

## INSTRUCTIONS TO APPLY FOR A NEW TRADE IN AN EXISTING LICENSE

For assistance with creating an IDPH account or finding or resetting an IDPH username and password, you will need to call the **OICO Help Desk**: 515-281-5703 or 1-800-532-1174

For assistance with navigating the licensing portal once you have an A&A account, please contact the **AMANDA Support Team** 1-855-824-4357

For specific questions regarding the **Iowa Plumbing and Mechanical Systems** program or license requirements, please visit the website <http://idph.iowa.gov/pmsb> or call 1-866-280-1521

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### BEFORE YOU BEGIN:

**THESE INSTRUCTIONS ASSUME YOU HAVE ALREADY FOLLOWED THE STEPS TO CREATE AN A&A ACCOUNT AND SET UP YOUR AMANDA PROFILE PAGE.** If you have not done these steps, go back to the IDPH Regulatory Programs Page and follow the instructions to create an account.

**THESE INSTRUCTIONS ASSUME THAT YOU HAVE ALREADY SUBMITTED AN APPLICATION FOR A PMSB LICENSE.** If you have never applied for a license or exam before, the steps are different. Please go back to the instruction page (on IDPH Regulatory Programs) and find the instructions for people who already hold at least one license or exam approval.

If you hold a license with the Board and do not see it listed, please **STOP** and contact the AMANDA Support Team at 1-855-824-4357.

**IF THIS IS AN APPLICATION FOR AN ADDITIONAL TRADE FOR AN EXISTING LICENSE.**

You must be on a computer using **Google Chrome** or **Safari** when applying online.

## STEP 1: SIGN IN WITH EXISTING ACCOUNT

- Begin by opening your web browser and navigating to the Iowa Department of Public Health Regulatory Program webpage at the following location:  
<https://dphregprograms.iowa.gov/PublicPortal/iowa/IDPH/common/index.jsp>
- **Sign in** with your username and password.
- Click on **My Profile**.

The screenshot shows the top navigation bar of the IDPH Regulatory Programs website. The header includes the text "IDPH REGULATORY PROGRAMS" and "Radiological Health ■ Emergency Medical Services ■ Environmental Health". Below this is a "Home >" link and a vertical menu with options: "Public Search", "Sign Off", "My Profile" (highlighted in yellow), and "Help".

WELCOME TO THE ONLINE SERVICES SITE FOR REGULATORY PROGRAMS WITHIN:  
BUREAU OF EMERGENCY AND TRAUMA SERVICES  
BUREAU OF ENVIRONMENTAL HEALTH SERVICES  
BUREAU OF RADIOLOGICAL HEALTH

## STEP 2: UPDATE PROFILE INFORMATION

- Verify all information is correct.
- Make any necessary corrections.
- To add additional addresses or contact information, click on the **Addresses** button.
- Click **Continue** when finished.

The screenshot displays the "My Profile" page. On the left is a sidebar with "Home", "Sign Off", and "Help" links. The main content area is titled "Basic Profile Details" and contains fields for "Name" (filled with "Your Name"), "Date of Birth", "Email Address", and "Preferred Address" (set to "Physical Address"). Below this is a "Physical Address Details" section with fields for "ATTN", "Street Number" (5555), "Street Prefix", "Street Name" (55th), "Street Type" (Avenue), "Street Direction", "Unit Type", "Unit Number", "City" (Des Moines), "County", "State" (Iowa), "Country" (USA), "Zip Code" (55555), "Phone 1" (555-555-5555), "Phone 2", and "Phone 3". A "Registered User's Memberships" section is on the left with a dropdown menu. At the bottom, there are "Continue" and "Reset" buttons, and an "Addresses" button with a blue arrow pointing to it. A blue banner at the bottom reads "WELCOME TO YOUR PROFILE PAGE!".

You will now be taken to the **My Programs** page.

## STEP 3: ADD TRADE

If you have existing licenses they will show under the Programs for [Your Name] section.  
If you hold a license with the Board and do not see it listed, please stop and contact the board office at 1-866-280-1521

- Click on the **Details** link next to the license you would like to add a trade.

License #	Applicant	Program	Status	Issue Date	Expiry Date	City	Details	Online Services	Renew
30047		Plumbing and Mechanical Systems	Active	04/27/2017	06/30/2018	Urbandale	<b>Details</b>	Online Services	

Make Payment

- The next page will display your License Details. Click **License Select** to expand.

People Details

Role	Name
Applicant	Test Hospital

Application Form Expand All

Application Form Details Expand All

**License Select**

License Type	Trade/Specialty	License Status	Approved date	Expired Date	
Journeyman	Mechanical	Active	04/27/2017	06/30/2017	BA
Master	Plumbing	New			N/A

USE THE SCROLL BAR TO VIEW ADDITIONAL FIELDS.

Add Save

Continuing Education

Exam Candidate

License Processes Collapse All

Description	Status	Requested Date	Expiry Date	Action
Application Review				

- Click **Add** and provide details for each License you are applying for.
- Select **License Type**.
- Select **Trade/Specialty**.
- Select **Basis for Licensure** (your qualification for the license).
- Under **Action Requested** select **Apply for New Trade**.
- Click **Save** after completing each row.
- After saving, a pop-up will appear. Click **Ok**.

## STEP 4: APPLICATION FORM SUPPLEMENTAL

- Under **License/Permit** field, click **Edit** next to the License(s) you wish to add.

License Processes					Collapse All
Description	Status	Requested Date	Expiry Date	Action	
▶ Application Review					
PMSB Individual Application Review	Complete	04/27/2017			
▶ License/Permit					
Journeyperson	Approved	04/27/2017			
Journeyperson	Open	04/27/2017		<a href="#">Edit</a>	
Master	Open	04/27/2017		<a href="#">Edit</a>	

You will then be taken to the **Application Form Supplemental** screen.

**NOTE:** Depending on the selection of the License Type you selected on the previous screen, you may have one or multiple screens to complete. **(See Examples below.)**

**Active Journeyperson / Inactive Master:** Expand Affirmation, select Yes/No, click **Continue**.

Process Description - Activate an Inactive License for Master		Collapse All
▼ Affirmation		
I am requesting to reactivate my inactive Journey license <input type="radio"/> Yes <input type="radio"/> No		
Attachment		
Attachment Description		<a href="#">Add New Attachment</a>
<input type="button" value="Cancel"/> <input type="button" value="Continue"/>		

**Apprentice:** Expand Apprenticeship Details, fill out the available fields, & click **Continue**.

Process Description - Apprentice		Collapse All
▼ Apprenticeship Details		
Have you completed a high school or GED program? <input type="radio"/> Yes <input type="radio"/> No		
Apprentice Identification Number	<input type="text"/>	
Apprenticeship Start Date	<input type="text"/>	
Apprenticeship Completion Date	<input type="text"/>	
Number of advanced Apprenticeship hours issued if any	<input type="text"/>	
Sponsor Department of Labor Program Number	<input type="text"/>	
Sponsor Contact Person Name	<input type="text"/>	
Sponsor Phone Number or website	<input type="text"/>	
Sponsor Contact Person Address	<input type="text"/>	
Attachment		
Attachment Description		<a href="#">Add New Attachment</a>
<input type="button" value="Cancel"/> <input type="button" value="Continue"/>		

**Hearth Systems:** Expand Hearth Systems Details, fill out the available fields, & click **Continue**.

Process Description - Hearth Systems Collapse All

▼ Hearth Systems Details

Name of certification agency

If other, please specify organization

Certification Number

Certification Expiration Date

Attachment

Attachment Description

**Disconnect / Reconnect Plumbing Tech:** Click **Expand All** to view all the sections and fill out the available fields. Click **Add** under Employer Details and enter your employer information, then click **Save**. (Use the scroll bar to view more fields - See the blue arrow below.) When you have completed all the relevant fields, click **Continue**.

Process Description - Disconnect / Reconnect Plumbing Technician Expand All

▶ Basis for Licensure

▶ On the Job Training

▶ Plumbing Technician Associates Degree

Process Free Form Description - Disconnect / Reconnect Plumbing Technician Collapse All

▼ Employer Details

Name of Employer	Name of supervisor	Supervisor Telephone Number	Supervisor Telephone Number	Your Job Title	Employment Start Date



◀  ▶

- Currently there are only 10 rows you can add for each saving. Please save them first and then you can add another 10 rows and more.
- Just clean all fields if you do not need a specific row or new added row.

Attachment

Attachment Description

**Medical Gas System Installer:** Expand Medical Gas Systems Installer Details, fill out the available fields, & click **Continue**.

