

**United States Government  
Interagency Agreement (IAA) – Agreement Between Federal Agencies  
General Terms and Conditions (GT&C) Section**

IAA Number: \_\_\_\_\_  
 GT&C # \_\_\_\_\_ Order # \_\_\_\_\_ Amendment/Mod # \_\_\_\_\_

DEPARTMENT AND/OR AGENCY		
<b>1.</b>	<b>Requesting Agency of Products/Services</b>	<b>Servicing Agency Providing Products/Services</b>
	Name	Public Building Service
	Address	US National Park Service
	D Street & 7th Street SW, Washington, DC 20024	900 Ohio Drive SW, Washington, DC 20024
<b>2. Servicing Agency Agreement Tracking Number (Optional)</b> _____		
<b>3. Assisted Acquisition Agreement</b> Yes <input type="checkbox"/> No <input type="checkbox"/>		
<b>4. GT&amp;C Action (Check action being taken)</b>		
<input checked="" type="checkbox"/> <b>New</b>		
<input type="checkbox"/> <b>Amendment</b> – Complete only the GT&C blocks being changed and explain the changes being made.		
<input type="checkbox"/> <b>Cancellation</b> – Provide a brief explanation for the IAA cancellation and complete the effective End Date.		
<b>5. Agreement Period</b> Start Date <u>10-01-2018</u> End Date <u>09-30-2019</u> of IAA or effective cancellation date <small>MM-DD-YYYY MM-DD-YYYY</small>		
<b>6. Recurring Agreement (Check One)</b> A Recurring Agreement will continue, unless a notice to discontinue is received.		
Yes <input type="checkbox"/> If Yes, is this an: Annual Renewal <input type="checkbox"/>		
Other Renewal <input type="checkbox"/> State the other renewal period: _____		
No <input checked="" type="checkbox"/>		
<b>7. Agreement Type (Check One)</b> <input type="checkbox"/> Single Order IAA <input type="checkbox"/> Multiple Order IAA		
<b>8. Are Advance Payments Allowed for this IAA (Check One)</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If Yes is checked, enter Requesting Agency's Statutory Authority Title and Citation		
Note: Specific advance amounts will be captured on each related Order.		

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**9. Estimated Agreement Amount (The Servicing Agency completes all information for the estimated agreement amount.)  
(Optional for Assisted Acquisitions)**

Direct Cost _____	\$576,191.00	Provide a general explanation of the Overhead Fees & Charges
Overhead Fees & Charges _____		
Total Estimated Amount _____	\$576,191.00	

**10. STATUTORY AUTHORITY**

**a. Requesting Agency's Authority (Check One)**

Franchise Fund	Revolving Fund	Working Capital Fund	Economy Act (31 U.S.C. 1535/FAR 17.5)	Other Authority
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Fill in Statutory Authority Title and Citation for Franchise Fund, Revolving Fund, Working Capital Fund, or Other Authority**

**b. Servicing Agency's Authority (Check One)**

Franchise Fund	Revolving Fund	Working Capital Fund	Economy Act (31 U.S.C. 1535/FAR 17.5)	Other Authority
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Fill in Statutory Authority Title and Citation for Franchise Fund, Revolving Fund, Working Capital Fund, or Other Authority**

**11. Requesting Agency's Scope (State and/or list attachments that support Requesting Agency's Scope.)**

MOA between GSA and National Parks Service (NPS) to transfer funds to NPS to cover their expenses to operate the OPO clock tower. Initial funding through 12/21/2019 with subsequent mods to be enacted as funds are available to GSA with a proposed annual budget of \$567,191

See Attached Operations Plan and Agreement

**12. Roles & Responsibilities for the Requesting Agency and Servicing Agency (State and/or list attachments for the roles and responsibilities for the Requesting Agency and the Servicing Agency.)**

See Attached Agreement

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**13. Restrictions (Optional)** (State and/or attach unique requirements and/or mission specific restrictions specific to this IAA).  
See Attached Agreement

**14. Assisted Acquisition Small Business Credit Clause** (The Servicing Agency will allocate the socio-economic credit to the Requesting Agency for any contract actions it has executed on behalf of the Requesting Agency.)

