**National Institute for Occupational Safety and Health (NIOSH)**

**National Personal Protective Technology Laboratory (NPPTL)**

**Technology Evaluation Branch (TEB)**

**Respirator Certification Fees**

**Pay.GOV Registration**

**and**

**Fee Payment User Instructions**

Table of Contents

[**1.** **Pay.GOV Registration Process** 1](#_Toc390158566)

[**2.** **Fee Payment User Instructions** 2](#_Toc390158567)

[**Appendix A: Pay.GOV Registration:** A-1](#_Toc390158568)

[**Appendix B: Pay.GOV Self-Enrollment:** B-1](#_Toc390158569)

[**Appendix C: Pay.GOV User Fee Payment Form:** C-1](#_Toc390158570)

1. **Pay.GOV Registration Process**
   1. Prior to making any payment of respirator certification fees Manufacturers need to establish an account with Pay.GOV
   2. Follow the link provided below:

**Pay.gov homepage** <https://pay.gov/paygov/homepage>

* 1. On the center of the page click on the link **“Click here to register”** to start the process or use the link provided below.

**Registration:** <https://pay.gov/paygov/accounts/selfEnrollmentRob.html>

* 1. This link opens the Pay.GOV Information and User Responsibility Statement. (See sample at Appendix A)
     1. After reading the statement, check the box and fill in the acceptance button.
     2. This will activate the **“Continue with Self-Enrollment”** tab. Click on it to proceed.
  2. Complete the On-Line Self-Enrollment form. (See sample at Appendix B)
     1. You must complete all mandatory blocks annotated with an asterisk.
     2. You will have the option to select whether you want to receive email notifications related to Automated Clearing House (ACH) payments.
     3. You will be required to create a password for your account.
     4. A User name will be created by the system by adding the first name and last name together without a space. Example, JohnDoe. If there is more than one user with the same name the system will assign a numeric designator such as JohnDoe1. (See FAQ Section 2)
     5. Upon completion of entering all of the required information on the On-Line form, click the **“Submit”** tab to complete the registration process.
  3. Once you have completed the registration process and have your User name and Password, you will be able to return to the Pay.GOV homepage, log in and have access to the forms necessary to submit payments On-Line using the ACH process.
  4. If you have any questions regarding Pay.GOV procedures there is a **Frequently Asked Questions (FAQ)** link available. See the Help section on the homepage or use the link provided below:

<https://pay.gov/paygov/faqs.html?nc=1402335793554#accesspg>

**1. General Questions**

**2. User Account Questions**

**3. Usage Questions**

**4. Payment Processing**

1. **Fee Payment User Instructions**
   1. Open the Pay.GOV homepage: [https://pay.gov/paygov/homepage](https://pay.gov/paygov/homepage.html?nc=1402329280468)
   2. Locate the **“User Fee Form”** 
      1. Go to the **Find Public Forms** section in the left column just below the log in.
      2. You have three options to search by: Form Name, Agency Name or Type the name in the text box.
      3. There are currently only six forms in the system under the Centers for Disease Control and Prevention (CDC). You can use any of the three methods to access the form. See below links:

[by Form Name](https://pay.gov/paygov/browseByNameIntro.html?nc=1402329281389)

[**CDC Royalty BMLA and User Fee Form**](https://pay.gov/paygov/forms/formInstance.html?nc=1402329438912&agencyFormId=37474254&userFormSearch=https%3A%2F%2Fpay.gov%2Fpaygov%2FagencySearchForms.html%3FshowingDetails%3Dtrue%26showingAll%3Dfalse%26sortProperty%3DagencyFormName%26totalResults%3D6%26nc%3D1402329398430%26agencyDN%3Dou%253DFA_Centers%2Bfor%2BDisease%2BControl%2Band%2BPrevention%252Cou%253DFA_Secretary%2Bof%2BHealth%2Band%2BHuman%2BServices%252Cou%253DFA_Department%2Bof%2BHealth%2Band%2BHuman%2BServices%252Cou%253DFA_Executive%2BBranch%252Cou%253DFederal%2BAgency%252Cou%253DTreasury%2BWeb%2BApplication%2BInfrastructure%252Cou%253DFiscal%2BService%252Cou%253DDepartment%2Bof%2Bthe%2BTreasury%252Co%253DU.S.%2BGovernment%252Cc%253DUS%26ascending%3Dtrue%26alphabet%3DC%26pageOffset%3D0)

Form Number: **CDC User Fee Form**

[by Agency Name](https://pay.gov/paygov/browseAgencyIntro.html?nc=1402329281389)

Select (C) for Centers for Disease Control and Prevention

[**CDC Royalty BMLA and User Fee Form**](https://pay.gov/paygov/forms/formInstance.html?nc=1402329438912&agencyFormId=37474254&userFormSearch=https%3A%2F%2Fpay.gov%2Fpaygov%2FagencySearchForms.html%3FshowingDetails%3Dtrue%26showingAll%3Dfalse%26sortProperty%3DagencyFormName%26totalResults%3D6%26nc%3D1402329398430%26agencyDN%3Dou%253DFA_Centers%2Bfor%2BDisease%2BControl%2Band%2BPrevention%252Cou%253DFA_Secretary%2Bof%2BHealth%2Band%2BHuman%2BServices%252Cou%253DFA_Department%2Bof%2BHealth%2Band%2BHuman%2BServices%252Cou%253DFA_Executive%2BBranch%252Cou%253DFederal%2BAgency%252Cou%253DTreasury%2BWeb%2BApplication%2BInfrastructure%252Cou%253DFiscal%2BService%252Cou%253DDepartment%2Bof%2Bthe%2BTreasury%252Co%253DU.S.%2BGovernment%252Cc%253DUS%26ascending%3Dtrue%26alphabet%3DC%26pageOffset%3D0)

Form Number: **CDC User Fee Form**

Search Public Forms (Enter CDC then select “Go”)

[**CDC Royalty BMLA and User Fee Form**](https://pay.gov/paygov/forms/formInstance.html?nc=1402329438912&agencyFormId=37474254&userFormSearch=https%3A%2F%2Fpay.gov%2Fpaygov%2FagencySearchForms.html%3FshowingDetails%3Dtrue%26showingAll%3Dfalse%26sortProperty%3DagencyFormName%26totalResults%3D6%26nc%3D1402329398430%26agencyDN%3Dou%253DFA_Centers%2Bfor%2BDisease%2BControl%2Band%2BPrevention%252Cou%253DFA_Secretary%2Bof%2BHealth%2Band%2BHuman%2BServices%252Cou%253DFA_Department%2Bof%2BHealth%2Band%2BHuman%2BServices%252Cou%253DFA_Executive%2BBranch%252Cou%253DFederal%2BAgency%252Cou%253DTreasury%2BWeb%2BApplication%2BInfrastructure%252Cou%253DFiscal%2BService%252Cou%253DDepartment%2Bof%2Bthe%2BTreasury%252Co%253DU.S.%2BGovernment%252Cc%253DUS%26ascending%3Dtrue%26alphabet%3DC%26pageOffset%3D0)

Form Number: **CDC User Fee Form**

* + 1. Click on the form name on the webpage to open an On-Line fillable form.
  1. Complete the On-Line CDC User Fee Form. (See sample at Appendix C)
     1. You must complete all mandatory blocks annotated with an asterisk.
     2. For the block entitled: **“CDC Invoice No.”** enter your three digit **Applicant Assigned Reference (AAR)** Number. If the payment is related to an existing approval, enter the **Task Number (TN)** associated with it.
     3. For the block entitled: **“Payment Options”** select **“NIOSH User Fee”** from the three choices in the drop down menu.
     4. Enter a short description in the comments block regarding what the payment is for. Add any specific identifying information regarding the submission which may help facilitate processing the payment. Refer to 42 CFR Part 84 for fees.
  2. When you submit the form you will be prompted to enter your ACH debit information.
  3. The below information has been extracted from the FAQ section 4 of the Pay.GOV website: <https://pay.gov/paygov/faqs.html?nc=1402335793554#accesspg>

**What is an "ACH" payment?**  
ACH stands for "Automated Clearing House" and refers to an electronic debit from a checking or savings account, commonly known as a direct debit.

