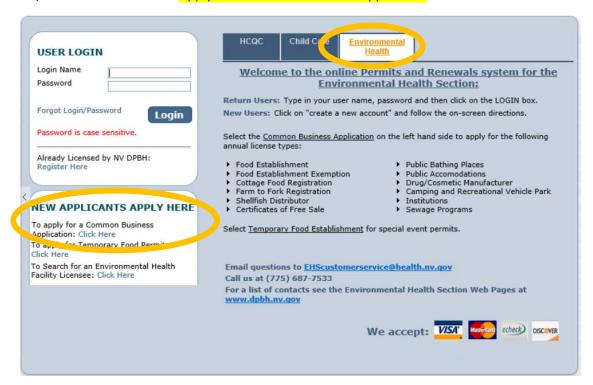
# **ALiS**

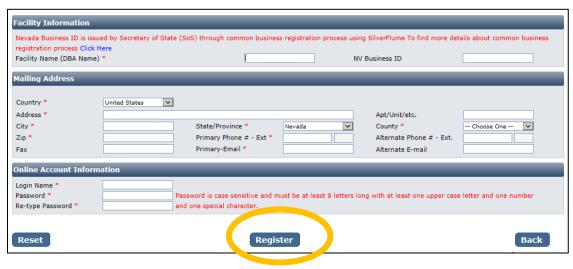
# **Centralized Licensing, Inspections and Complaints System (CLICS)**

# **Drug and Cosmetic Manufacturing: Application Instructions**

To begin the licensing process, go to <a href="https://nvdpbh.aithent.com/login.aspx">https://nvdpbh.aithent.com/login.aspx</a> and then click on the Environmental Health tab (the last tab). Select the link under "Apply for a Common Business Application":



## **Initial Registration Page:**



You will need to fill out the following:

- Facility Name (DBA): this should be the registered name of your business.
- NV Business ID: if you have a state business ID, enter it here. It would be "NV" followed by 11 numbers.

#### - Mailing Address Section:

- Address is the street address where you receive correspondence for your business
- o City/State/County/Zip: enter the appropriate values that go with the address
- o Phone/Email: this should be the contact information to receive correspondence for your business

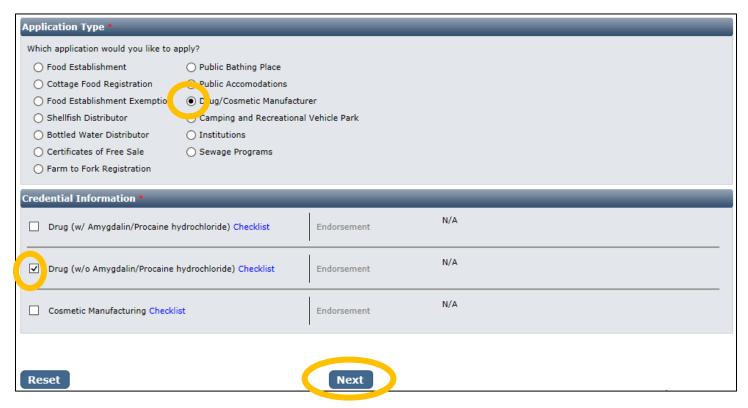
#### Account Information (Login):

- The Login Name can be anything using A-Z and 0-9. Take note of it before submitting the form so you don't forget.
- o Password: must conform to the text in red, for example "MyBusiness.6" contains all the elements needed. Make the password something you can remember, but not easy to guess.
- When you are done with the form, click the **Register** button.

## Application Types: Drug and Cosmetic Manufacturing

Select "Drug/Cosmetic Manufacturer" and then in the area that appears below select one of the options.

When you are finished click the **Next** button.



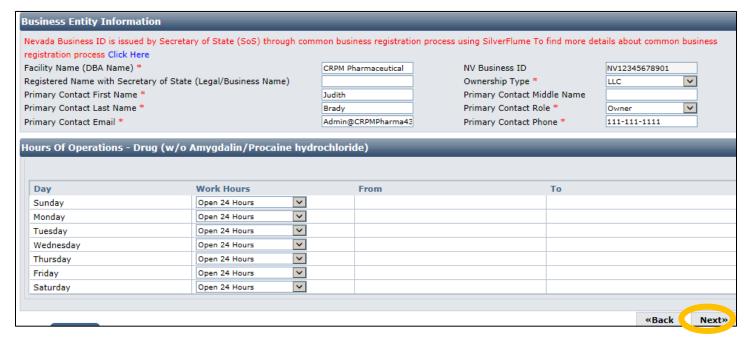
# **Entity Information:**

#### - Business Entity Information

- Facility Name (DBA): This will be automatically filled in from your registration, however if you mistyped you may correct it here
- o NV Business ID: This will be automatically filled in from your registration but cannot be changed here
- Registered Name/Legal Business Name: this should be the exact name on your state business license, if applicable. It may be different from your DBA name.
- Ownership Type: Select from this list. LLC, Corporation, etc. depending on the business type.
- Primary Contact Information: The contact information including name, phone, and email should be for the person that will receive correspondence on licensing issues for the business. Their role may be owner, manager, etc.