Process Description - Medical Gas System Installer		Collapse All
▼ Medical Gas System Installer Details		
Are you currently certified in medical gas piping by the National Inspection Testing Certification Corporation (NITC) or an equivalent agency? <input type="radio"/> Yes <input type="radio"/> No		
Name of certification agency	<input type="text"/>	
Certification Number	<input type="text"/>	
Certification Expiration Date	<input type="text"/>	
Do you have a current brazer certification? <input type="radio"/> Yes <input type="radio"/> No		
Brazer Expiration Date	<input type="text"/>	
Attachment		
Attachment Description		
		Add New Attachment
Cancel	Continue	

**Journeyperson:** Expand all the sections and fill out the available fields. Under the Free Form Description section, you will need to click **Add** button to add information to these fields – you may need to use the scroll bar see more fields after adding. **Be sure to click Save after adding**. When you have completed all relevant fields, click **Continue**

Process Description - Journeyperson		Expand All
▶ Exam Details		
▶ Master License in Another Jurisdiction		
▶ Military Service Details		
▶ Reciprocity		
▶ Organization Demographics		
▶ Other Jurisdiction License Details		
Process Free Form Description - Journeyperson		Expand All
▶ License Information		
▶ Military Service Details		
▶ Reciprocity Details		
▶ Employer		
Attachment		
Attachment Description		
		Add New Attachment
Cancel	Continue	

**Master:** Expand all the sections and fill out the available fields. Under Military Service Details, Reciprocity Details, and Employer Details you will need to click **Add** button to add information to these fields – you may need to use the scroll bar see more fields after adding. **Be sure to click Save after adding.** When you have completed all relevant fields, click **Continue**

Process Description - Master Expand All

▶ Exam Details

▶ Military Service Details

▶ Reciprocity

▶ Organization Demographics

▶ Other Jurisdiction License Details

Process Free Form Description - Master Expand All

▶ Military Details

▶ Reciprocity Details

▶ Employer Details

Attachment

Attachment Description

Cancel Continue Add New Attachment

**Private School or College Routine Maintenance:** Click **Expand All** & fill out the available fields. Under Employer Details click **Add** to enter your employer information, then click **Save**. (Use the scroll bar to view more fields - See the blue arrow below.) Click **Continue** when finished.

Process Description - Private School Routine Maintenance Expand All

▶ Licensure Details

Process Free Form Description - Private School Routine Maintenance Collapse All

▼ Employer Details

Name of Employer	Name of supervisor	Supervisor Telephone Number	Supervisor Telephone Number	Your Job Title

↓

• Currently there are only 10 rows you can add for each saving. Please save them first and then you can add another 10 rows and more.

• Just clean all fields if you do not need a specific row or new added row.

Add Save

Attachment

Attachment Description

Cancel Continue Add New Attachment

**Service Technician HVAC:** Click **Expand All** to view all the sections and fill out the available fields. Click **Continue** when finished.

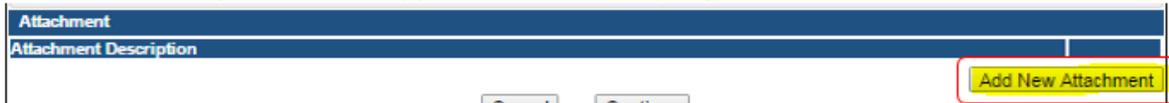
Process Description - Service Technician HVAC		Collapse All
▼ Basis for Licensure		
Basis for Licensure	<input type="text"/>	
▼ Service Technician Associates Degree		
Name of Institution	<input type="text"/>	
Name of Degree or Program Please attach transcripts or degree	<input type="text"/>	
Date of Completion	<input type="text"/>	
Institution Address	<input type="text"/>	
Contact Person Name	<input type="text"/>	
Contact Person Telephone	<input type="text"/>	
▼ Training Provider Details		
Training Provider please upload/attach copy of your certification	<input type="text"/>	
If HVAC Excellence Certification, specify type	<input type="text"/>	
If other Certification, please specify	<input type="text"/>	
Certification Number	<input type="text"/>	
Certification Expiration Date	<input type="text"/>	
Attachment		
Attachment Description		
		Add New Attachment
Cancel	Continue	

When you have entered all the necessary information in the available fields, click **Continue/Edit** to continue editing or click **Continue/Payment** to pay the fee. To upload attachments related to your application, see **STEP 5: ATTACHMENTS**

Attachment	
Attachment Description	
	Add New Attachment
Continue/Edit	Continue/Payment

## STEP 5 – ADD ATTACHMENTS

To add any required documentation, you will need to click the **Add New Attachment** button at the very end of the application form. **Skip if you have no attachments to add.**

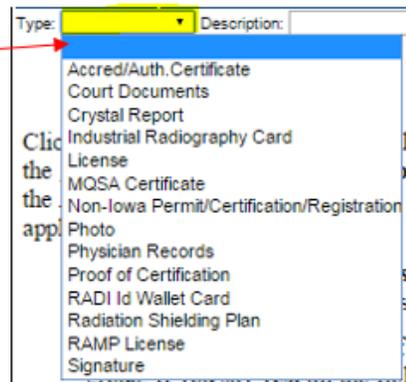


The screenshot shows the top part of the 'Attachment' form. It has a header bar with 'Attachment' and 'Attachment Description'. Below the header, there are two empty text input fields. At the bottom right of the form, there is a yellow button labeled 'Add New Attachment' which is highlighted with a red rectangular box.



