

Los Alamos National Laboratory Participant/Company Questionnaire

The information collected in this questionnaire is necessary for Los Alamos National Laboratory (LANL) to meet government reporting requirements. Please completely fill out this questionnaire.

1. Company Information

Company/Participant Name (include Acronym)				# Employees	
Division			Web Site		
Business Mailing Address					
(Address)	(City)	(State)	(Zip Code)	(Country)	(Province)
Courier (Express Mail) Address					
(Address)	(City)	(State)	(Zip Code)	(Country)	(Province)
Business Description (non-proprietary)					
Standard Industrial Classification (SIC) Code(s) In the case of multiple codes, list all that are relevant to this project. This information is required by DOE to track statistical data on industries served. The following web site can be accessed to view the SIC codes (http://www.osha.gov/oshstats/sicser.html)					
Parent Company		Parent Company City		Parent Company State	

2. Is the Company foreign owned or controlled? Yes No

If the answer is "yes", please identify ownership, percentage and countries of non-US ownership, and any additional information which may be pertinent to this project on an attachment to this form. Additional reviews and approvals will be required.

3. Is the Company (check all that apply):

- | | |
|---|--|
| a. <input type="checkbox"/> Woman Owned Business | m. <input type="checkbox"/> Foreign Participation |
| b. <input type="checkbox"/> Minority Owned Business | n. <input type="checkbox"/> Consortium, |
| c. <input type="checkbox"/> Native American Owned Business | <input type="checkbox"/> Partnership or |
| d. <input type="checkbox"/> Asian American Owned Business | <input type="checkbox"/> Joint Venture |
| e. <input type="checkbox"/> African American Owned Business | o. <input type="checkbox"/> Trade Association |
| f. <input type="checkbox"/> Hispanic Owned Business | p. <input type="checkbox"/> Historically Black College or University |
| g. <input type="checkbox"/> Small Business (13 C.F.R. Part 121) | q. <input type="checkbox"/> Academic Institution |
| h. <input type="checkbox"/> Medium Business | r. <input type="checkbox"/> State Government |
| i. <input type="checkbox"/> Large Business (Fortune 500) | s. <input type="checkbox"/> Local Government |
| j. <input type="checkbox"/> Not-for-Profit Firm | t. <input type="checkbox"/> Foreign Government |
| k. <input type="checkbox"/> Non-Profit (IRC Sections 501 & 503) | u. <input type="checkbox"/> LANL Spin-Off |
| l. <input type="checkbox"/> Certified 8(a) Firm | v. <input type="checkbox"/> Other: _____ |

If (n) is checked, is the Company authorized to bind all members of the consortium, partnership or joint venture to the terms and conditions in the proposed agreement?

Yes	No
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4. What activity or contact originated this request?

- | | | | |
|---|----------|---|----------|
| <input type="checkbox"/> Commerce Business Daily Ad | Specify: | <input type="checkbox"/> Publication | Specify: |
| <input type="checkbox"/> Internet/LANL website | Specify: | <input type="checkbox"/> Trade Show/Conference | Specify: |
| <input type="checkbox"/> Previous Visit to LANL | Specify: | <input type="checkbox"/> Previous Project with LANL | Specify: |
| Other | Specify: | | |

5. To the best of your knowledge, are any of the principals of the Company:

Current _____ or former _____ University of California at Los Alamos employees or consultants?
 Current _____ or former _____ Department of Energy employees?

Do not indicate "former" relationship unless it existed within the last two (2) years. Enter "Yes" or "No" for each of the four (4) items. If the answer is "yes", please include a list of names as an attachment. Additional information, reviews and approvals will be required.

6. **Technical Contact**

Name			Title		
(Dr., Mr., Ms., etc.)	(First Name)	(MI)	(Last Name)		
Division					
Mailing Address (If different than company)					
(Address)		(City)	(State)	(Zip Code)	(Country) (Province)
Courier (Express Mail) Address (If different than company)					
(Address)		(City)	(State)	(Zip Code)	(Country) (Province)
Telephone	Ext.	Fax		E-Mail	
Technical Area of Expertise					

7. **Contract Administrator** Same as Technical Contact

Name			Title		
(Dr., Mr., Ms., etc.)	(First Name)	(MI)	(Last Name)		
Division					
Mailing Address (If different than company)					
(Address)		(City)	(State)	(Zip Code)	(Country) (Province)
Courier (Express Mail) Address (If different than company)					
(Address)		(City)	(State)	(Zip Code)	(Country) (Province)
Telephone	Ext.	Fax		E-Mail	

