



Understanding the Registry

Patient and Caregiver Initial Application Instructions

No Address in the Florida Highway Safety and Motor Vehicle Database

Once your qualified physician has entered your information into the Medical Marijuana Use Registry, you will be able to apply for your Medical Marijuana Use Registry Identification Card. The quickest and easiest way to apply for your ID card is online through the Registry. Follow the steps below to complete your online application.

Step 1: Log into the Medical Marijuana Use Registry <https://mmuregistry.flhealth.gov/>.

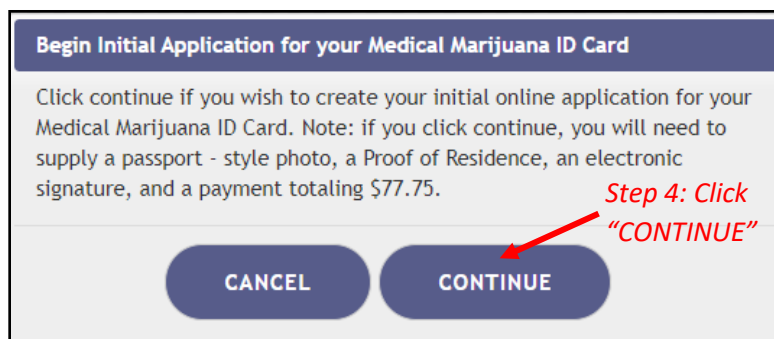
If you do not remember your password, you may reset it yourself by selecting [Forgot Password](#) on the Login page. For step-by-step instructions to reset your password, see our [Resetting My Password](#) guide on our Know the Facts MMJ page (<https://knowthefactsmmj.com/registry/#instructional-guides>).

Step 2: Click “YOUR CARD.”

Step 3: Click “BEGIN INITIAL APPLICATION.”



Step 4: A prompt will appear for you to confirm that you wish to continue to the Initial Application. Click “CONTINUE” to proceed to the application.



Step 5: Click “SUPPLY A PHOTO” to either supply your State ID photo, or to supply your own passport-style photo to your application.

Step 5: Click “SUPPLY A PHOTO”

Application For: PATIENT, ANY

192x192

SUPPLY A PHOTO

Id Card #:

MY APPLICATIONS

A full-face photo must be submitted in order to complete your application. If your Florida Driver License photo or Florida Identification Card photo appears in your application in the Registry resulting from accurate DOB/SSN entered by your physician, the most efficient process is to utilize that photo for your Medical Marijuana Card Application.

Step 5A: A prompt appears for you to either check for your Florida State ID photo or to supply your own passport-style photo. Clicking “CHECK MY STATE ID” will upload your driver’s license photo from the Florida Department of Highway Safety and Motor Vehicles’ (FLHSMV) demographic database. Clicking “SUPPLY MY OWN” will allow you to upload your own photo from your device. *(Using the FLHSMV sourced data will automatically approve the photo and may cut down on processing time, while supplying your own photo may increase the processing time.)*

Image Source

Would you like to use the photo we receive from FLHSMV as part of your card application?
Supplying your own photo instead of importing one from FLHSMV may increase the processing time for your application.

Step 5A: Click “CHECK STATE ID PHOTO”

GO BACK CHECK STATE ID PHOTO SUPPLY MY OWN

Step 5B: Read the prompt and click “PROCEED” to continue.

Confirm

You're about to check for a State ID Photo to insert into this Card Application. If a photo is found, it will replace any photo you currently have in your application. Click "Proceed" below to continue.

Step 5B: Click “PROCEED”

GO BACK PROCEED

The photo from FLHSMV will be displayed on your application. The photo is automatically approved when using FL HSMV to supply your application.

Application For: PATIENT, ANY

SUPPLY A PHOTO

REMOVE EXISTING PHOTO

Id Card #:

MY APPLICATIONS

A full-face photo must be submitted in order to complete your application. If your Florida Driver License photo or Florida Identification Card photo appears in your application in the Registry resulting from accurate DOB/SSN entered by your physician, the most efficient process is to utilize that photo for your Medical Marijuana Card Application.

Step 6: Scroll down to the section titled “Proof of Residence” and then click “SUPPLY PROOF.”

