

HIE Organization Authorized Agent Form

Requesting Organization: _____

Primary Account Contact:

This role serves as the primary point-of-contact for all ongoing support issues related to maintaining account integrity. Responsibilities will include authorizing new account creation, notifying OnePartner of internal organizational changes impacting account authorization/usage and addressing general account inquiries.

Primary Agent: _____
(First) (Last)

Job Title: _____

Contact Telephone Number: _____ Mobile: _____

E-Mail: _____

Secondary (Backup) Account Contact

This role serves as a backup to the primary point-of-contact for all ongoing support issues related to maintaining account integrity. Responsibilities will include authorizing new account creation, notifying OnePartner of internal organizational changes impacting account authorization/usage and addressing general account inquiries.

Secondary Agent: _____
(First) (Last)

Job Title: _____

Contact Telephone Number: _____ Mobile: _____

E-Mail: _____

Special Instructions/Comments (if any)

Instructions: _____

Requesting Organization's Authorized Agent: _____
(Signature)

(Print Name)

OnePartner HIE Authorized Agent: _____
(Signature)

(Print Name)