8. Signature Authority Same as Technical Contact Same as Contract Administrator

Name				Title	
(Dr., Mr., Ms., etc.)	(First Name)	(MI)	(Last Name)		
Division					
Mailing Address (If different than company)					
(Address)	(City)	(State)	(Zip Code)	(Country)	(Province)
Courier (Express Mail) Address (If different than company)					
(Address)	(City)	(State)	(Zip Code)	(Country)	(Province)
Telephone	Ext.	Fax	E-Mail		

Intellectual Property

Definition of Proprietary Information:

Information which embodies trade secrets developed at private expense and commercial or financial information which is privileged or confidential under the Freedom of Information Act 5 U.S.C.(b)(4) and which is marked as proprietary information.

	Yes	No
1. Is it anticipated that software, patentable products or processes will be developed under this Agreement?		
2. Is it anticipated that you will provide proprietary data to LANL?		
3. Do you want part or all of the data generated under the Agreement to be protected?		
4. Will any of the documents contain any Proprietary Information?		
5. Does the Company want a Proprietary Information Agreement in place?		

Documents may be supplied to the DOE. Please review all documents for information that you consider proprietary to your organization, and designate the specific information that is to be protected. Use any suitable designation. Note that LANL only considers information supplied by you, or developed as a result of information supplied by you, as proprietary; therefore you should limit these designations to proprietary information.

Notices

1. I realize that, unless I indicate in writing, Los Alamos National Laboratory may transmit all information provided by my company via telecommunications (telephones, faxes, video conferences, e-mail, etc.) and Internet within the Laboratory, to DOE, and to my organization.
2. I understand my organization will be asked to participate in an evaluation upon project completion.
3. Los Alamos National Laboratory offers a number of different mechanisms for collaborating. The terms and conditions vary somewhat between agreements and you are advised to assure yourself that the mechanism chosen best suits your needs before proceeding further.
4. All items of commerce, including technology, are subject to export control laws of the United States. It is the Company's responsibility to be cognizant of these laws and to comply as appropriate with respect to technology arising from the agreement.
5. Rights to intellectual property generated under a project are negotiable between LANL (and/or DOE) and the Company, except for Government rights as defined in the agreement.

I hereby represent that the above information may be relied upon for purposes of conducting the negotiation of the proposed Agreement.

Signature		Date	
Name (Print)			
(Dr., Mr., Ms., etc.)	(First Name)	(Middle Initial)	(Last Name)
Title			
Telephone		Fax	

USER FACILITY AGREEMENT (UFA)

Terms and Conditions

Contract Administrator:
 Kim Sherwood
 email ksherwood@lanl.gov
 Phone: 505-665-1305
 Fax 505-665-0154

1. USER FACILITY AGREEMENT

Are DOE's General Terms and Conditions, and Appendix C, Patents and Technical Data Clauses, acceptable?

Yes	No

General Terms and Conditions, and Appendix C, Patents and Technical Data Clauses, are considered by DOE to be standard and are required for all agreements as written. Whereas for Appendix A and B are written to meet the specific circumstances of each agreement.

Dear Sponsor/Partner

The Department of Energy (DOE) has implemented a policy regarding waiver of departmental added factor and depreciation for small business and nonprofit organizations. This policy, waives DOE departmental added a factor and depreciation for small business and nonprofit organizations as defined below.

Small Business Enterprise. A business that qualifies to be designated as a “small business concern” as defined in 13 C.F.R. Part 121, Small Business Size Regulations.

Nonprofit Organization. Organizations that qualify as nonprofit organizations under the Internal Revenue Code Sections 501 and 503, including Universities and Institutes. Excluded from the definition of “nonprofit organization” for purpose of this waiver are State and local governments.

If your firm or organization qualifies as a small business or nonprofit organization as defined above, please complete the following and return it with the completed questionnaire.

I CERTIFY THAT _____
(Name of Firm or Organization)

**QUALIFIES AS A () SMALL BUSINESS PURSUANT TO 13 C.F.R. PART 121,
SMALL BUSINESS REGULATIONS () NONPROFIT ORGANIZATION
UNDER THE INTERNAL REVENUE CODE SECTIONS 501 AND 503.**

(Certifying Official)

(Title)

(Name of Firm or Organization)

(Date)