MONTANA DNRC RESTAURANT AUTHORIZATION FORM INSTRUCTIONS

The **Restaurant Authorization Form** is required only ***when a pro card or vendor invoice is utilized*** to purchase **fire related**, sit down restaurant meals, and all restaurant prepared take-out meals delivered to an office or staging location. ***This form is not needed for sack lunches or meals purchased for the fire line. This form is not needed when meals are purchased out-of-pocket.*** If expenses are covered out-of-pocket, a travel expense voucher should be submitted.

Examples of use:

- Fire camp meal is not provided and meals are on your own
- Multiple people are en-route to/from a fire assignment
- Severity and seasonal resources are held over and must be fed
- Individual fire meal paid with state credit card
- Personnel not relieved of duty and therefore unable to supply independent meal(s)

Fire meal rates are only used within the state of Montana. Meal rates are as follows:

Meal	In State
Breakfast	$10.00
Lunch	$11.00
Dinner	$15.00
Total	**$36.00**

The restaurant authorization form is required only when a pro card or vendor invoice is utilized. When traveling outside the state of Montana, out-of-state employee per diem can be utilized as per MCA 2-18-501 and a travel expense voucher should be submitted.

Out-of-state/country meal rates are as follows:

	Out of State	Out of Country
Breakfast	$11.00	Federal/CONUS Per Diem Rates for Area
Lunch	$12.00	
Dinner	$23.00	
Total	**$46.00**	

- The Restaurant Authorization form should be filled out in full and attached to the appropriate payment documentation. **A detailed restaurant receipt is required in all situations.**
- A gratuity is allowed when purchasing meals related to fire assignments (***except when*** out-of-state meals are purchased out-of-pocket). The maximum gratuity allowed is 15% unless it is clearly stated on the menu that large groups are automatically assessed a higher percentage.
- Individual names of those being fed must be included. If names are not available (i.e. IA resources being dispatched) please include this in the justification. An overage *is allowable in an exigency circumstance (i.e. IA, only one restaurant in town and menu prices exceed fire meal rates).* **This MUST be documented on the receipt.**

If arranging for a direct bill with the vendor, a vendor invoice form should also be filled out and attached. Please make sure to include the Tax ID number and complete address of the vendor and obtain their authorizing signature.

For out-of-state fire assignments – out-of-state meal rates are in effect from the time of departure from the home unit or point of departure to the time of return to the home unit or point of return, regardless of method of travel. For assignments that are out-of-country, federal rates apply.

MONTANA DNRC RESTAURANT AUTHORIZATION FORM

Area or Unit Office: _____ Date: _____

Fire Name: _____ SABHRS/Incident #: _____

Individual Name: _____ Crew Name: _____ Engine #: _____

Payment Method: ☐ State Credit Card ☐ Vendor Charge Acct ☐ Other

Eat In Restaurant: ☐ Take Out* ☐ * Justification:	
Restaurant Name:	Federal ID#:
Address:	
No. of Fire Meals:	
Maximum $ allowed per meal: $ _____	Meal(s) cannot include alcoholic beverages. Any costs exceeding the maximum allocated amount must be paid to the vendor directly by the individual.
Vendor Signature if charging/direct bill:	
Printed Name of all Personnel (Last name first) or attach list:	
1.	11.
2.	12.
3.	13.
4.	14.
5.	15.
6.	16.
7.	17.
8.	18.
9.	19.
10.	20.
Comments/Justification:	

Pro Card Held by: **Name:** _____ _____

Signature: _____