

Home Caregiver Portal Application Manual

Renewal Applicants

FROM CONSUMER AFFAIRS WEBSITE

- 1. Go to <u>www.pbcgov.com/consumer</u>
- 2. Select Home Caregiver from the menu
- 3. Select "Apply for Caregiver ID Badge"
- 4. Select "Apply Here"

Sign Up (First Time Portal Users)

1. Click on the "Sign-Up" link.

Please login to continue	
User Name	
Password:	
Enter your password	
PBC Portal - Secured by Enterprise Connect © 2014 Palm Beach County	LOGIN
Keep me signed in on this device!	
SIGN-UP FORGOT PASSWORD?	

2. The following screen will display.

Please fill the data below to create your user account.
Email *
Email is required
First Name *
First Name is required Last Name *
Last Name is required
Sign-Up

- 3. Enter your **Email**.
- 4. Enter your First Name.
- 5. Enter your Last Name.
 6. Click on the "Sign-Up" button.

	Please fill the data below to create your user account.
3	Email *
4	First Name *
5	Last Name *
6	Sign-Up

7. Select the images as instructed on the security screen, if prompted.



8. The following message will display on the top right-hand- side of your screen.



- 9. Enter your User Name. (The User Name is your Email Address).
- 10. Enter the **Temporary Password** (check your email account). Delivery may take a few minutes. (TIP: Check to make sure it was delivered to yoru spam or trash folder)
- 11. Click on the "Login" button.

Please log in to continue	
User Name 9 Enter your user name Password: 10 Inter your password	
PBC Portal - Secured by Enterprise Connect @ 2014 Palm Beach County Keep me signed in on this device! SIGN-UP FORGOT PASSWORD?	11 LOGIN

The following screen will display.

- 12. Enter a **New Password**.
- 13. Confirm **New Password**.
- 14. Click on "Save New Password."

Please login to continue	
New Password	[?] Strength:
Sonfirm Password (show passwords)	
PBC Portal - Secured by Enterprise Connect © 2014 Palm Beach County	14 SAVE NEW PASSWORD
Keep me signed in on this device!	
SIGN-UP FORGOT PASSWORD?	

The following screen will display.

- 15. The First Name will display by default.
- 16. The Last Name will display by default.
- 17. Enter your **Birthday**.
- 18. Enter your **Phone Number**.
- 19. Click on the "Update" button.



20. The Welcome to Palm Beach County Consumers Affairs Portal screen will display.

8				🕆 Home 🕿 Contac	t Us 🛛 🕒 Logout – Veronica Ca
9	Welcor	ne to Palm Beach Count	y Consumer Affai	rs Portal	
The Division of protections are are charged wil To learn more : ase choose one of the services below	Consumer Affairs is a consum extended to the public through th administering the Palm Bear about the Division of Consume	er protection agency of the Palm Beach County Boa licensing, investigation, informal mediation, and cor ch County Consumer Attains, Moving, Water Taxi, Ac r Attains, click here	rd of County Commissioners position rpliance activities. Staff consists of ou uit Entertainer Work ID, Towing, Vehi	In the Public Safety Department. Consumer stomer service specialists and investigators wh cle for Hire, and Home Caregiver Ordinances.	0
Home Caregiver	0	& Water Taxi	0	& Vehicle For Hire	0
To register as a new Horre Caregiver, renew your replace your card	exisiting registration, or	To register as a Palm Beach County ve registration inform	ndor or access your vendor abon	To register as a Palm Beach Cour registration i	nty vendor or access your vendor nformation
Home Caregiver 🔶		& Coming so	on	& Coming	g soon
		& Towing	0		
		To register as a Palm Beach County we registration inform	ndor or access your vendor ation		
		& Coming so	on		