**15. Disputes:** Disputes related to this IAA shall be resolved in accordance with instructions provided in the Treasury Financial Manual (TFM) Volume I, Part 2, Chapter 4700, Appendix 10; Intragovernmental Business Rules.

**16. Termination** (Insert the number of days that this IAA may be terminated by written notice by either the Requesting or Servicing Agency.)

If this agreement is canceled, any implementing contract/order may also be canceled. If the IAA is terminated, the agencies shall agree to the terms of the termination, including costs attributable to each party and the disposition of awarded and pending actions.

If the Servicing Agency incurs costs due to the Requesting Agency's failure to give the requisite notice of its intent to terminate the IAA, the Requesting Agency shall pay any actual costs incurred by the Servicing Agency as a result of the delay in notification, provided such costs are directly attributable to the failure to give notice.

**17. Assisted Acquisition Agreements – Requesting Agency's Organizations Authorized To Request Acquisition Assistance for this IAA.** (State or attach a list of Requesting Agency's organizations authorized to request acquisition assistance for this IAA.)  
See Attached Agreement

**18. Assisted Acquisition Agreements – Servicing Agency's Organizations authorized to Provide Acquisition Assistance for this IAA.** (State or attach a list of Servicing Agency's organizations authorized to provide acquisition for this IAA.)  
See Attached Agreement

**19. Requesting Agency Clause(s) (Optional)** (State and/or attach any additional Requesting Agency clauses.)  
See Attached Agreement

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**20. Servicing Agency Clause(s) (Optional) (State and/or attach any additional Servicing Agency clauses.)**  
 See Attached Agreement

**21. Additional Requesting Agency and/or Servicing Agency Attachments (Optional) (State and/or attach any additional Requesting Agency and/or Servicing Agency attachments.)**  
 See Attached Agreement

**22. Annual Review of IAA**  
 By signing this agreement, the parties agree to annually review the IAA if the agreement period exceeds one year. Appropriate changes will be made by amendment to the GT&C and/or modification to any affected Order(s).

**AGENCY OFFICIAL**

The Agency Official is the highest level accepting authority or official as designated by the Requesting Agency and Servicing Agency to sign this agreement. Each Agency Official must ensure that the general terms and conditions are properly defined, including the stated statutory authorities, and, that the scope of work can be fulfilled per the agreement.

The Agreement Period Start Date (Block 5) must be the same as or later than the signature dates.

Actual work for this IAA may NOT begin until an Order has been signed by the appropriate individuals, as stated in the Instructions for Blocks 37 and 38.

<b>23.</b>	<b>Requesting Agency</b>	<b>Servicing Agency</b>
Name	Darren J. Blue 	Lisa Mendelson
Title	Regional Commissioner	Regional Director, NPS
Telephone Number(s)	(202) 294-1628	(202) 297-1338
Fax Number		
Email Address	darren.blue@gsa.gov	lisa_mendelson-ielmini@nps.gov
SIGNATURE		
Approval Date	12/28/2017	

**United States Government**  
**Interagency Agreement (IAA) – Agreement Between Federal Agencies**  
**Order Requirements and Funding Information (Order) Section**

IAA Number \_\_\_\_\_ - \_\_\_\_\_      Servicing Agency's Agreement  
 GT&C #                      Order #      Amendment/Mod #      Tracking Number (Optional) \_\_\_\_\_

**PRIMARY ORGANIZATION/OFFICE INFORMATION**

<b>24.</b>	<b>Requesting Agency</b>	<b>Servicing Agency</b>
Primary Organization/Office Name	Public Building Service	US National Park Service
Responsible Organization/Office Address	D Street & 7th Street SW, Washington, DC 20024	900 Ohio Drive SW, Washington, DC 20024

**ORDER/REQUIREMENTS INFORMATION**

**25. Order Action (Check One)**

**New**

**Modification (Mod)** – List affected Order blocks being changed and explains the changes being made. For Example: for a performance period mod, state new performance period for this Order in Block 27. **Fill out the Funding Modification Summary by Line (Block 26) if the mod involves adding, deleting or changing Funding for an Order Line.**

**Cancellation** – Provide a brief explanation for Order cancellation and fill in the Performance Period End Date for the effective cancellation date.