Proof of Residence

Proof of Residency - All applicants must submit a copy of a valid Florida Driver's License or Florida Identification card. Adult seasonal residents must provide either proof of residency under section 301.964(5)(b) 1, or provide a copy of two documents as specified in section 301.964(5)(b) 2, Florida Statutes. Minor patients must provide proof of residency as specified in section 301.964(5)(b) 3, Florida Statutes. The minor's parent or legal guardian must submit proof that they meet the residency requirement of section 301.964(5)(b) 1, Florida Statutes. You may upload up to 5 files into your application. You currently have 0 document(s).

SUPPLY PROOF

Step 6: Click "SUPPLY PROOF"

You must supply Proof of Residence to apply. You cannot obtain cannabis products until this is completed.

Step 6A: A prompt will appear for you to choose how to supply your documentation. Click “CHECK STATE RESIDENCY STATUS” to obtain your Driver License or Florida State ID from FLHSMV. If you wish to upload your own proof of residency document, click “SUPPLY MY OWN.” Select the file you wish to upload and click “OPEN.” The document will appear below the “SUPPLY RESIDENCE” button.

Proof Of Residency Source

Would you like to use the proof of residence we receive from the FLHSMV as part of your card application? Supplying your own proof of residence instead of importing the data from the FLHSMV may increase the processing time of your application.

Step 6A: Click "CHECK STATE RESIDENCY STATUS"

GO BACK CHECK STATE RESIDENCY STATUS SUPPLY MY OWN

Step 6B: Click “PROCEED.”

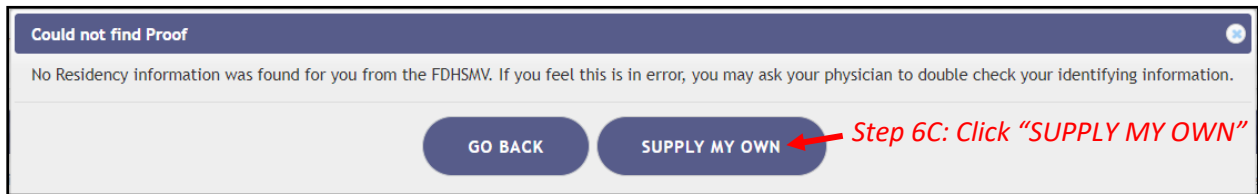
Confirm

You're about to check for your State ID Residency status to insert into this Card Application. If electronic Proof of Residency is found, it will replace any POR uploads you currently have in your application. If nothing is found, no change will be made. Click "Proceed" below to continue.

GO BACK PROCEED

Step 6B: Click "PROCEED"

Step 6C: Prompt appears stating a suitable record was not located. Click “SUPPLY MY OWN.”

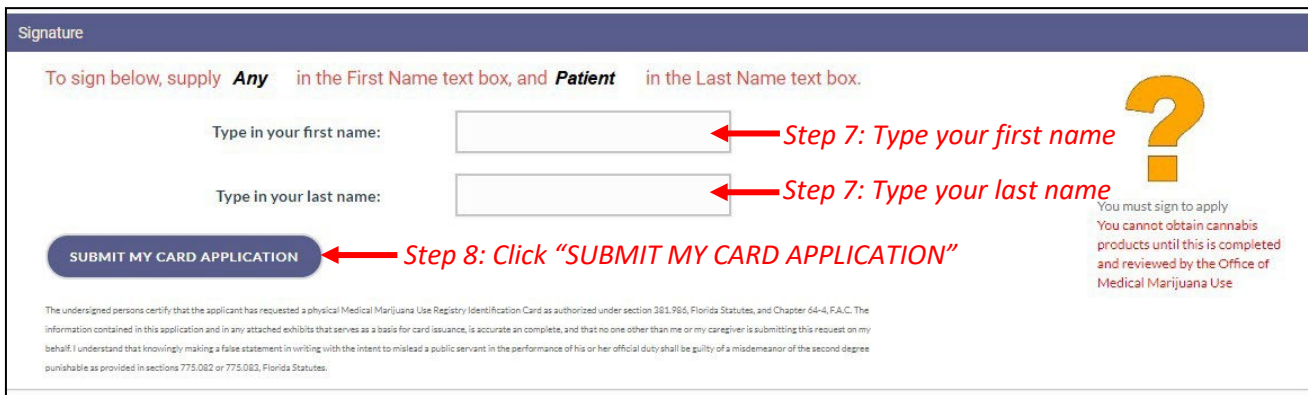


For step-by-step instructions on uploading your photo from your desktop/laptop computer, see our [Uploading a Photo from a Desktop Computer](https://knowthefactsmmj.com/registry/#instructional-guides) guide on our Know the Facts MMJ page (<https://knowthefactsmmj.com/registry/#instructional-guides>).

