**[Instructions for using this Model Intergovernmental Cooperation Act Agreement template**: Insert the requested information any place that is bracketed and bolded. If the bracketed and bolded language contains instructions (including this paragraph), **delete** the instructions before submitting the draft agreement for review or signing the agreement.]

MEMORANDUM OF UNDERSTANDING THROUGH WHICH

*[name of State or local agency]*

IS PURCHASING

*[state what they are purchasing]*

FROM

*[name of your operating unit]*

U.S. DEPARTMENT OF COMMERCE

# Agreement No.

1. PARTIES AND PURPOSE

This Memorandum of Understanding (MOU) establishes an agreement between the ***[name of other party]*** and ***[name of DOC office]***, U.S. Department of Commerce (DOC), through which ***[name of other party]*** will pay ***[name of DOC office]*** for ***[provide a general description of the good/service for which the other party is paying].***

1. AUTHORITY

The authorities for ***[name of other party]*** and DOC to enter into this agreement are:

* 1. the Intergovernmental Cooperation Act, 31 U.S.C. ' 6505, and
  2. *[set forth the other party's legal authority under which it is making the purchase for goods/or services, i.e., the programmatic authority to which the purchase is related].*

1. TERMS AND CONDITIONS

*[State the terms and conditions of the agreement, i.e., what it is specifically that the other party is purchasing, delivery requirements, and the amount that your office will receive as payment.]*

***[Name of your office]*** will achieve full cost recovery for the goods and services it is providing under this agreement**.**

1. TRANSFER OF FUNDS

*[Explain the details of how the other party will pay for the goods/services, e.g., whether payments will be monthly, quarterly, in advance, etc.]*

1. OMB CIRCULAR A-97 CERTIFICATION

As required by OMB Circular A-97, ***[name of other party]*** certifies that the services being requested pursuant to this agreement cannot be procured reasonably and expeditiously by it through ordinary business channels.

1. CONTACTS

The contacts of each party to this agreement are:

*[Name of DOC contact] [title of DOC contact]*

*[Address of DOC contact person]*

Agency DUNS Number:

phone: *[phone number of DOC contact person]*

fax: *[fax number of DOC contact person]*

E-mail: *[E-mail address of DOC contact person]*

*[Name of other party's contact person] [title of other party's contact person] [address of other party's contact person]* Agency DUNS Number *[if applicable]*:

phone: *[phone number of other party's contact person]*

fax: *[fax number of other party's contact person]*

E-mail: *[E-mail address of other party's contact person]*

The parties agree that if there is a change regarding the information in this section, the party making the change will notify the other party in writing of such change.

1. DURATION OF AGREEMENT, AMENDMENTS AND MODIFICATIONS

This agreement will become effective when signed by all parties. The agreement will terminate on ***[date]***, but may be amended at any time by mutual consent of the parties.

*[NOTE: If the agreement will last longer than 3 years, the following sentence should be included in the agreement: "The parties will review this agreement at least once every three years to determine whether it should be revised, renewed, or canceled."]*

Any party may terminate this agreement by providing days written notice to the other party.

This agreement is subject to the availability of funds.

1. RESOLUTION OF DISAGREEMENTS

# Should disagreement arise on the interpretation of the provisions of this agreement, or amendments and/or revisions thereto, that cannot be resolved at the operating level, the area(s) of disagreement shall be stated in writing by each party and presented to the other party for consideration. If agreement on interpretation is not reached within thirty days, the parties shall forward the written presentation of the disagreement to respective higher officials for appropriate resolution.

*[signature of person who has authority to bind other party to the agreement] [typed name]*

*[typed title]*

*[typed name of other party] [typed address of other party]*

*[date]*

*[signature--must be an official with authority to sign "Intergovernmental Cooperation Act" Agreements] [typed name]*

*[typed title]*

*[typed office at DOC]*

U.S. Department of Commerce

*[typed address]*

*[date]*