INSTRUCTIONS TO CREATE AN ACCOUNT

Use the following link to access the online licensing system: https://dphregprograms.iowa.gov/PublicPortal/Iowa/IDPH/common/index.jsp

For assistance with creating an account, finding a username, or resetting a password, call the OICO Help Desk: 515-281-5703 or 1-800-532-1174.

If you need assistance navigating the licensing portal after reviewing these instructions, contact the AMANDA Support Team: 1-855-824-4357.

STEP 1: NEW USER REGISTRATION

To start the application process, you will need to create an account. From the licensing portal home page, click **New User Registration.**

IDPH REGULATORY PR	OGRAMS
Radiological Health = Emergency	Medical Services • Environmental Health
Home >	
Public Search	
Sign In	
New User Registration	
Help	
WELCOME TO THE ONLINE SERVICE BUREAU OF EMERCE BUREAU OF ENVIRE BUREAU OF D	ES SITE FOR REGULATORY PROGRAMS WITHIN: GENCY AND TRAUMA SERVICES ONMENTAL HEALTH SERVICES RADIOLOGICAL HEALTH
NOTE: This application works best in Explorer, you will need to change three Pop up blocker must be turned off and sites.	Chrome and Safari. If you need to use Internet settings in order for the portal to function properly. iowa.gov added to compatibility view and to trusted

STEP 2: ENTER REGISTRATION DETAILS

- 1) Enter your First and Last name in the appropriate boxes.
- 2) Click Register. (You must have a valid email address to complete the next steps.)

Comm	unities
Sign up now to get credentials you ca	n use for Enterprise A&A enabled sites.
First Name:	
1	Register
Last Name:	
Last Name	

3) Your Account ID will automatically fill in the format of "FIRSTNAME.LASTNAME." NOTE: If the Account ID field is blank, this means that the Account ID in the above format may have already been claimed. You may create your own unique Account ID and enter that instead.



4) When you have completed all the required fields, click **Save Account Details**.

DPH Regulated Communities					
Account Id:					
First Name: Last Name: Email: Confirm Email:					
Save Account Details Cancel Help					

5) A pop-up will appear. Click **OK** to continue.



STEP 3: ACCOUNT ACTIVATION

The next page will direct you to check your email address you provided to complete the process of creating an account.



- 1) Access your email account and open the email that was sent to you with the subject "Account Confirmation".
- 2) Click the link in the body of the email to complete the activation process.



STEP 4: ENTER SECURITY QUESTIONS

Clicking on the link provided in the activation email will take you to a page to set up your account security details.

- 1) Select your security questions and provide the answers.
- (For Question 3, write your own security question and provide your answer.)
- 2) Click Save Identity Baseline when finished.

identity Baseline
DPH Regulated Communities
- Salad Quantum -
Answer 1. Confirm
Question 2: - Sale: Question - Answer 2: Confirm:
(Create your own questions) Question 3:
Answer 3: Confirm:
Bave Mentity Baseline

STEP 5: SET PASSWORD

Next, you will need to create a password for your account.

- 1) Type in your password twice and click Save New Password.
- 2) Your password will need to meet all the password rules listed below.

DPH	l Reaul	ated
	mmunit	line
CO	mmuni	lies
Password	Change for MEGHANARAO44	ØIOWAID
	Enter new password:	
	Confirm new password:	_
Save New Password	Cancel	Hep

STEP 6: ENTER INDIVIDUAL ACCOUNT INFORMATION

After creating your Password, you will be taken to the sign in page.

- 1) Sign in using your new Account ID and Password.
- 2) The next screen will ask you to enter your SS# and Date of Birth in the corresponding box.
 - a. SS# must be entered without dashes or spaces.
 - b. When using the calendar, select "Month" then "Year" then select the "Day."
- 3) Click **Continue** after completing the required fields.

IDPH RE Radiologica	GULATORY PRO I Health = Emergency M	GRAMS Medical Services • Environmental Health			
Home	Individual Information				
Sign In	SSN:				
Usin	Confirm SSN:				
neip	Date of Birth:	Continue Reset			

STEP 7: PROVIDE PROFILE DETAILS

- Complete the Basic Profile Details and Physical Address Details. (Fields with red asterisks are required.)
- 2) When you have finished entering your information, click **Continue.**

Home > web Registr	auon Prome					
Home	Basic Pr	Basic Profile Details				
Sign In	First Nam	16*				
Sign in	Middle Na	ame				
Help	Last Nam	ie*				
	Suffix		· · · · ·			
	Email Ad	dress*				
	SSN: Date of B	irth:				
Physical Address De	tails					
Address is:	T	ATTN:				
Street Number*:		City*:	•			
Street Prefix:	•	County:	T			
Street Name*:		State*:	T			
Street Type*:	•	Country:				
Street Direction:	•	Zip Code*:				
Unit Type:	T	Phone 1*:	T			
Unit Number:		Phone 2:	T			
		Continue				

Next, you will be taken to your **Profile** page.

The <u>Basic Profile Details</u> and <u>Physical Address Details</u> you entered will appear here. Your account PIN number will show in the upper right corner.

Home > My Profile						
Home	Basic Profile Detail	s				PIN: 349701
Sign Off	Name:					
Sign on	Date of Birth:					
Help	Email Address*:					
	Preferred Address:		•	'		
Registered User's Memberships	Physical Address Details					
<u>ـ</u>	Address is:	٣	ATT	N:		
	Street Number*:		City	/*:		•
	Street Prefix:	۲	Cou	unty:	٣	
	Street Name*:		Stat	te*:	•	
	Street Type*:	۲	Cou	untry:		•
	Street Direction:	۲	Zip	Code*:		
	Unit Type:	۲	Pho	one 1*:	¥	
	Unit Number:		Pho	one 2:	T	
		Continue	Reset			Addresses
WELCOME TO YOUR PROFILE PAGE!						

To apply for individual licenses, click **Continue** to be taken to the "My Programs" page.

FOR FACILITIES AND BUSINESSES ONLY: LINK TO A COMPANY

If you need to manage an <u>existing</u> license/permit/certification/registration for a facility or business and do not see your company listed under "Registered User's Memberships" on your profile page, please **STOP** here, have your PIN number ready, and call (855)-824-4357 or email <u>adperehreg@idph.iowa.gov</u> to link your Profile to your Company.

Home > My Profile					
Home	Basic Profile Det	ails			PIN: 349701
Size Off	Name:				
Sign Off	Date of Birth:				
Help	Email Address*:				
	Preferred Address	s:	•		
Registered User's Memberships	Physical Address	s Details			
A	Address is:	•	ATTN:		
	Street Number*:		City*:		•
	Street Prefix:	•	County:	•	
	Street Name*:		State*:	•	
	Street Type*:		Country:		•
	Street Direction:	•	Zip Code*:		
	Unit Type:	•	Phone 1*:	•	
v Select a Membership for your Actions	Unit Number:		Phone 2:		
	•	Continue	Reset		Addresses

WELCOME TO YOUR PROFILE PAGE!