The screenshot shows the 'Attachment' form with the 'Type' dropdown menu open. The 'Type' field is highlighted in yellow. The dropdown menu lists various document types. The 'Choose File' button is also highlighted in yellow. The text 'No file chosen' is visible next to the button. The 'Add New Attachment' button is visible at the bottom right.

- Click to select the **Type** of attachment and Select one of the following from the list:
- Enter a description of the file, and then Click
- This will open your file explorer. Navigate to where the document you want to attach is located on your computer.
- Double click the document to attach it.



The screenshot shows the dropdown menu for the 'Type' field. The menu is open and lists the following options: Accred/Auth. Certificate, Court Documents, Crystal Report, Industrial Radiography Card, License, MQSA Certificate, Non-Iowa Permit/Certification/Registration, Photo, Physician Records, Proof of Certification, RADI Id Wallet Card, Radiation Shielding Plan, RAMP License, and Signature. The 'Type' field is highlighted in yellow.

The name of the document should appear next to the  button.



The screenshot shows the 'Attachment' form with the 'Type' dropdown menu open. The 'Type' field is highlighted in yellow. The dropdown menu lists various document types. The 'Choose File' button is also highlighted in yellow. The text 'summary.docx' is visible next to the button. The 'Add New Attachment' button is visible at the bottom right.

Continue this process for each document needing to be attached.

**NOTE:** If you attach a document in error, it cannot be removed by you. You will need to contact the IDPH Program staff to have it removed.

**WHEN ALL SECTIONS OF THE FORM ARE COMPLETE, CLICK CONTINUE.**

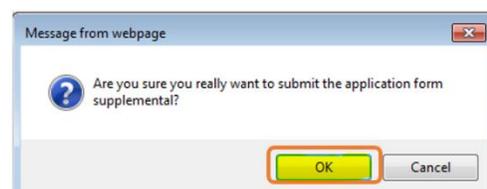
If you need to gather information, or add additional documentation, you can leave the application webpage and return later to complete or continue.

**DO NOT CLICK CANCEL – this will void your entire application.**

You must attach all supporting information before paying the registration fee or your application could be delayed or denied.

When you click **Continue**, a pop-up message will appear.

Click **OK** to proceed to the next page.



The screenshot shows a pop-up message box titled 'Message from webpage'. It contains a question mark icon and the text 'Are you sure you really want to submit the application form supplemental?'. At the bottom of the box, there are two buttons: 'OK' and 'Cancel'. The 'OK' button is highlighted with a red rectangular box.

## STEP 6 – MAKE A PAYMENT

Next you will be taken to the **Make Payment** page.

**PLEASE READ THE FOLLOWING DIRECTIONS BEFORE PROCEEDING.**

If you need to attach additional documentation click the **Pay Later** button. Otherwise, skip to the **Pay Now** instructions.

Fee Details						
Reference (Row ID) #	Program	Program Detail	Status	Fee Description	Fee Amount	Paid In Full
539229	Plumbing and Mechanical Systems	Individual License	Active	PLMB Journey Initial Fee	\$30.06	Yes
539229	Plumbing and Mechanical Systems	Individual License	Active	PLMB Journey Initial Fee	\$30.06	No
539229	Plumbing and Mechanical Systems	Individual License	Active	PLMB Master Initial Fee	\$40.08	No
539229	Plumbing and Mechanical Systems	Individual License	Active	PLMB Multiple License Fees Discount %	(\$39.08)	No
Total					Fee Amount:	\$61.12
					Paid Amount:	\$30.06
					Cancelled Amount:	\$0.00
					Fee Due:	\$31.06

Pay Later
Pay Now

[Payment Later Options](#)

### PAY LATER:

- If you click the **Pay Later** button, you will get a reminder pop-up that your application is not considered submitted until payment is made.
- You will be returned to your **My Programs** page where you will see your registration listed and its status.
- When you are ready to complete the application process, go to the appropriate section and double click on the **Details** link.