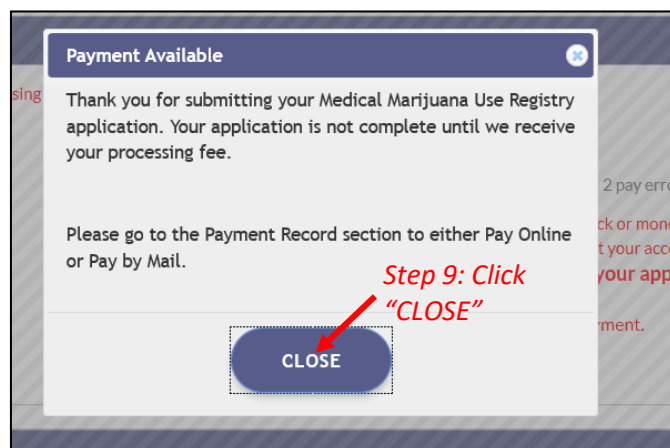
For instructions on uploading your photo from a mobile device, see our [Uploading a Photo from a Mobile Device](https://knowthefactsmmj.com/registry/#instructional-guides) guide on our Know the Facts MMJ page (<https://knowthefactsmmj.com/registry/#instructional-guides>).

Step 7: Electronically sign your application. Scroll to the bottom of the page to the signature section to type in your first name and last name in the boxes provided.

Step 8: Click “SUBMIT MY CARD APPLICATION.”



Step 9: A pop-up message will appear, stating that the application is not complete until you submit the processing fee. Click “CLOSE.”



Step 10: Click the button that says, “CLICK HERE TO PAY ONLINE,” which will appear after you submit your card application.

Payment Record

Cards cannot be issued or renewed until the Office of Medical Marijuana Use receives a \$75 processing fee.

Pay By Mail:
You may mail in your payment in to the following address:

Florida Department of Health
ATTN: Office of Medical Marijuana Use
PO Box 31313
Tampa, FL 33631-3313

Pay Online:
If you have already sent in your payment in the form of a check or money order, please do not click on the payment link as this will generate duplicate payments against your account.

CLICK HERE TO PAY ONLINE


Step 10: Click “CLICK HERE TO PAY ONLINE”

A \$2.75 convenience fee will be added to each online payment.

A Payment has not been processed

Step 11: A new window will open containing the Bill2Pay interface, where you can supply your payment details. Payments by e-check and credit card are accepted. A \$2.75 convenience fee applies to each online payment.

Step 12: Select Method of Payment. Currently credit cards, debit cards and e-checks are acceptable payment.

 *It's a New Day in Public Health.*
The Florida Department of Health works to protect, promote & improve the health of all people in Florida through integrated state, county, & community efforts.

1 Payment Details 2 Confirm Payment 3 Payment Complete

Select Payment Amount
AMOUNT DUE : \$77.75

Select Payment Method
 Credit Card Bank Account

Name on Bank Account:

Account Type:

Routing Number: ?

Account Number: ?

My Account Details
PATIENT ID
DATE OF BIRTH
ADDRESS
AMOUNT DUE \$77.75

Step 12: Select Payment Method. Choose Credit Card for Credit Cards and Debit Cards or Bank Account for E-Checks

Continue

Step 12A: If “Credit Card” was selected, fill out all the credit card information. Then click “Continue” when finished.

The screenshot shows the Florida Health payment portal. At the top left is the Florida Health logo with the tagline "It's a New Day in Public Health." and a description of the department's mission. Below the logo is a progress bar with three steps: "1 Payment Details", "2 Confirm Payment", and "3 Payment Complete". The "Payment Details" step is active. The main content area is divided into two columns. The left column contains: "Select Payment Amount" with a blue bar showing "AMOUNT DUE : \$77.75"; "Select Payment Method" with radio buttons for "Credit Card" (selected) and "Bank Account"; "Name on Card:" with a text input field; "Credit Card Number:" with a text input field and icons for VISA, MasterCard, Discover, and American Express; "Expiration Date:" with a text input field for MM / YY; and "CVV: ?" with a text input field for CVV and a small card icon. The right column is titled "My Account Details" and lists: "PATIENT ID", "DATE OF BIRTH", "ADDRESS", and "AMOUNT DUE" which is \$77.75. At the bottom center is a blue "Continue" button. Red arrows point from the text annotations to the input fields and the "Continue" button.

Step 12A: Fill out all payment information

Step 12A: Click “Continue” after all payment information is entered

Step 12B: If “Bank Account” was selected, fill out all the banking information. Click “Continue” when finished.

The screenshot shows the Florida Health payment portal, identical to the previous one. The "Bank Account" radio button is selected under "Select Payment Method". The left column contains: "Name on Bank Account:" with a text input field; "Account Type:" with a dropdown menu showing "Select an option..."; "Routing Number: ?" with a text input field; and "Account Number: ?" with a text input field. The right column and "Continue" button are the same as in the previous screenshot. Red arrows point from the text annotations to the input fields and the "Continue" button.

Step 12B: Fill out all payment information

Step 12B: Click “Continue” after all payment information is entered

Step 13: Confirm that all the information is correct and input your email address to receive a payment confirmation.

Florida HEALTH

It's a New Day in Public Health.
The Florida Department of Health works to protect, promote & improve the health of all people in Florida through integrated state, county, & community efforts.

1 Account Details 2 Payment Details 3 Confirm Payment 4 Payment Complete

Review your payment details [Edit Details](#)

PATIENT ID [Redacted]
DATE OF BIRTH [Redacted]
PAYMENT METHOD [Redacted]
PAYMENT AMOUNT [Redacted]

Confirmation Email
Email Address [Redacted]

I agree to the Terms and Conditions

[Cancel](#) [Make a Payment](#)

Step 13: Confirm all information is correct

Step 13: Input Confirmation Email

Step 13A: Click “I agree to the Terms and Conditions.” Then click “Make a Payment.”

Florida HEALTH

It's a New Day in Public Health.
The Florida Department of Health works to protect, promote & improve the health of all people in Florida through integrated state, county, & community efforts.

1 Account Details 2 Payment Details 3 Confirm Payment 4 Payment Complete

Review your payment details [Edit Details](#)

PATIENT ID [Redacted]
DATE OF BIRTH [Redacted]
PAYMENT METHOD [Redacted]
PAYMENT AMOUNT [Redacted]

Confirmation Email
Email Address [Redacted]

I agree to the Terms and Conditions

[Cancel](#) [Make a Payment](#)

Step 13A: Click "I agree to the Terms and Conditions"

Step 13A: Click "Make a Payment"

Step 14: Click “Print for your Records” to print the confirmation of the payment.

1 Account Details 2 Payment Details 3 Confirm Payment 4 Payment Complete

Department of Health
Thank you for your payment!
Click here to make another payment

CONFIRMATION NUMBER
PATIENT ID
DATE OF BIRTH
PAYMENT DATE
PAYMENT METHOD
CONFIRMATION EMAIL
PAYMENT AMOUNT

Print for your Records ← Step 14: Click “Print for your Records”

Cards cannot be issued or renewed until the Office of Medical Marijuana Use receives a [\$75/\$15] processing fee. A 2.75 convenience fee will be added to each online payment.

Department of Health www.Bill2Pay.com

You can check the status of your application as it is being reviewed. To learn what each status icon stands for, please see our [Understanding My Application Status](https://knowthefactsmmj.com/registry/#instructional-guides) guide on our Know the Facts MMJ website (<https://knowthefactsmmj.com/registry/#instructional-guides>).

Once your Identification Card application has been approved, you will then be able to contact one of the [licensed medical marijuana treatment centers](https://knowthefactsmmj.com/mmtc) to fill an order. A complete list of licensed treatment centers can be found on our Know the Facts MMJ website (<https://knowthefactsmmj.com/mmtc>).

For additional information, visit
KnowTheFactsMMJ.com