21. Click on the "Home Caregiver" button.

				🕇 Home	🖀 Contact Us	🕒 Logout Veronica Castro
	Welcor	me to Palm Beach County	y Consumer Affair	rs Portal		
The Division o protections ar are charged w To learn more Ylease choose one of the services below	of Consumer Affairs is a consum e extended to the public through ith administering the Palm Bear about the Division of Consume	er protection agency of the Palm Beach County Boan Neensing, investigation, informal mediation, and com ch County Consumer Affairs, Moving, Water Taxi, Adu r Affairs, click here	d of County Commissioners position i pliance activities. Staff consists of cu at Entertainer Work ID, Towing, Vehic	n the Public Safety Department. C stomer service specialists and inw cle for Hire, and Home Caregiver (Consumer estigators who Ordinances.	
Home Caregiver	0	🌢 Water Taxi	0	A Vehicle For Hire		0
To register as a new Home Caregiver, renew you replace your card	ir exisiting registration, or	To register as a Palm Beach County ver registration informa	ndor or access your vendor tion	To register as a Pair	n Beach County ver registration informa	ndor or access your vendor ition
Click here. Home Caregiver +		& Coming soc	on		& Coming soc	nc
		& Towing	0			
		To register as a Palm Beach County ver registration informa	ndor or access your vendor tion			
		& Coming soc	on			

22. The "**New/Renew/Replace License**" screen will display. Click on the "**Yes**" button to the question, "Have you ever been issued a Home Caregiver ID Badge by Palm Beach County?"

	A Home	Contact Us	🕒 Logout Veronica Castro
🖾 New / Reptace License			
Have you ever been issued a Home Caregiver ID Badge by Palm Beach County?			

23. The following screen will display.

Contact Us	C+ Logout Veronica Castro
	Contact Us

24. If you don't know your Badge ID, click on the "**click here**" link <u>OR</u> look on your ID Badge for the HC number.

			A Home	Contact Us	C+ Logout - Veronica Castro
				110	
B New / Renew / Replace License					
	Have you ever been issued a Home Caregiver ID Badge by Palm Beach County?	Yes XN0			
	if you don't know your Ba	idge ID then click here.			
	If you know your Badge ID, then enter	r the ID number and Date of Birth.			
	Badge ID :				
	Date of Birth :		Q, Search		

- 25. The "Public Safety Consumer Affairs" screen will display.
 - a. Enter Last Name.
 - b. Click on the "Search" button.

Palm Beach Discover the Palm the Best of Ever	County Beaches rything Public	Safety - Consum	er Affairs	Search	R
Home • Disputes • Car	regiver ID + Moving + Towi	ng • Vehicle for Hire •	Water Taxi 🔹	Adult Entertainer ID •	FAQs & Resources *
Caregiver Badges					
NOTE: If a caregiver holds any of County Home Caregiver ID Badg Specialist (CNS), Advanced Regis Assistant (OTA). To verify the sta <u>Verification portal</u> .	f the following current Flori ;e: Registered Nurse (RN), L :tered Nurse Practitioner (A atus of a Florida certificatio	da licenses and/or ce icensed Practical Nur RNP), Physical Theraj n or license of these	ertifications, he rse (LPN), Certii pist (PT) , Physi professionals,	/she is not required t fied Nursing Assistan cal Therapist (OT), Oc visit the <u>Florida Depa</u>	to obtain a Palm Beach t (CNA), Clinical Nurse ccupational Therapist irtment of Health's License
		Home Caregiver	s		
The "Home Caregivers" listed a name is not listed and you b 1-888-852-7362. Search By:	have been issued an Identific relieve it should be, please con Last Name	ation Badge through th ntact Consumer Affairs Last Name: Enter searc	e Palm Beach C at 712-6600, Bo a	ounty Consumer Affair: oca/Delray/Glades call	s Division. If toll free b Search

