



**TennesseeAnytime eGovernment Online Services**

150 Fourth Avenue North, Suite 510 • Nashville, TN 37219

(615) 313-0300 or 1-866-8TN-EGOV • Fax (615) 313-0301 • services@tnanytime.org

**TennesseeAnytime Registration Agreement for  
Childcare Providers Processing EAVs Online**

Any citizen can use most online services, but some are premium services. Premium services may be associated with statutory or other requirements, and may be accessed only by subscribers or registered users who meet the requirements. EAVPAY Online Service is a Registered User Service. **There is no fee to be a registered user.**

Childcare Providers who register to use this online service can:

- Enter attendance information for an EAV (Enrollment Attendance Verification) via the Internet
- Add children to an EAV via the Internet
- Submit the EAV electronically for faster payment processing

To register, simply complete the four sections of this agreement, sign, and submit your agreement. We will fax or mail your user names and passwords.

Please direct any registration questions to TennesseeAnytime at the address, phone or e-mail contact above.

Please direct any questions about payment or receipt of checks to Department of Human Services, Fiscal Services at 1-800-362-8004.

---

**Section 1: REGISTRANT INFORMATION**

Organization Name

Attention/Title

Address

City, State, Zip

Telephone (     )

Ext

\* Fax (     )

Main Contact E-mail Address

---

**\*If you do not have a dedicated, always-on fax machine, do not provide a fax number.** We will mail your information.

---

## Section 2: CHOOSE ONLINE SERVICE(S)

EAVPAY Online Service – Submit EAVs electronically for faster payment processing. No usage fee.  
**See a demo and use this online service at: <http://www.tennesseeanytime.org/eavpay/>**

---

## Section 3: DESIGNATE USERS ASSIGNED TO REGISTRATION

Designate your users below. Each user must be designated as either an “**Authorized User (AU)**” or a “**Data Entry User (DEU)**.” If the primary contact at the childcare center is to have access to the application, this person must be included as a user below.

**An Authorized User (AU) can:**

- Enter attendance information for an EAV
- Add children to an EAV
- Submit the EAV to the Tennessee Dept. of Human Services

**A Data Entry User (DEU) can:**

- Enter attendance information for an EAV
- Add children to an EAV

Please be aware of the following when completing your user list:

- You must have at least **one Authorized User (AU)**
- Your Provider ID number and extension is the number used to process EAVs with the Department of Human Services (*not a telephone number*). This number will be noted on a paper EAV. If you do not know your Provider ID number, call 1-800-362-8004. Provider ID numbers and an extension must be noted on this registration agreement or we cannot process your paperwork.
- If you are a multi-site provider, you must designate a user for all of your locations/extensions. Users may access more than one location.
- Any changes to the your users list must be made in writing and faxed or mailed to TennesseeAnytime.
- For security reasons, we cannot e-mail user names and passwords.

	Name	E-mail Address	User Type AU or DEU	Provider ID Number	Extension(s) to access
1.			AU		
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

---

#### Section 4: EAVPAY ONLINE SERVICES USE AGREEMENT

By my signature below, I understand the following:

1. I am an eligible childcare provider registered to process EAVs with the Tennessee Department of Human Services.
2. I will use the EAVPAY Online Service solely to review and process EAVs via the Internet.
- 3. I may continue to receive a paper EAV until the online registration process is complete and that my online EAVs will be available at the end of my next billing cycle.**
4. Information presented on the EAVPAY Online Service will be used solely to review and process EAVs via the Internet.
5. All material and information provided to eligible providers via the EAVPAY Online Service shall be regarded as confidential information in accordance with the provisions of Federal and State law and ethical standards, and all necessary steps shall be taken by the provider to safeguard the confidentiality of such material or information in conformance with Federal and State law and ethical standards.
6. I will adhere to the requirements as outlined in the Agreement and will maintain an accurate list of names assigned as designated users for the EAVPAY Online Service.

Authorized Signature

Print Name

Title

Date

E-mail address

---

**SIGN AND SEND REGISTRATION AGREEMENT FOR EAVPAY ONLINE PROCESSING**

**Have you:**

1. Provided complete contact information in Section 1?
2. Noted the Web address for EAVPAY Online Services? <http://www.tennesseeanytime.org/eavpay>
3. Designated at least one Authorized User in Section 3?
4. Signed the EAVPAY Online Services Use Agreement in Section 4?

**Submitting the Agreement**

Submit all four pages of this agreement.

For faster processing, you may fax the agreement, but **you must still mail** all four pages of the original signed registration agreement.

If faxed, enter date faxed: \_\_\_\_\_

Fax to (615) 313-0301 and then mail original to the address below:  
TennesseeAnytime  
150 Fourth Avenue North, Suite 510  
Nashville, TN 37219

REGISTRANT SIGNATURE

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title