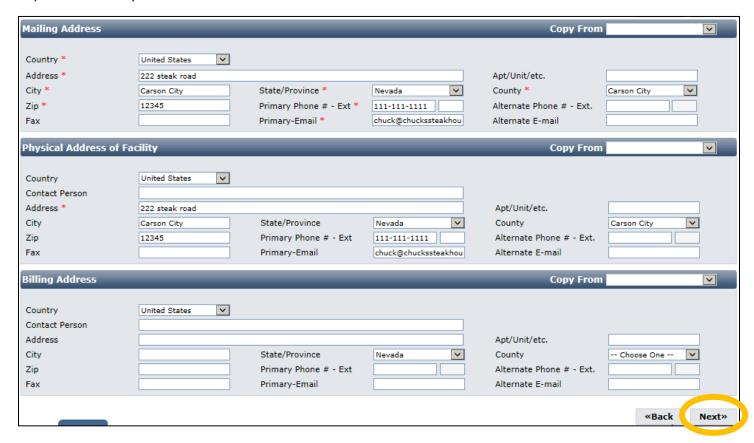
#### - Hours of Operation

- o For each license, enter the hours that the establishment is open. For each day it may be: open 24 hours, closed that day, or open for a fixed time.
- When you are finished filling out the form, click the Next button.



#### Address Information:

Most of the information in the mailing address section should appear based on what you have entered previously. The mailing address is where correspondence will be sent, however the physical address is also required for facility inspections. When you have entered these click the **Next** button.



## **Ownership Details:**

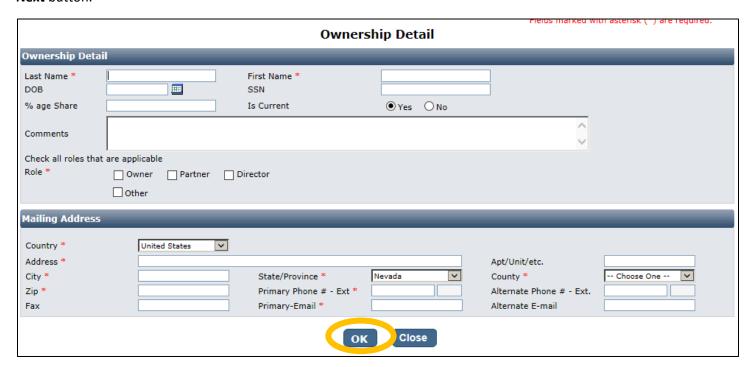
Select the **Add** button to add a new owner. You may not skip this section even if you previously entered all your information.



A popup will appear to enter details. It has the following fields:

- First and Last Name: enter the full first and last name of the owner
- **DOB**: enter the date of birth for this owner
- **SSN**: enter the social security number for this owner
- % share: enter the approximate percent of ownership of the company for this owner
- Is Current: leave this selected as "Yes"
- Comments: add any additional comments on the relationship of this owner to the business
- **Role**: select Owner, Partner, Director, or Other (if other, fill in the role)
- **Mailing Address Section**: This may be the personal mailing address of the owner, or it may be the mailing address of the business. Similarly, primary phone and email may be personal or business.

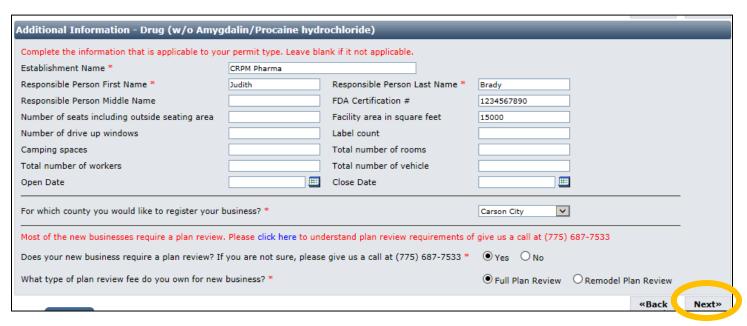
When you are done select the **OK** button. Repeat this process for any other owners. When you are finished, use the **Next** button.



The fields with the red asterisk (\*) are required

#### Additional Information:

The Additional Information section will be shown:



This information is extremely important for accurate records. It has a section for each license with the same fields:

# The accuracy of this section will determine the fees charged at the end of the on-line application process.

- **Establishment Name**: This is the specific name (usually DBA name) for each license. They may be the same or different depending on how the business is structured.
  - o Example: The Red Porch Fine Dining
  - o Example: Red's Bar
- **Responsible Person:** This should be the person-in-charge or owner of the establishment that will be present during an inspection.
- FDA Certification #: You must obtain FDA certification prior to applying. See: <a href="http://www.fda.gov/Drugs/default.htm">http://www.fda.gov/Drugs/default.htm</a> for more information.
- Facility Area in Square Feet: The size or estimated size of your facility.
- **Open Date and Close Date:** This is designed for seasonal establishments. You may enter the open (or expected open) if known.
- County: Select the County that the business is located in. Do not select "All" unless instructed by staff.
- **Plan Review option:** make sure you understand if your license requires a plan review by staff; the answer may be "No", "Full review", or "Remodel" depending on your situation.