26. The following screen will display the search criteria entered.

Discover the Palm Beaches the Best of Everything			Sea	arch	
Publ	ic Safety	- Consumer Affa	irs		
Home • Disputes • Caregiver ID • Moving • 1	Towing + Ve	ehicle for Hire • Water	Taxi • Adult Entertainer	ID • FAQs 8	Resources *
regiver Badges					
unty Home Caregiver holds any of the following current F unty Home Caregiver ID Badge: Registered Nurse (RN ecialist (CNS), Advanced Registered Nurse Practitione sistant (OTA). To verify the status of a Florida certifica-	N), Licensed (ARNP), Ph Northeation or licer	ses and/or certificatio Practical Nurse (LPN), hysical Therapist (PT) , nse of these professio	ns, nezsne is not requi Certified Nursing Assi Physical Therapist (O onals, visit the <u>Florida (</u>	istant (CNA), I), Occupatio Department	n a Paim Beach Clinical Nurse nal Therapist of Health's Lice
incation portal.					
	Home	e Caregivers			
The "Home Caregivers" listed have been issued an Iden a name is not listed and you believe it should be, please 1-888-852-7362.	Home	e Caregivers dge through the Palm Ba sumer Affairs at 712-66	each County Consumer A 000, Boca/Delray/Glades	ffairs Divisior	1. If
The "Home Caregivers" listed have been issued an Iden a name is not listed and you believe it should be, please 1-888-852-7362. Search By: Last Name	Home atification Bac a contact Con Last Na	dge through the Palm Be sumer Affairs at 712-66 me: hopkins	each County Consumer A 00, Boca/Delray/Glades	offairs Divisior s call toll free Q Search	ı. If
The "Home Caregivers" listed have been issued an Idem a name is not listed and you believe it should be, please 1-888-852-7362. Search By: Last Name V	Home tification Bac e contact Con: Last Na Badge Numbo	e Caregivers dge through the Palm Bo sumer Affairs at 712-66 me: hopkins Agency Name V	each County Consumer A 100, Boca/Delray/Glades Address 🗸	ffairs Divisior call toll free Q. Search License Expire	n. If View Photo√
The "Home Caregivers" listed have been issued an Idem a name is not listed and you believe it should be, please 1-888-852-7362. Search By: Last Name V Name V Dennis Lamar Hopkins	Home tification Bac contact Cons Last Na Badge Number HC9732	A caregivers dge through the Palm Bo sumer Affairs at 712-66 me: hopkins Agency Name 1 (B) AHCA Verified	Address 1265 W 36th St Riviera Beach, FL 33404	ffairs Divisior call toll free Q Search License Expires 06/20/2023	•. If View Photo↓
The "Home Caregivers" listed have been issued an Idem a name is not listed and you believe it should be, please 1-888-852-7362. Search By: Last Name V Name V Dennis Lamar Hopkins Halsda Merl Hopkins	Home tification Bac c contact Con: Last Na Badge Numb¥ HC9732 HC3169	A caregivers dge through the Palm Ba sumer Affairs at 712-66 me: hopkins Agency Name 1 (B) AHCA Verified Complete Home Care of the Palm Beaches LLC	Address 1265 W 36th St Riviera Beach, FL 33404 2121 NW 46th Ave Lauderhill, FL 33313	ffairs Division call toll free Q Search License Expires 06/20/2023 09/29/2021	•. If View Photo

27. Enter the Badge ID.

- a. Click in the Date of Birth field, and a calendar will appear.
- b. Enter the Date of Birth,
- c. Click on the "Search" button.

			A Home	Contact Us	C+ Logout Veronica Castro
New / Renew / Replace License					
	Have you ever been issued a Home Caregiver ID Badge by Palm Beach County?	VYES X NO			
	if you don't know your B	adge ID then click here.			
	If you know your Badge ID, then ent	er the ID number and Date of Birth.			
	Badge ID :	HC5840			
	Date of Birth :	11/15/1960	Q. Search		

28. The **"Continue to Update or Confirm your information**" screen will display. Click on the **"Continue"** button.

			ft Home	🕿 Contact Us	C+ Logout Veronica Castro
			and shares		
🖽 New / Renew / Replace License					
	Have you ever been issued a Home Caregiver ID Badge by Palm Beach County?	🛩 Yes 🛛 🗶 No			
	If you don't know your I	adge ID then click here.			
	If you know your Badge ID, then en	ter the ID number and Date of Birth.			
	Badge ID :	HC5840			
	Date of Birth :	11/15/1960	Q Search		
	Continue to Update or C	onfirm your information.			
	Name : Henrietta	Hopkins			
	Badge Number : HC5840				
	Address : 5011 Will Creek FL	is Road Apt 207,Coconut 33073			
	License Expire : 04/05/201	7			
	Conti	et e e e e e e e e e e e e e e e e e e			

29. Click on the "Renew License" button.

				↑ Home	Contact Us	G•Logout – Veronica Castro
🔟 New / Renew / Replace License						
			٦			
	Name :	Henrietta Hopkins				
	Badge Number :	HC5840				
	Address :	5011 Wiles Road Apt 207,Coconut Creek,FL 33073				
	License Expire :	04/05/2017				
	Select this option if you approved, a new card w updated expiration date	r ID Badge is expired or is close to expiration. If ill be prepared and printed to include an (5 additional years).				
		Renew License				

- 30. Enter all required data or any necessary optional information.
- 31. Click on the "Save Application" button.
- 32. The message "Application saved successfully" will display.
- 33. Click on the "**Open**" to review, complete each form.

		-			A Home	Contact Us	C+ Logout -
I hereby certify that I have receive I further certify I have receive I agree to notify the Consume I certify that all statements co Badge.	elved, re d and rea r Affairs ntained i	ad, understood and agree to ad a copy of the Home Careg Division of any changes in a n my application are comple	able by the Palm Beach County Code, Chapter XVII, Article XV- Were pamphlet. ddress, photo numbers, e-mail address, change in employment, te and true. I acknowledge that emissions or failse statements will	- Home Caregivers Ordinance an etc. I be grounds for revocation, sus	d the laws of	the State of Florid	a. Home Caregive
• Init	ials :	π	Submit Date : 02/03/2021	* Print Name :	TEST		
Open and Review each for Open(2) Honie Caregiver Open(2) Privacy Policy Ar Open(2) Florida Departme Open(2) FBI Privacy Act 1	orm belo Consent :knowled int of Lav	w: and Authorization (AHCA) Igement Form v Enforcement Form t Form					
			Application saved successfully.				
			& Save Application		1	Continue to Payme	ent 🜩

34. After each form is reviewed and completed you will see a green check mark next to each form.

-	• Gender :	Male	<u>•</u>	- Height :	5.3-	v	• Race :	Native American	
I hereby certif I further certif I agree to noti I certify that a Badge.	ly that I have received, r y I have received and re fly the Consumer Affairs II statements contained	ad, understood a ad a copy of the H Division of any cl in my application	nd agree to abide by the Pa ome Caregivers pamphlet. hanges in address, photo n are complete and true. I ac	Im Beach County Code, Ch umbers, e-mail address, ch knowledge that omissions o	apter XVII, Article X ange in employmer r false statements	(V – Home Caregive nt, etc. will be grounds for	rs Ordinance an	d the laws of the State o	f Florida. • of my Home Caregiver's
	• Initials :	π		Submit Date :	02/03/2021		Print Name :	TEST	
Open and I Open © H Open © F	Review each form bel Iome Caregiver Consent rrivacy Policy Acknowle Iorida Department of La	ow: and Authorization dgement Form 🖋 w Enforcement Fo	(AHCA)						
Open 10 F	BI Privacy Act Statemer	it Form 🖌							
				C Save Applicat	ion			Continue 1	o Payment 🔶

35. Select "Continue to Payment "

Pay Now (Online Payment) & Pick Up ID Badge Renewal in Person

(NOTE: TO PAY IN PERSON AND PICK UP BADGE IN PERSON GO TO PAGE 17)

- 1. Select the "Pay Now" radio button.
- 2. Click on the "Review your Payment" button.

	↑ Home	Contact Us	C+ Logout Renew Application2
Home > Application > Payment		+ Back to Ap	plication
Step 2 - Payment Options			
Please select payment option. To Do: 1. Select one of the payment options "Pay Now" or "Pay in Person."			
\$ Payment Options			Denotes Required Field
* Payment Options : Pay Now O Pay In Person			
Pay To: Paim Beach County - Consumer Atfairs			
Amount To Pay : \$100.00 Renewal - Home Caregiver Fee Amount			
2 → Review your Payment →			

- 3. The "Payment Review" screen will display.
- 4. Click on the **"Edit Payment Option**" button to return to the **Payment Details** screen and make any changes.
- 5. Click on the "Proceed Payment" button.

			🕈 Home	Contact Us	C+Logout - Renew Application2
Home > Application > Payment				+ Back to Ap	oplication
Step 2 - Payment Review					
To Do: 1. To make any changes click on "Edit Payment Option" or continue to "Proceed to Pa	lyment".				
\$ Payment Review					
Pay To :	Palm Beach County - Consumer Alfairs				
Amount To Pay :	\$100.00				
	Cdit Payment Option Proceed to F	Payment →			

- 6. Enter the required information.
- 7. Click on the "Pay Now" button.

Your Order		
Total Amount		\$100.00
		Cancel
6		
Billing Informatio	on	* Required field
First Name *		
Last Name *		
Company Name		
Address Line 1 *		
City *		
Country/Region *	United States of America	
State/Province *	Florida	
Zip/Postal Code *		
Phone Number *		
Email *		
Payment Details	8	
Card Type *		
	Visa	Mastercard Discover
Card Number *		
Expiration Date *		

Note: To cancel the order and return to the "**Payment Options**" page, click on the "**Cancel**" button.

- 8. The "Payment Status" screen will display.
- 9. Click on the "Show Receipt" button to display or print the Payment Receipt.
- 10. Click on the "Continue to Schedule Appointment" button.

	A Home 🕿 Contact Us 🕒 Logout – Renew Application2
Home > Application > Payment	+ Back to Application
Step 2 - Payment Details	
Please provide Payment details, To Do: 1. Click "Show Receipt" to print the receipt.	
S Payment Status — 8	
Applicant Name :	Veronica Edwards
Application Fee For :	Renewal
Amount Paid :	\$100.00
Card Type :	Credit Card
Your payment has been submitted successf	ully. A receipt was sent to your email account.
	Continue to Schedule Appointment +

11. A Payment Confirmation email is sent to the applicant.

Payment was received for the following ID badge or license as detailed below:
Paid To: Palm Beach County Board of County Commissioners Department/Division: Department of Public Safety, Division of Consumer Affairs
Account Holder: Veronica Edwards
Amount (US\$): 100.00 Renewal- Home Caregiver Fee Amount
Transaction Date: January 12, 2021
Confirmation: 831000
Please note that your Caregiver ID Badge is not approved until the application has been processed and your badge has been received.

12. The "Appointment" screen will display.

- a. Choose the date you desire to make the appointment.
- b. Choose the time you desire to make the appointment.

				A Home	Contact Us	G Logout - Ro
Home > Appl	ication > Payment > Appoin	itment			F Back to Payment	
Step 3 - Appointment Details						
Please select the Date and Time To Do: 1. Solicit the Date of your Appear 2. Select the Time of your Appear 9 Appointment	you would like to arrive for Imont. Imont.	your Appointment.				
	Date :	Wednesday February 03, 2021				
11.20 AN	11:40 AM	1.00 PM	1.20 PM	1.40 PM	1	2:00 PM
COLUMN TWO IS NOT	C		2120 1011			

- 13. The "Schedule Appointment" screen will display.
 - a. Select Type of Phone from the dropdown list.
 - b. Enter the Best Phone number.
 - c. Click on the "Schedule Appointment" button.

		ft Home	Contact Us	Ge Logout Renew Application2
Home > Application > Payment > Appointment			+ Back to App	ointment
Step 3 - Appointment Details				
Please select the Date and Time you would like to arrive for the appointment. To Do: 1. Venity your appointment Date, Time, Name, and Email. 2. Select "Type of Phone" and enter the phone number 3. Click "Schedule Appointment" to confirm the appointment. O Schedule Appointment				
Appointment Date/Time :	Tuesday, January 12, 2021 at 2.20 PM			
Name :	Veronica O Lee Edwards			
Email : Type of Phone :	pbcrenewapplication@gmail.com (Note: To modify your Email Address click here) Cell Phone (561) 222-2222 ×			
C	O Schedule: Appointment			

14. The "Appointment Confirmation" will display.

a. Click on the "Continue to Review" button.

			🕈 Home	🕿 Contact Us	C+ Logout Renew Application2
Home > Application > Payment > Appointment				+ Back to App	ointment
Step 3 - Appointment Details					
Please select the Date and Time you would like to arrive for the appointment. To Do: 1. Verify your appointment Date. Time. Name, and Email. 2. Select "Type of Phone" and enter the phone number. 3. Click "Schedule Appointment" to confirm the appointment.					
Annual State Time :	Tuesday, January 43, 2024 at 2,20 PM				
Appointment bater inne :	Voranies O Leo Educatio				
Pearrie ;	Veronica O Lee Euwards				
Email :	pbcrenewapplication@gmail.com (Note: To m	odify your Email Address click here)			
* Type of Phone :	Cell Phone				
Best Phone :	(561) 222-2222				
Appointment scheduled	m January 12, 2021 at 2.20 PM. Email confirmati	ion for your appointment has been sent to your email a	eccount.		
	Schedule Appointment			Continue	: to Review +

15. An **Appointment Confirmation** email is sent to the applicant.

Your appointment has been scheduled for: January 12, 2021 at 2:20 PM.