**What types of plastic cards are accepted?**  
Pay.gov accepts both credit and debit cards. We accept Visa, MasterCard, American Express, and Discover credit cards. Debit cards processed through Visa or MasterCard are also accepted; these have the Visa or MasterCard logo on the card. ATM-only cards and debit cards from other processors are not accepted.

**How do I set up a recurring payment?**  
Recurring payments are only available for ACH transactions (direct debits from a checking or a savings account). Not all agencies provide this service. If the recurring payment option is offered, you must register for a Pay.gov user account and sign in using that account. This process normally takes about five minutes to complete.

When submitting your transaction, choose the "ACH" payment method. On the payment screen, ensure that all required information (indicated by an \*) has been entered correctly. By signing in using your account the "Scheduled Payment Options" service is enabled towards the bottom of the screen. Select "One Time Payment" to make a single payment or "Multiple Payments" to set up a recurring payment. Follow the on-screen prompts to complete the transaction.

**Can I make a recurring payment using a credit card?**  
No. Recurring payments must use the ACH payment method.

* 1. Submitted payment forms will be saved in the system under your account. You also have the option to save copies to your own computer by converting them to .PDF format and using the “Save As” feature. See additional information regarding FAQ Section 3 of the Pay.GOV website: <https://pay.gov/paygov/faqs.html?nc=1402335793554#accesspg>

**Appendix A: Pay.GOV Registration:**

<https://pay.gov/paygov/accounts/selfEnrollmentRob.html>

PAY.GOV INFORMATION AND USER RESPONSIBILITY STATEMENT

USER RESPONSIBILITIES:  
Once assigned a User Name and password, the user agrees to be responsible for the consequences that result from the disclosure or use of the password. To avoid compromising the password, the user agrees that they will:

\* Not make the password known to anyone or put it in written form unsecured  
\* Prevent others from watching password entry  
\* Prevent others from guessing the password by not using the names of persons, places, or things that are identified with the user as part of the password  
\* Log off of the system whenever the user's computer is unattended  
\* If a user feels that their password has been compromised, they must change it immediately and report it to Pay.gov Customer Support at 1-800-624-1373.   
\* Unauthorized use must immediately be reported to Pay.gov Customer Support at 1-800-624-1373.  
\* You must conduct only authorized business on the system

SECRET QUESTION AND ANSWER:   
The Pay.gov application allows users to reset their own password using a Secret Question/Answer, which is established by the user during account creation for self-enrolled users or initial login for agency enrolled users. The secret answer must be protected in the same manner as a user protects their password. The Secret Question and Secret Answer should be easy for a user to remember but difficult for others to know.

CHALLENGE QUESTION AND ANSWER:  
In the event a user is unable use the Secret Question/Answer functionality that allows a user to reset their own password, Pay.gov requires that a user set up a Challenge Question/ Answer which is established during account creation for self-enrolled users or initial login for agency enrolled users. This Challenge Question/Answer will allow Pay.gov customer service to access to the Challenge Question/Answer in order to validate the identity of the user before assisting the user with password resets. The challenge question/answer should be different than the Secret Question/Answer and must be protected in the same manner as a user protects their password. The Challenge Question/Answer should be easy for a user to remember but difficult for others to know.

USER ACCOUNT/PASSWORD POLICES

USER NAME AND PASSWORD:   
When an agency-enrolled user account is created in Pay.gov, the application will email the user a user name to be used when logging in to the Pay.gov application; the user must contact Pay.gov Customer Service to obtain their initial password. A self-enrolled user is provided with a user name as part of the self-enrollment process and will create their own password. The password, which is under the user's sole control, provides protection for the user and Pay.gov. The agency-enrolled user is immediately required to change the password after initially logging on to the system. The pattern of the User Name may be known by others and the User Name is displayed on the screen when entered, but the password is not displayed and not known by anyone other than the user.

Agency-enrolled user account passwords expire after ninety (90) calendar days and the system will automatically prompt the user to reset their password.