IMPORTANT: Please call us at (775) 687-7533 for Drug and Cosmetic manufacturing licenses.

This page contains fields that are used by other programs. You may leave them blank if they are not applicable to the facility type.

When you are finished entering all the information for all licenses, click the **Next** button.

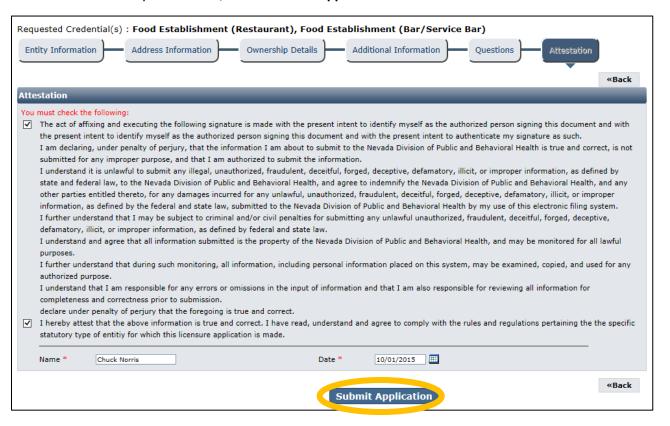
#### **Questions:**

This page displays a list of questions that must be answered regarding your facility. A hidden box may pop up requesting more information. When you are finished select the **Next** button.



#### Attestation and Electronic Signature:

Read the legal statements and agree by checking the box to the left. Enter your full name (this is your digital signature) and the current date. When you are done, select "Submit Application".

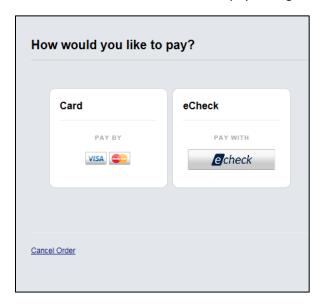


#### Fees:

"Fee Details" explains what fees are being charged for this credential type. Select Pay Now to continue.



You will be redirected to the secure payment gateway. Select your payment method:



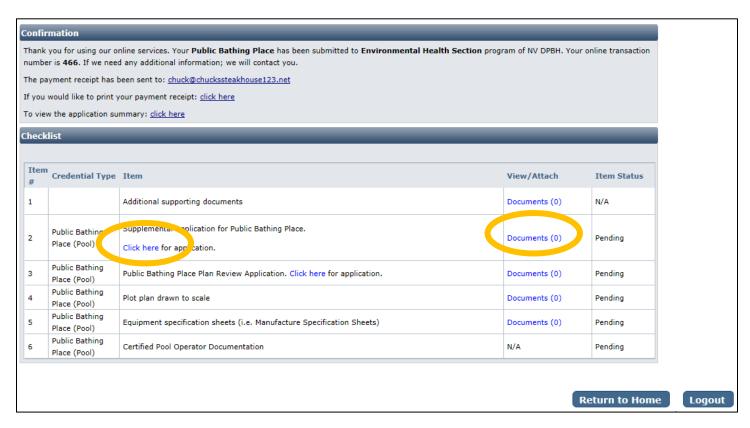
Fill out the form (which depends on the selected payment method) and submit when completed. **Note**: For drug manufacturing (with amygdalin/procaine) licenses, you may be forced to use the eCheck option depending on the amount due.

# IMPORANT NOTICE: YOU ARE NOT DONE YET

## Checklist: Applications and Documentation

Upon completion of the payment submission the site will guide you to the checklist and you will need to add your applications and other documentation. Note your transaction number in bold. There is also the option to print the payment receipt (which is also emailed) and the application summary for your records.

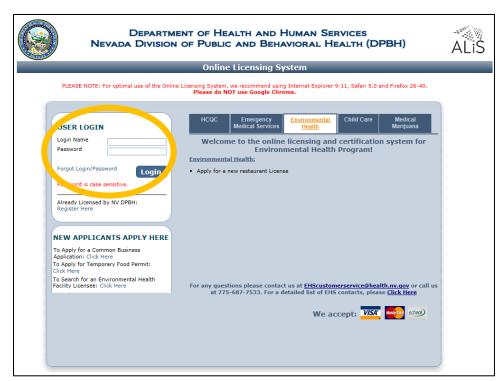
Below is the list of items that need to be completed for the selected licenses. Some items may be optional depending on your situation. Examine each item carefully and if needed, click the "Documents" link in the View/Attach column on the right side to upload a document for staff review. When you do this, a popup will appear with directions on how to upload your document(s).



When all required items are uploaded and/or reviewed, your application will be processed.

## Returning to complete an application:

To return to your account to complete and application or manage your licenses, go to the website and then enter your user name and password and then click the **Login** button:



You will see a menu on the left side:



Click on "View Pending Online Application(s)". You will see a list of applications for review. Select "View Details" for the application you want to look at:



Now you will see the check list again where you can review the status of each item and attach additional documents if needed:

