



## Agency Update Notification Form

Use this form to provide updated information about your agency for our records. An updated form must be submitted when there is a change in Administrative contacts, address, phone/fax number.

### AGENCY INFORMATION

Agency Name \_\_\_\_\_ Date: \_\_\_\_\_

DBA Name: \_\_\_\_\_ TIN: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### CONTACT INFORMATION

**\*\*Security PIN Code REQUIRED; Each Admin staff must provide a UNIQUE four (4) DIGIT NUMBER in designated field:**

\*Administrator: \_\_\_\_\_ \*\*Security PIN Code: \_\_\_\_\_

Email: \_\_\_\_\_

\*Alternate Administrator: \_\_\_\_\_ \*\*Security PIN Code: \_\_\_\_\_

Email: \_\_\_\_\_

**\*Administrator and Alternate Administrator are ONLY personnel with Administrative Rights**

OPTIONAL – List any additional Personnel that are authorized to Enable Vesta User(s) or Reset Password(s). For example, the user that performs Visit Maintenance forgot their password and is locked out of the EVV system. The administrator and alternate administrator are at a conference and they are not able to login to VestaEVV to “Clear Password” for the user. In this example, the person(s) listed below may call Vesta Support for assistance in activating disabled Vesta Login users and/or Vesta Login Password.

**\*\*Security PIN Code REQUIRED; Each personnel must provide a UNIQUE four (4) DIGIT NUMBER in designated field:**

Authorized Personnel: \_\_\_\_\_ \*\*Security PIN CODE: \_\_\_\_\_

Email: \_\_\_\_\_

Authorized Personnel: \_\_\_\_\_ \*\*Security PIN CODE: \_\_\_\_\_

Email: \_\_\_\_\_

Administrator/Alternate Administrator Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature (Required): \_\_\_\_\_

Send completed form via (Fax) 956.412.1464 or (email) info@vestaevv.com

[www.vestaevv.com](http://www.vestaevv.com) | 844.880.2400

1605 W Tyler Avenue, Harlingen, TX 78550