

Reason for printing:

REORDER FORM

Last Four digits of Credit Card: _ **NCAC Credit Card Agreement**

Pennsylvania Digital Fingerprint Program



This NCAC Agreement ("Agreement") is between IDEMIA Identity and Security USA, LLC ("IDEMIA") and the company or organization identified below ("Customer"), and sets forth the terms and conditions under which IDEMIA will provide no-charge authorization codes ("Authorization Code(s)") to Customer for distribution to applicants required to submit to a fingerprint based background check ("Applicant(s)") through the Commonwealth of Pennsylvania, Digital Fingerprint Program.

Applicants will present an Authorization Code to IDEMIA at the tir information ("Applicant Information"). Upon IDEMIA's collection of Ap Customer in a Credit Card Authorization Agreement ("Credit Card").	
IDEMIA will provide an initial quantity of (minimum ord Agreement and a Credit Card Authorization Agreement. All of the cod at the date of expiration of the Credit Card, whichever occurs first. C been redeemed before expiration. IDEMIA will provide additional Aut Customer. The provision and redemption of additional Authorization Agreement.	les will expire six (6) months of the date of issuance to Customer or Customer will not be charged for Authorization Codes that have not horization Codes at a quantity (minimum order of 50) requested by
IDEMIA will provide all Authorization Codes to an email address pr distribute the Authorization Codes to applicants via any method of del	
IDEMIA will debit the Credit Card for the amount corresponding to the this agreement. Customer will also be charged a \$1 convenience fee The receipt provided to the applicant at time of service will indicate therefore, reflect the \$1 convenience fee established with this agreement.	for every applicant who uses an NCAC code assigned to Customer. payment via NCAC and is not a credit card receipt, and does not,
If the Commonwealth of Pennsylvania or other relevant government agrees, IDEMIA will charge Customer the new fee for any redemption of fee change.	
Customer acknowledges and agrees that Customer will be respons Customer and provided to IDEMIA by applicants, regardless of whether by fraud, redeemed by persons to whom Customer did not issue the Aand conditions under which Customer distributes the Authorization Co	er the corresponding Authorization Codes are obtained or redeemed Authorization Codes, or that are transferred in violation of any terms
If a charge to the Credit Card is declined by IDEMIA's payment procunable to obtain payment through the Credit Card, or if any IDEMIA ch payment in full prior to or at the time of processing any further applicathe payment issue has been resolved.	arges to the Credit Card are refused or disputed, IDEMIA will require
Please indicate acceptance of these terms by having an authorized revial fax at 952-945-3326.	epresentative of Customer sign below, and return a copy to IDEMIA
ACCEPTED AND AGREED TO:	DATE:
IF HAND WRITING, PLEASE PRINT LEGIBLY	DATE
Name of Customer:	EIN or Tax ID:
Signature:	Printed Name:
Title:	
Service Code (s):	
ORI: Applic	eant type: