

<u>eLICENSE GUIDE: RENEWING OR REINSTATING A LICENSE</u></u>

Updated 4-23-2018

If you need help logging in, registering, creating an account, or have any other technical issues with eLicense Ohio, please call the eLicense Customer Service Center at 855-405-5514, Monday-Friday, 8:00am to 5:00pm.

If you need to **RENEW OR REINSTATE A LICENSE**, you can access the portal using the eLicense system at <u>https://elicense.ohio.gov/</u>

Once you navigate to the main page, click on the button over the picture that says: **"LOG IN, CREATE YOUR ACCOUNT."**



If this is your **<u>FIRST TIME</u>** using the new eLicense Ohio portal, you will need to register your contact information. To do so, follow the instructions in **PART A** and **PART C** of this guide.

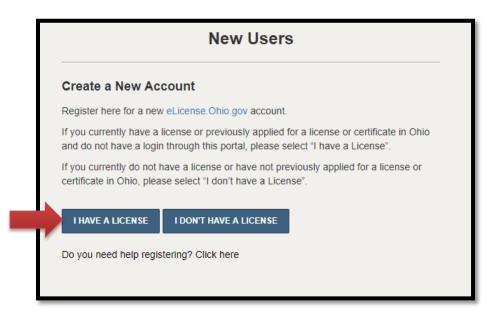
If you have <u>ALREADY</u> created an account and are renewing, reactivating or adding additional licenses to your account, follow the instructions in **PART B** and **PART C** of this guide.



77 South High Street, 17th Floor, Columbus, Ohio 43215

PART A: CREATING AN ACCOUNT FOR AN EXISTING BOARD OF PHARMACY LICENSE

If you have an existing license with the Board of Pharmacy, select "I HAVE A LICENSE." If you are seeking to apply for a new license, select "I DON'T HAVE A LICENSE" and follow the instructions.



To register your existing license with the system, you will need **your social security <u>number</u>** and the **<u>security code</u>** provided to you by the Board of Pharmacy.

You can retrieve your security code by clicking the blue button next to the security code field, but it can only be sent to email address on file with the Board of Pharmacy.

Existing License		
Register here for a new eLicense.Ohio.Gov account associated with your existing Ohio professional licenses. In the event you do not have the required security code, click the 'Obtain Security Code' button. Your social security number is required for accurate identification under federal and state child support enforcement law (42 U.S.C. §666 and §3123.50, O.R.C.) Need help registering? Click here	 Social Security Number Security Code Date of Birth 	OBTAIN SECURITY CODE

After registration, you will then be directed to your dashboard and continue to **PART C**.

PART B: MANAGE YOUR LICENSE- RENEW OR REINSTATE

If you have an account you will login to the eLicense portal at <u>https://elicense.ohio.gov/.</u> and select the **LOGIN/CREATE YOUR ACCOUNT**.

You will enter the email and password that was created for the contact on the license. Then you will select **"LOGIN"**

	Existing Users					
	Login					
*	Email					
*	Password					
	LOGIN					
	Forgot Password? Forgot Email?					

PART C: RENEW OR REINSTATE YOUR LICENSE

Use the dropdown menu under the individual's name in the upper right-hand corner of the dashboard and choose **DASHBOARD**.

DASHBOARD	LICENSE LOOK-UP	FILE A COMPLAINT	E 0	<u>JOHNSON, JOHN</u> .✓	
				MANAGE PROFILE MANAGE BUSINESS LOGOUT	

You will view all licenses that are attached to the contact.

Your Licenses						
To renew, edit, or u	To renew, edit, or update your license, please click on the Options button. Applications for a license are also shown on the bottom of the dashboard page.					
SORT BY -	SORT BY -					
	Board of Pharmacy Terminal - Facility - Category 3	ACTIVE	EXP DATE			
0272000003 Board of Pharmacy Happy Facility						

Select **RENEW** or **REINSTATE**. You will only need to reinstate your license if you failed to renew and the license lapsed (i.e. sixty days after the renewal date).

<u>ال</u>	Board of Pharmacy Terminal - Facility - Category 3 0272000003 Board of Pharmacy Happy Facility	ACTIVE	EXP DATE 3/31/2019	OPTIONS ~ Renew Reinstate Change in Business Description Download Wall Certificate
	ense Applications v an application, please click on the Options button.			License Inactivation Manage Affiliations Send License Verification Submit Additional Documentation

You will answer the eligibility questions and review the application instructions. Each application type will have different eligibility questions and application instructions. Please read carefully to ensure you are applying for the correct application. As application fees are non-refundable and non-transferable.

Once you have answered the eligibility questions and read the application instructions, select **SAVE AND CONTINUE**.

Depending on the application type, additional documentation may be required to complete the application. Please use the respective links below to retrieve the required forms to continue with the application process.

- <u>Drug Distributor (Wholesaler, Manufacturer, Outsourcing Facility, Repackager and 3PL) Forms</u>
- <u>Terminal Distributor of Dangerous Drug Forms</u>
- Home Medical Equipment Service Provider Forms
- <u>Medical Marijuana Employee Forms</u>

You will then be directed to the Payment Portal. To make a payment select the **"SELECT ALL"** box; this will populate total fee that is required to process this application.

Select a board:	CONFIRMATION				
Board of Pharmacy		•			
Select All					
Service Request	Fee for 0272000003				
Туре		Licensee Name	Amount	Amount Outstanding	Waived Amount
	rminal - License Downgrade Fee	Licensee Name Happy Facility	Amount \$160.00	Amount Outstanding \$160.00	Waived Amount
	rminal - License Downgrade Fee				Waived Amount
	rminal - License Downgrade Fee				Waived Amount

The payment methods are valid credit card types include Visa, MasterCard, Discover, American Express, or electronic check.

Pharmacy Board
Select Payment Method
Please select a payment method.
Credit Card
Electronic Check
Technical Support
If you need technical support for this online payment processing application, please send an email to fiscal@pharmacy.ohio.gov.

Once the payment has been processed. You will have the option to print your receipt or have it emailed to the email address provided on the application. When you are done, select **DONE.**

Cart #X-2018-04-19_09-45-25		Print Receipt Email Receipt Done					
A copy of your receipt has been emailed to: g+1@yahoo.com							
Items Checkout Confirmation	1						
Your payment was successful. A co	py of the receipt has been emailed to g+1@yahoo.com.						
Applied Payment \$16 Contact Operator	2005 PM						
Fees							
Туре	Licensee Name	Amount					
PRX - SR - Terminal - License	Downgrade Fee Happy Facility	\$160.00					
		Print Receipt Email Receipt Done					

You have successfully completed an application. You will be directed back to your **DASHBOARD** where you can monitor the progress of your application.

Welco	me to your eLicens	e Dashboard			
+ APPLY FOR A N	EW LICENSE MY HISTORY				
Are you looking to ap	ply for a new business license? First, add your business by	clicking here before applying.			
	New License Applications				
	aw an application, please click on the Options button.				
SORT BY -	SORT BY -				
1	Board of Pharmacy Terminal - Facility - Category 3 APP-000136518 Board of Pharmacy Happy Facility	ACTIVE	EXP DATE 03/31/2019	OPTIONS V	

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