass-through agency.]*
- Enter DUNS number – refer to form instructions if you do not have one.
- DO NOT check the box in Part IV.
- Have the appropriate person sign and date the bottom of the form.

2. Commonwealth Terms and Conditions form

- "Contractor Authorized Signatory" will be the only individual authorized to sign contracts and other fiscal documents. This person must also sign the standard contract and signature verification form. This person can be the president, executive director, treasurer, secretary, etc. of your organization – whoever is authorized. Print the person's name on the next line.
- The rest is self-explanatory (*street addresses only, no P.O. Boxes*).

3. Commonwealth of Massachusetts: Standard Contract Form

Fill in **ONLY** the following:

- At the top left, fill in your organization's name, the name of the contact person, phone numbers and addresses. Fill in your organization's Vendor Code if you know it (DCR will fill in this section if you don't know your vendor code or don't have one yet).
- At the bottom left, under "For the Contractor," have the appropriate person sign at the X, and print their name, title, and the date. *The person signing the contract must be the same as the "Contractor Authorized Signatory" listed on the Signature Verification Form and the Commonwealth Terms and Conditions.*

4. Contractor Authorized Signature Verification Form: The purpose of this form is to certify that the person signing the contract and other financial forms has the authority to do so.

- Determine if the group applying for funding is a corporation, or a partnership or other entity and follow the directions accordingly.
- Corporations have 2 choices - you can provide a Clerk's certification, which can be done on the form, OR you can provide a board vote stating that the signatory is authorized to sign on behalf of the organization. If you choose the second option, you must also provide a sample of the signatory's signature by having the signatory sign the form and notarizing it.
- Partnership or other entities must provide a board vote or written authorization stating that the signatory is authorized to sign on behalf of the organization AND a sample of the signatory's signature by having the signatory sign the form and notarizing it.

5. EFT Form: Go to

Fill out the form, print and include in your application. You must include a copy of a voided check with this form. This form must be filled out regardless of whether or not the bank account is already on the system.

Please send 1 copy of each form with original signatures along with your application to:

**Amanda Lewis, Department of Conservation and Recreation
136 Damon Road, Northampton, MA 01060**

Please contact me if you have any questions at (413) 586-8706 ext. 19 or amanda.lewis@state.ma.us.