INACTIVE USERS:   
After one hundred and twenty (120) days of non-use, agency-enrolled user accounts may be subject to deactivation. If an account is deactivated, the user will need to contact their Agency Security Contact and request that the account be reactivated.

LOCKED ACCOUNTS:   
If at any time during the login process a user account becomes locked, the account will remain locked for fifteen (15) minutes. The account will then unlock and the system will allow the user additional attempts to logon with the correct password before re-locking the account. If a user does not know or cannot remember their password, they should reset their password by selecting the "Trouble Logging In?" link on the Pay.gov home page.

If user requires assistance with the login process or needs their password reset as they are unable to answer their secret question/answer, they should contact Pay.gov Customer Service at 1-800-624-1373.

However, if a self-enrolled user does not remember their password and is unable to answer the secret or challenge question in order to reset their password, the self-enrolled user may need to create a new user account.

Additionally, below are the Rules of Behavior for External Users of Financial Management Service (FMS) Systems.

1. You must conduct only authorized business on the system.

2. Your level of access to the FMS system is limited to ensure your access is no more than necessary to perform your legitimate tasks or assigned duties. If you believe you are being granted access that you should not have, you must immediately notify Pay.gov Customer Service at 1-800-624-1373.

3. You must maintain the confidentiality of your authentication credentials such as your password. Do not reveal your authentication credentials to anyone; an FMS employee should never ask you to reveal them.

4. You must follow proper logon/logoff procedures. You must manually logon to your session; do not store you password locally on your system or utilize any automated logon capabilities. You must promptly logoff when session access is no longer needed. If a logoff function is unavailable, you must close your browser. Never leave your computer unattended while logged into the system.

5. You must report all security incidents or suspected incidents (e.g., lost passwords, improper or suspicious acts) related to the FMS system to the Pay.gov Customer Service at 1-800-624-1373.

6. You must not establish any unauthorized interfaces between FMS applications and other non-FMS systems.

7. Your access to the FMS system is governed by, and subject to, Federal law, including, but not limited to, the Privacy Act, 5 U.S.C. 552a, if the applicable FMS system maintains individual Privacy Act information. Your access to the FMS system constitutes your consent to the retrieval and disclosure of the information within the scope of your authorized access, subject to the Privacy Act, and applicable Federal laws.

8. You must safeguard system resources against waste, loss, abuse, unauthorized use or disclosure, and misappropriation.

9. You must not process classified national security information on the system.

10. You must not browse, search or reveal FMS system information except in accordance with that which is required to perform your legitimate tasks or assigned duties. You must not retrieve information, or in any other way disclose information, for someone who does not have authority to access that information.

11. By your signature or electronic acceptance (such as by clicking an acceptance button on the screen), you must agree to these rules.

12. You should contact Pay.gov Customer Service at 1-800-624-1373 if you do not understand any of these rules.

ACCEPTANCE:  
I have read the above Rules of Behavior for External Users of Financial Management Service (FMS) Systems. By my electronic acceptance and/or signature below, I acknowledge and agree that my access to the FMS system is covered by, and subject to, such Rules. Further, I acknowledge and accept that any violation by me of these Rules may subject me to civil and/or criminal actions and that FMS retains the right, at its sole discretion, to terminate, cancel or suspend my access rights to the FMS system(s) at any time, without notice.

AND

I have read the Pay.gov User Responsibility Statement, agree to its terms, and understand my responsibilities for the use and protection of my logon ID and password. Further, I understand the consequences that may result from disclosure or inappropriate use. If I fail to adhere to any of the terms in this statement, the Pay.gov Agent may revoke my logon ID and take other appropriate action.

Acceptance of the Pay.gov User Responsibility agreement and the Rules of Behavior for External Users of Financial Management Service (FMS) Systems will be captured and stored through an automated process when logging in to the Pay.gov application.

I have read the Financial Management Service Pay.gov System IT Security Rules of Behavior and fully understand the security requirements of the information systems, applications, and data. I further understand that violation of these rules may be grounds for administrative and/or disciplinary action by FMS and may result in actions up to and including termination or prosecution under federal law.   
  
