

TENNESSEE REORDER

Enrollment Services Statewide Network

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 State of Tennessee ,Digital Fingerprint Program.

	MIA at the time IDEMIA collects their fingerprints and verifies their on IDEMIA's collection of Applicant Information, IDEMIA will charge the uthorization Agreement ("Credit Card").
of this Agreement and a Credit Card Authorization Adate of issuance to Customer or at the date of exp charged for Authorization Codes that have not been	(minimum order of 50) Authorization Codes to Customer upon execution greement. All of the codes will expire one (1) year of the iration of the Credit Card, whichever occurs first. Customer will not be redeemed before expiration. IDEMIA will provide additional Authorization by Customer. The provision and redemption of additional Authorization terms of this Agreement.
	nail address provided by Customer, in a password-protected file. applicants via any method of delivery (e.g., email, US mail).
IDEMIA will debit the Credit Card for the amount concustomer in this agreement.	rresponding to the Tennessee Fingerprint service code identified by the
	ent agency authorizes or dictates a fee increase or decrease new fee for any redemption of Authorization Codes occurring on or after
Customer acknowledges and agrees that Customer will be responsible for all Credit Card charges for Authorization Codes issued to Customer and provided to IDEMIA by applicants, regardless of whether the corresponding Authorization Codes are obtained or redeemed by fraud, redeemed by persons to whom Customer did not issue the Authorization Codes, or that are transferred in violation of any terms and conditions under which Customer distributes the Authorization Codes.	
otherwise unable to obtain payment through the Cr	s payment processor or by the issuer of the Credit Card, or if IDEMIA is edit Card, or if any IDEMIA charges to the Credit Card are refused or or at the time of processing any further applicants of Customer, until such tissue has been resolved.
Please indicate acceptance of these terms by having a copy to IDEMIA via fax at 615-993-5983.	an authorized representative of Customer sign below, and return
ACCEPTED AND AGREED TO:	DATE:
Name of Customer:	EIN or Tax ID:
Signature:	Printed Name:
Title:	
ORI (required):	Applicant Type(s):
Service Code(s) (optional):	
OCA (if applicable):	Agency ID/ Agency Name: