

## Economic Development Administration Automated Standard Application for Payments (ASAP) Enrollment Form

Recipient Organization Name:
EDA Award/Grant Number (s):
Unique Entity Identifier (UEI):
Γaxpayer Identification Number (TIN):
Organization Type: (Please highlight)
Financial Institute For -Profit Indian Tribal Organization Local Government Non-Profit State Agency University University College-State
Point of Contact Name:
Point of Contact Title:
Point of Contact Email:
Organization Address:
Point of Contact Telephone:
Name of EDA Project Officer:

**NOTE:** The UEI and Taxpayer Identification Number (TIN) must match those under which the grant award was reserved.