I accept the Pay.gov Rules of Behavior   
I decline the Pay.gov Rules of Behavior

**Continue with self-enrollment**

**Appendix B: Pay.GOV Self-Enrollment:**

**Welcome to the Pay.gov self-enrollment process.**   
PUBLIC FORMS are freely available to everyone. It is not necessary to self-enroll to make a payment using a Public Form. However, by self-enrolling with Pay.gov, you can save your submitted forms for later viewing/retrieval. Self-enrollment also enables you to schedule recurring payments.   
For a list of Public Forms, use the Find Forms tool in the left-hand navigation.   
If you require access to a NON-PUBLIC FORM, do not self-enroll. To obtain access to a Non-Public Form, please contact and enroll with the associated government agency.

|  |  |
| --- | --- |
| Required Fields are marked with an asterisk \*. | |
| **First Name :** | \* |
| **Middle Name or Initial :** |  |
| **Last Name :** | \* |
| **Address 1 :** | \* |
| **Address 2 :** |  |
| **City :** | \* |
| **State/Province:** | \* |
| **ZIP/Postal Code :** | (required for USA and Canada) |
| **Country :** | \* |
| **Phone :** | \* |
| **Fax :** |  |

Enter Company Address

|  |  |  |
| --- | --- | --- |
| **Company Name :** | | \* |
| **Company Address 1 :** | | \* |
| **Company Address 2 :** | |  |
| **Company City :** | | \* |
| **Company State:** | | \* |
| **Company ZIP/Postal Code :** | | \* |
| **Company Country :** | | \* |
| **Email Address :** | \* | |
| **Retype Email Address :** | \* | |
| **\* Email Notifications :  (select one)** | |  |  | | --- | --- | |  | I want to receive email notifications related to ACH payments I submit using a Pay.gov form. | |  | I do not want to receive email notifications related to ACH payments I submit using a Pay.gov form. | | |
| **Passwords must conform to the following:**   * contain a minimum of eight characters * contain at least 1 uppercase alpha character, 1 lowercase alpha character, and 1 numeric character * not contain a common word, your name, or your email address * cannot be a previously used password | | |
| **Password :** | \* | |
| **Retype Password :** | |  |  |  | | --- | --- | --- | | |  | | --- | | \* The secret question and answer below will allow you to reset your account password if you forget your password. Please choose a question and answer that only you know; only letters, numbers, and spaces are allowed. No one else will be able to see the answer to your question : | | | | **Secret Question :** | **?** \* |  |  |  |  | | --- | --- | --- | | **Enter Your Secret Question:** | | **?** | |  | | | **Secret Answer :** | | \* | | | | **Retype Secret Answer :** | | \* | | |  |  |  |  | | --- | --- | --- | | |  | | --- | | The shared challenge question and answer below will allow customer service to verify your identity. Only letters, numbers, and spaces are allowed. Once entered, these values can be accessed through your User Profile : | | | | **Shared Challenge Question :** | **?**\* |  |  |  | | --- | --- | | **Enter Your Shared Challenge Question:** | **?** | | **Shared Challenge Answer :** | \* | | **Retype Shared Challenge Answer :** | \* |   Bottom of Form | |
|  | | |

**Appendix C: Pay.GOV User Fee Payment Form:**

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**Centers for Disease Control and Prevention**

**User Fee Form**

CENTERS FOR DISEASE

CONTROL AND PREVENTION

\* Required Field

\* Company Name: Click here to enter text.

Company Name 2: Click here to enter text.

\* Address 1: Click here to enter text.

Address 2: Click here to enter text.

\* City: Click here to enter text.

\* State: Click here to enter text. \* Zip: Click here to enter text.

\* POC Name: Click here to enter text.

\* POC Phone: Click here to enter text.

\* POC Email: Click here to enter text.

\* CDC Invoice No: Click here to enter text.

Please select the type of payment you need to make from the payment drop down menu. If you do not provide an invoice number, please write a description of the payment you are making in the comments field.

Payment Options: NIOSH User Fee

\* Payment Amount: $Click here to enter text.

Comments: Click here to enter text.