

Template 1 – Single Entity (located in the U.S. or its outlying areas)

Background

The System for Award Management (SAM) is a computer system accessed by the Internet managed by the U.S. Government. Entities must have an active registration in SAM to do business with the U.S. Government. An “entity” is the company, business, or organization registering in SAM. Each entity is represented by a nine-digit unique entity identifier, the Data Universal Numbering System (DUNS®) Number as issued by Dun & Bradstreet.

Only individuals who are authorized to represent a particular entity, or individuals representing themselves as an entity, may register an entity in SAM. Accessing or using SAM, or information contained therein, for any unauthorized or illegal purposes, may have civil and criminal penalties, and may negatively impact the status of the SAM registration maintained for the entity.

Instructions to Entity

- 1. Single Entity.** Use this template to formally appoint an Entity Administrator for 1) a single, domestic entity located in the U.S. or its outlying areas, or 2) a single, international entity that uses banking information from a U.S. financial institution in their SAM entity registration.
- 2. Complete the template.** Fill in the blanks. Enter the highlighted information on the next two pages. Do not include this instruction page in your letter.
- 3. Print the letter on your entity’s letterhead.** If you don’t have letterhead, enter your entity’s legal business name and physical address at the top of the letter before printing.
- 4. Sign the completed letter in the presence of the notary.** Make sure the person who signs the letter is someone with signatory authority, i.e. who can make commitments on behalf of the entity like an executive, officer, partner, or other authorized signatory. The notary will confirm the signatory’s identity in accordance with your state’s notary procedures.
- 5. Mail the completed, signed, notarized letter.** Your letter will be reviewed for completeness upon receipt at the Federal Service Desk at:

FEDERAL SERVICE DESK
ATTN: SAM.GOV REGISTRATION PROCESSING
460 INDUSTRIAL BLVD
LONDON, KY 40741-7285
UNITED STATES OF AMERICA

If incomplete or incorrect, you will be contacted. Your registration will not be activated until an approved letter is on file.

End of instructions. Complete the template that follows.

[Insert Date]

FEDERAL SERVICE DESK
ATTN: SAM.GOV REGISTRATION PROCESSING
460 INDUSTRIAL BLVD
LONDON, KY 40741-7285
UNITED STATES OF AMERICA

SUBJECT: Information Required to Activate SAM Entity Registration

Purpose of Letter

The purpose of this letter is to formally appoint an Entity Administrator for the named Entity and to attest to the accuracy of the information contained in the entity registration.

Designation of Entity Administrator

I, [Insert Name and Title of Signatory], the below signed individual, hereby confirm that the appointed Entity Administrator is an authorized officer, agent, or representative of the Entity. This letter authorizes the appointed Entity Administrator to manage the Entity's registration record, its associated users, and their roles to the Entity, in the System for Award Management (SAM).

Entity Covered by this Letter

DUNS® Number: _____

Legal Business Name: _____

Physical Address: _____

Entity Administrator Contact Information

Full Name: _____

Phone Number: _____

Email Address: _____

**The Entity Administrator must have an individual user account in SAM associated with the email address listed.*

Account Administration Preference (ONLY CHOOSE ONE)

You must choose **ONE** of the two following statements by checking the applicable box. Remember, there is no cost to register in SAM -- it is free. However, if you choose to have a third-party agent administer your SAM registration, with or without an associated fee, you must check the Third-Party Agent Designation box below.

Self-Administration Confirmation

For the purpose of registering with the United States Government through the online System for Award Management (SAM), I do not authorize any third party to act on

behalf of the Entity listed above. I have checked the Self-Administration Confirmation box to indicate that the designated Entity Administrator is not a third-party agent.

Third-Party Agent Designation

For the purpose of registering with the United States Government through the online System for Award Management (SAM), I do hereby authorize **[insert full name, phone number, address, and email address of the Third-Party Agent]** (Designated Third-Party Agent) to act on behalf of the Entity listed above. This authorization permits the Designated Third-Party Agent to conduct all normal, common business functions within SAM while binding the signatory to all actions conducted and representations made as a result of authorization granted herein. I have checked the Third-Party Agent Designation box and completed the above information to indicate that the designated Entity Administrator is a third-party agent.

Attestation

I, the below-signed, attest to the following:

- All information contained in this letter is complete and accurate.
- The designated Entity Administrator listed above has an individual SAM User Account created with the email address provided in this letter.
- The banking information provided for Electronic Funds Transfer on the Financial Information Page in the SAM.gov registration for the Entity above is correct and accurate.

Respectfully,

[Insert Full Name of Signatory]

[Insert Title of Signatory, e.g. Director of Contracting, Managing Partner, Vice President for Research, etc.]

[Insert Email of Signatory]

[Insert Entity Legal Business Name]

[Insert Entity Physical Address]

[PRINT LETTER ON ENTITY LETTERHEAD]

TO BE COMPLETED BY NOTARY
(in accordance with State notary requirements)

State of _____

County of _____

This instrument was acknowledged before me this ____ day of _____ (month),
____ (year), by _____ (name of
officer or agent, title or officer or agent) of _____
(name of entity).

____ Personally Known

____ Produced Identification

Type of ID and Number on ID _____

(Seal)

Signature of Notary

Name of Notary
(Typed, Stamped or Printed)

Notary Public, State of _____