Confirmation Number: 8DC746C6

The Division of Consumer Affairs is located at the following address: 50 S. Military Trail, Suite 201 West Palm Beach, FL 33415

Please bring picture identification (Driver's License or Passport) and be prepared to have your photo taken. If you have NOT already paid online, please bring payment in the form of a check, money order, Visa, Discover or MasterCard. **WE DO NOT ACCEPT CASH.

Thank you – we look forward to seeing you soon!

If you have any questions, please contact 561-712-6600 or email caregiveridbadges@pbcgov.org

Review Application Details

- 1. Review your details.
 - a. Click on the "Edit Application" button to make changes to the application.
 - b. Click on the "**Submit Application**" to submit the application.

				A Home 🔒	Contact Us 🛛 🕒 Logout Veronica Castro
Home > Application > I	Payment > Appointment > Review			+8	ack to Appointment
nal Step - Review Details					
teview your details. Submit the application o o Do: 1. Review your details. 2. Click "Submit Application" to submit the app	r Edit it if you need to make any changes. lication or "Edit Application" to make changes.				
l Review Dotails					
This application will b	e processed as a Private/Independent Caregiver.				
Application Type :	Renewal				
Appointment Date and Time :	Tuesday, August 25, 2020 at 2.00 PM				
Name :	Henrietta Hopkino				
E-Mail Address :	vcastro2080@gmail.com				
Address :	5011 Wiles Road 207 Road 207 Apt.Coconut Greek FL 33073				
Mailing Address :	5011 Wiles Road Apt 207, Coconut Creek,FL 33073				
Driver Lic. # :	H125-320-60-915-0	Exp. Date :	11/15/2021	Date of Birth :	11/15/1960
Gender :		Height :		Race :	
Initials :	C HH C	Submit Date :	08/12/2020	Print Name :	Henrietta Hopkins
Delivery Option :	Mail				
Payment Date :	8/24/2020 12:43:05 PM	Payment Amount :	\$70.00	Payment Type :	Credit Card
	a / Edit Applic	ation Submit Applica	b		
		@ 2020 Palm Beach Cr	ounty, All rights reserved.		

2. The Application Status notification will display.

/our application was submitted to the Palm Beach County Consumer Affairs Division on Tuesday, August 25, 2020 at 12:07:43 PM. Please note that your Caregiver ID Badge is not approved until the application has been processed and your badge has been received.				
Thank you!				
<u>መ</u>				
	A Home 🕿 Contact Us 🕒 Logout Veronica Castro			
Application Status				
Applicant Name :	Henrietta Hopkins			
Application Type :	Renewal			
Status :	Submitted			
Submitted Date :	08/25/2020			

3. A confirmation of the application submission will be sent to the e-mail address provided.

ID Badge Pay and Pick Up In Person (Renewal)

- 1. Select the "Pay in Person" radio button.
- 2. Select "Continue to Schedule Appointment".

	A Home	🕿 Contact Us	G Logout
Home > Application > Payment		Back to Application	
Step 2 - Payment Options			
Please select payment option. To Do: 1. Select one of the payment options "Pay Now" or "Pay In Person."			
\$ Payment Options			• Denotes Re
■ Payment Options : O Pay Now Pay In Person			
Previously you selected to Pay in Person. You can change the payment option or click Continue to an Appointment.			
	Continue to s	ichedule Appointme	nt 🔶

- 3. Select the desired appointment date.
- 4. Selecte the desire appointment time.

				A Home	Contact Us C+ Logout - Jim Steve
		THE PARTY OF LEVE			
Home > Applicat	tion > Payment > Appointment				+ Beck to Payment
Step 3 - Appointment Details					
Please select the Date and Time you To Do: 1. Select the Date of your Appointme 2. Select the Time of your Appointme	u would like to arrive for your Appoint ent. ont.	ment.			
© Appointment					
	Date : Wedne	esday February 03, 2021			
11:40 AM	1:00 PM	1.20 PM	1:40 PM	2:00 PM	2:20 PM
2:40 PM	3:00 PM	3:20 PM			

- 16. The "Schedule Appointment" screen will display.
 - a. Select Type of Phone from the dropdown list.
 - b. Enter the Best Phone number.
 - c. Click on the "Schedule Appointment" button.

