**FISCAL AGENT**

**ROLES AND RESPONSIBILITIES**

A Fiscal Agent relationship is an arrangement in which a 501c(3) organization agrees to act and provide services in support of or on behalf of another entity. Grant allocations are awarded to the Fiscal Agent with the understanding that the Fiscal Agent and the applicant have agreed to some level of collaboration on the identified project.

Fundamental expectations of the Fiscal Agent and applicant relationship:

1. The Fiscal Agent should read the application and have confidence that the applicant agency will be able to successfully implement the proposed project or program.
2. The Fiscal Agent will accept allocated funds from PHMDC for the identified program or project and reimburse the applicant for allowable expenses incurred performing the work of the contracted program.
3. The Fiscal Agent and the applicant agency will decide who will provide and purchase the necessary insurance coverage for the identified program.
4. The Fiscal Agent will ensure that the funded project or program is in compliance with PHMDC Service Contract requirements.

Additionally the party acting as the Fiscal Agent may want to:

* Ensure that the proposed project or program is in alignment with agency mission and goals.
* Seek Board approval before accepting responsibility for the Applicant’s program or project.
* Establish a formal Memorandum of Understanding with the Applicant that outlines the roles and responsibilities of parties involved.

**The Fiscal Agent should complete the following:**

|  |  |
| --- | --- |
| **Applicant Agency or Group:** |  |
| **Amount Requested:**  |  |
| **Title of Proposal:** |  |
| **Applicant Contact Person:** |  |
| **Address:** |  |
| **Telephone:** |  |
| **E-Mail:** |  |
|  |  |
| **Name of Fiscal Agent:** |  |
| **Fiscal Agent Contact Person:** |  |
| **Address:** |  |
| **Telephone:** |  |
| **Email:** |  |
| **Is Fiscal Agent a 501c(3)?** |  |
| **Will the Fiscal Agent include the proposed project on their insurance policy?** |  |

***If the applicant agency is funded through PHMDC, funds will be administered through a contract with the identified Fiscal Agent. As an identified Fiscal Agent for this proposal, Agent agrees to meet fundamental expectations as outlined in this document. Additionally, the Fiscal Agent states intent to comply with PHMDC contract requirements.***

|  |  |
| --- | --- |
| **Fiscal Agent Signature:**  |  |
| **Enter Name:**  |  |
| **Date:** |  |