<b>26. Funding Modification Summary by Line</b>	Line # <u>1</u>	Line # _____	Line # _____	Total of All Other Lines (attach funding details)	Total
Original Line Funding	\$ 144,047.76	\$	\$	\$	\$144,047.76
Cumulative Funding Changes From Prior Mods [addition (+) or reduction (-)]	\$	\$	\$	\$	\$ 0.00
Funding Change for This Mod	\$	\$	\$	\$	\$ 0.00
<b>TOTAL Modified Obligation</b>	<b>\$ 144,047.76</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>	<b>\$144,047.76</b>
Total Advance Amount (-)	\$	\$	\$	\$	\$ 0.00
<b>Net Modified Amount Due</b>	<b>\$ 144,047.76</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>	<b>\$144,047.76</b>

**27. Performance Period**                      Start Date      10-01-2018                      End Date      09-30-2019  
 For a performance period mod, insert the start and end dates that reflect the new performance period.                      MM-DD-YYYY                      MM-DD-YYYY

**IAA Order**

IAA Number \_\_\_\_\_ - \_\_\_\_\_      Servicing Agency's Agreement  
 GT&C #      Order #      Amendment/Mod #      Tracking Number (Optional) \_\_\_\_\_

<b>28. Order Line/Funding Information</b>													<b>Line Number</b> _____				
<b>Requesting Agency Funding Information</b>										<b>Servicing Agency Funding Information</b>							
ALC		47000017								14100099							
Component TAS Required by 10/1/2014	SP	ATA	AID	BPOA	EPOA	A	MAIN	SUB	SP	ATA	AID	BPOA	EPOA	A	MAIN	SUB	
OR Current TAS format			47X4542.1						14X1039								
BETC			DISB						COLL								
Object Class Code (Optional)																	
BPN																	
BPN + 4 (Optional)																	
Additional Accounting Classification/Information (Optional)			2019.192X.P1124001.PG61.PGA 61.J74.PX0016602						XXXP1039R6//PPNCNAMA2A//PRCNFNFR6.XZ0 000//PR.RNAMAOPT9.00.1								
Requesting Agency Funding Expiration Date MM-DD-YYYY									Requesting Agency Funding Cancellation Date MM-DD-YYYY								
<b>Project Number &amp; Title</b>																	
<b>Description of Products and/or Services, including the Bona Fide Need for this Order</b> (State or attach a description of products/services, including the bona fide need for this Order.) MOA between GSA and National Parks Service (NPS) to transfer funds to NPS to cover their expenses to operate the OPO clock tower. Initial funding through 12/21/2019 with subsequent mods to be enacted as funds are available to GSA with a proposed annual budget of \$567,191 STATUTORY AUTHORITY: Economy Act																	
North American Industry Classification System (NAICS) Number (Optional) _____																	
<b>Breakdown of Reimbursable Line Costs</b>									<b>OR Breakdown of Assisted Acquisition Line Cost:</b>								
Unit of Measure									Contract Cost		\$						
Quantity		Unit Price		Total				Servicing Fees		\$							
3 months		\$48,015.92		\$ 144,047.76				Total Obligated Cost		\$ 0.00							
Overhead Fees & Charges			\$						Advance for Line (-)		\$						
Total Line Amount Obligated			\$ 144,047.76						Net Total Cost		\$ 0.00						
Advance Line Amount (-)			\$						Assisted Acquisition Servicing Fees Explanation								
Net Line Amount Due			\$ 144,047.76														
<b>Type of Service Requirements</b>																	
<input checked="" type="checkbox"/> Severable Service <input type="checkbox"/> Non-severable Service <input type="checkbox"/> Not Applicable																	

IAA Order

IAA Number \_\_\_\_\_ - \_\_\_\_\_ Servicing Agency's Agreement  
GT&C # Order # Amendment/Mod # Tracking Number (Optional) \_\_\_\_\_

29. Advance Information (Complete Block 29 if the Advance Payment for Products/Services was checked "Yes" on the GT&C.)

Total Advance Amount for the Order \$ \_\_\_\_\_ [All Order Line advance amounts (Block 28) must sum to this total.]

Revenue Recognition Methodology (according to SFFAS 7) (Identify the Revenue Recognition Methodology that will be used to account for the Requesting Agency's expense and the Servicing Agency's revenue)

- Straight-line – Provide amount to be accrued \$ \_\_\_\_\_ and Number of Months \_\_\_\_\_
- Accrual Per Work Completed – Identify the accounting posting period:
  - Monthly per work completed & invoiced
  - Other – Explain other regular period (bimonthly, quarterly, etc.) for posting accruals and how the accrual amounts will be communicated if other than billed. \_\_\_\_\_

30. Total Net Order Amount: \$ 144,047.76  
[All Order Line Net Amounts Due for reimbursable agreements and Net Total Costs for Assisted Acquisition Agreements (Block 28) must sum to this total.]

31. Attachments (State or list attachments.)

- Key project and/or acquisition milestones (Optional except for Assisted Acquisition Agreements)
- Other Attachments (Optional)  
See Annual Operating Plan attached as referenced in the Interagency Agreement between both parties

BILLING & PAYMENT INFORMATION

32. Payment Method (Check One) [Intra-governmental Payment and Collection (IPAC) is the Preferred Method.]  
If IPAC is used, the payment method must agree with the IPAC Trading Partner Agreement (TPA).

- Requesting Agency Initiated IPAC       Servicing Agency Initiated IPAC
- Credit Card       Other – Explain other payment method and reasoning \_\_\_\_\_

33. Billing Frequency (Check One)

[An Invoice must be submitted by the Servicing Agency and accepted by the Requesting Agency BEFORE funds are reimbursed (i.e., via IPAC transaction)]

- Monthly     Quarterly     Other Billing Frequency (include explanation) \_\_\_\_\_

34. Payment Terms (Check One)

- 7 days     Other Payment Terms (include explanation): \_\_\_\_\_





**IAA Order**

IAA Number \_\_\_\_\_ - \_\_\_\_\_      Servicing Agency's Agreement  
                     GT&C #                      Order #    Amendment/Mod #    Tracking Number (Optional) \_\_\_\_\_

**CONTACT INFORMATION**

**FINANCE OFFICE Points of Contact (POCs)**

The finance office points of contact must ensure that the payment (Requesting Agency), billing (Servicing Agency), and advance/accounting information are accurate and timely for this Order.

39.	Requesting Agency (Payment Office)	Servicing Agency (Billing Office)
Name		
Title		
Office Address		
Telephone Number		
Fax Number		
Email Address		
Signature & Date (Optional)		

**40. ADDITIONAL Points of Contacts (POCs) (as determined by each Agency)**  
 This may include CONTRACTING Office Points of Contact (POCs).

	Requesting Agency	Servicing Agency
Name	Darryl Speller	
Title	Supervisory Building Manager	
Office Address	1200 Pennsylvania Ave N.W. Washington DC, 20004	
Telephone Number	(202) 603-4877	
Fax Number		
Email Address	Darryl.Speller@gsa.gov	
Signature & Date (Optional)		
Name		
Title		
Office Address		
Telephone Number		
Fax Number		
Email Address		
Signature & Date (Optional)		
Name		
Title		
Office Address		
Telephone Number		
Fax Number		
Email Address		
Signature & Date (Optional)		