A	🕈 Home 🖀 Contact Us 🕒 Logout – Renew Ap	plication2
Home > Application > Payment > Appointment	+ Back to Appointment	
Step 3 - Appointment Details		
Please select the Date and Time you would like to arrive for the appointment. To Do: 1. Venty your appointment Date, Time, Name, and Email. 2. Select "Type of Phone" and enter the phone number 3. Click "Schedule Appointment" to confirm the appointment		
© Schedule Appointment	Tuesday, January 12, 2021 at 2:20 DM	
Name :	Veronica O Lee Edwards	
Email :	pbcrenewapplication@gmail.com (Note: To modify your Email Address click here)	
b * Best Phone :	(561) 222-2222 ×	
C _	O Schedule Appointment	

The "Appointment Confirmation" will display.

a. Click on the "Continue to Review" button.

	🕈 Home 🕿 Contact Us	C+Logout Renew Application2	
Home > Application > Payment > Appointment	- Back to Appe	intment	
Step 3 - Appointment Details		1	
Please select the Date and Time you would like to arrive for the appointment. To Do: 1. Verify your appointment Date. Time. Name, and Email. 2. Select "Type of Phone" and enter the phone number. 3. Click "Bchedule Appointment" to confirm the appointment.			
O Schedule Appointment			
Appointment Date/Time :	Tuesday, January 12, 2021 at 2:20 PM		
Name :	Veronica O Lee Edwards		
Email :	Email : pbcrenewapplication@gmail.com (Note: To modify your Email Address cilck here)		
* Type of Phone :	Cell Phone		
* Best Phone :	(561) 222-2222		
Appointment scheduled	1 January 12, 2021 at 2.20 PM. Email confirmation for your appointment has been sent to your email account.		
	O schedule Appointment	lo Review →	

17. An **Appointment Confirmation** will be sent to the e-mail address provided in the application.

Your appointment has been scheduled for: January 12, 2021 at 2:20 PM.

Confirmation Number: 8DC746C6

The Division of Consumer Affairs is located at the following address: 50 S. Military Trail, Suite 201 West Palm Beach, FL 33415

Please bring picture identification (Driver's License or Passport) and be prepared to have your photo taken. If you have NOT already paid online, please bring payment in the form of a check, money order, Visa, Discover or MasterCard. **WE DO NOT ACCEPT CASH.

Thank you – we look forward to seeing you soon!

If you have any questions, please contact 561-712-6600 or email caregiveridbadges@pbcgov.org

Review Application Details

- 1. Review your details.
 - a. Click on the "Edit Application" button to make changes to the application.
 - b. Click on the "Submit Application" to submit the application.

				A Home 🔒	Contact Us 🛛 🕒 Logout Veronica Castro
Home > Application > I	Payment > Appointment > Review			+8	ack to Appointment
nal Step - Review Details					
teview your details. Submit the application o o Do: 1. Review your details. 2. Click "Submit Application" to submit the app	r Edit it if you need to make any changes. lication or "Edit Application" to make changes.				
l Review Dotails					
This application will b	e processed as a Private/Independent Caregiver.				
Application Type :	Renewal				
Appointment Date and Time :	Tuesday, August 25, 2020 at 2.00 PM				
Name :	Henrietta Hopkino				
E-Mail Address :	vcastro2080@gmail.com				
Address :	5011 Wiles Road 207 Road 207 Apt.Coconut Greek FL 33073				
Mailing Address :	5011 Wiles Road Apt 207, Coconut Creek,FL 33073				
Driver Lic. # :	H125-320-60-915-0	Exp. Date :	11/15/2021	Date of Birth :	11/15/1960
Gender :		Height :		Race :	
Initials :	C HH C	Submit Date :	08/12/2020	Print Name :	Henrietta Hopkins
Delivery Option :	Mail				
Payment Date :	8/24/2020 12:43:05 PM	Payment Amount :	\$70.00	Payment Type :	Credit Card
	a / Edit Applic	ation 🕑 Submit Applica	b		
		@ 2020 Palm Beach Cr	ounty, All rights reserved.		

2. The Application Status notification will display.

Your application was submitted to the Palm Beach County Consumer Affairs Division on Tuesday, August 25, 2020 at 12:07:43 PM. Please note that your Caregiver ID Badge is not approved until the application has				
been processed and your badge has been received.				
Thank you!				
	A Home 🕿 Contact Us 🕒 Logout Veronica Castro			
0				
Application Status				
Applicant Name :	Henrietta Hopkins			
Application Type :	Renewal			
Status :	Submitted			
Submitted Date :	08/25/2020			

3. A confirmation of the application submission will be sent to the e-mail address provided.