Home > My Programs								Maddie Van Horn	
Home									
Public Search									
My Profile									
New Company Registration									
Apply for a Program									
Sign Off									
Help									
Programs for Maddie Van Horn									
License #	Applicant	Program	Status	Issue Date	Expiry Date	City	Details	Online Services	Renew
	Maddie Van Horn	Plumbing and Mechanical Systems	New			Des Moines	<span style="border: 1px solid red; padding: 2px;">Details</span>	<a href="#">Online Services</a>	
<input type="button" value="Make Payment"/>									

**NOTE:** If under the **Details** column it shows a link for **Edit** instead of **Details**, this means there is missing information within the application. Click the **Edit** link to review all sections of the form and complete any missing information before attempting to pay. – this is not explained very well, aren't there various error messages? Need to see sample to know how to fix/clean up

From here you can view the Details of your application, **Add New Attachment**, or **Upload Attachments**.

When you are ready, click **Make a Payment**.

Home		Plumbing and Mechanical Systems - Individual License				
Sign Off	License #	Application Date	Issue Date	Expiry Date	Status	Description
Help	30045	04/23/2017			Renewal	Renewal Folder

People Details	
Role	Name
Applicant	carrie tester

Application Form Expand All

▶ Affirmation

Application Form Details Expand All

▶ License Select

▶ Continuing Education

▶ Exam Candidate

License Processes Collapse All

Description	Status	Requested Date	Expiry Date
▶ Application Review			
PMSB Individual Application Review	Calculate Fees	04/23/2017	
▶ License/Permit			
Apprentice	Approved	04/23/2017	

Fees

Fee List			Payment
Bill Number	Description	Fee Amount	
6337	PLMB Apprentice Renewal Fee	\$50.00	No payment to be displayed.
<b>Total</b>		<b>\$50.00</b>	

Total Due: \$50.00

Attachments

Attachment Description

## PAY NOW:

If you select **Pay Now** you will be directed to the online payment system. Select **Pay Now** when asked, and complete your online payment information.

Fee Details						
Reference (Row ID) #	Program	Program Detail	Status	Fee Description	Fee Amount	Paid In Full
539229	Plumbing and Mechanical Systems	Individual License	Active	PLMB Journey Initial Fee	\$30.06	Yes
539229	Plumbing and Mechanical Systems	Individual License	Active	PLMB Journey Initial Fee	\$30.06	No
539229	Plumbing and Mechanical Systems	Individual License	Active	PLMB Master Initial Fee	\$40.08	No
539229	Plumbing and Mechanical Systems	Individual License	Active	PLMB Multiple License Fees Discount %	(\$39.08)	No
<b>Total</b>						
					Fee Amount:	\$61.12
					Paid Amount:	\$30.06
					Cancelled Amount:	\$0.00
					Fee Due:	\$31.06

[Pay Later](#) [Pay Now](#)  
Payment Later Options

A pop-up message will appear. Click **OK**.

Message from webpage X

? Are you sure you really want to pay your program(s) online ?

[OK](#) [Cancel](#)

Select **Payment Method**, and fill in your payment details. Click **Continue**.

**My Payment**

IDPH Licensing and Regulatory Programs  
Amount Due: \$50.00

**Payment Information**

Frequency: One Time  
Payment Amount: \$50.00  
Payment Date: Pay now

**Contact Information**

First Name: Adper  
Last Name: Amandaone  
Company: (Optional)  
Address 1: 09 N Oliver Drive  
Address 2: (Optional)  
City/Town: Des Moines  
State/Province/Region: IA  
Zip/Postal Code: 56789  
Country: US  
Phone Number: 8990900900  
Email Address: adperamandaone@gmail.com

**Payment Method**

Payment Method: Select

[Continue](#) [Cancel](#)

The following page is your confirmation page.

**Confirmation**

Please keep a record of your Confirmation Number, or [print this page](#) for your records.  
Confirmation Number: **IOWDPH004000710**

**Payment Details**

Description: Department of Public Health  
IDPH Licensing and Regulatory Programs  
<https://idph.iowa.gov/>  
Payment Amount: \$50.00  
Payment Date: 11/22/2016  
Status: PROCESSED

**Payment Method**

Payer Name: Adper Amandaone  
Card Number: \*1111  
Card Type: Visa  
Confirmation Email: adperamandaone@gmail.com

**Billing Address**

Address 1: 09 N Oliver Drive  
City/Town: Des Moines  
State/Province/Region: IA  
Zip/Postal Code: 56789  
Country: United States

[Continue](#)

Please keep a record of your **Confirmation Number** or **print this page** for your records. Click **Continue** to return to your A&A profile.