E. B. Howard CONSULTING

Grant Submission Account Information

ENTITY INFORMATION

Legal Name of Entity:

Entity Contact Person:

Entity Address:

Tel   Email

Fax   Web

DUNS #   EIN #

Please Note: Each account requires different information for sign in, please fill out all information.

SAM ACCOUNT

Username: Password:

MPIN:

Name of person on account:

Email address associated with account:

GRANTS.GOV EBIZ-POC ACCOUNT [ORGANIZATION]

Username: Password:

Entity Name:

Email address associated with account:

GRANTS.GOV USER ACCOUNT [AOR]

Username: Password:

Name of person on account:

Email address associated with account:

E. B. Howard
CONSULTING

ERA COMMONS/ASSIST   ACCOUNT ADMINISTRATOR (AA)

Username: Password:

Name of person on account:

Email address associated with account:

ERA COMMONS/ASSIST   SIGNING OFFICAL (SO)

Username: Password:

Name of person on account:

Email address associated with account:

ERA COMMONS/ASSIST   PRINCIPAL INVESTIGATOR (PI)

Username: Password:

Name of person on account:

Email address associated with account:

FASTLANE   PRINCIPAL INVESTIGATOR (PI/CO-PI)

Last Name: NSF ID: Password:

Email address associated with account:

FASTLANE   OTHER AUTHORIZED USERS (OAU)

OAU Last Name: OAU NSF ID: OAU Password:

Proposal ID: Proposal PIN:

Email address associated with account: