

## Understanding the Registry

### Patient and Caregiver Initial Application Instructions

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>).

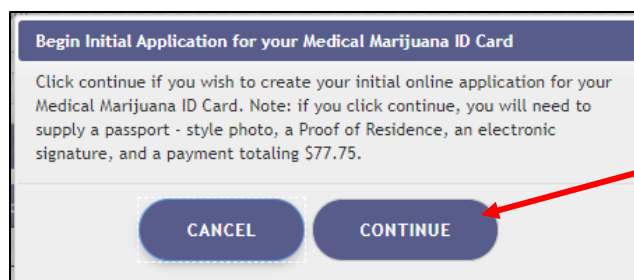
**Step 2:** Navigate to the “Your Card” menu option at the top of the page to view your identification card application.



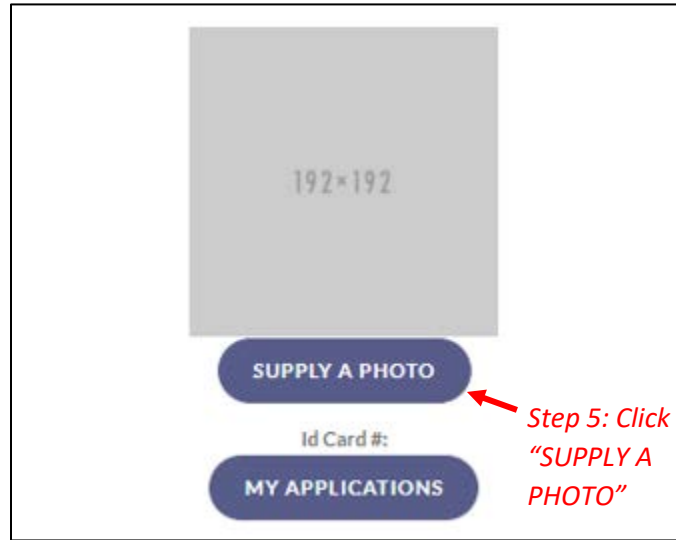
**Step 3:** After clicking “Your Card,” you are brought to your Application History page. Click “Begin Initial Application” to create your initial application.



**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:** Once you have clicked the “Continue” button, you are brought to your initial application page. Click “Supply a Photo” to either supply your State ID photo, or to supply your own passport-style photo to your application.



**Step 6:** 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.)*

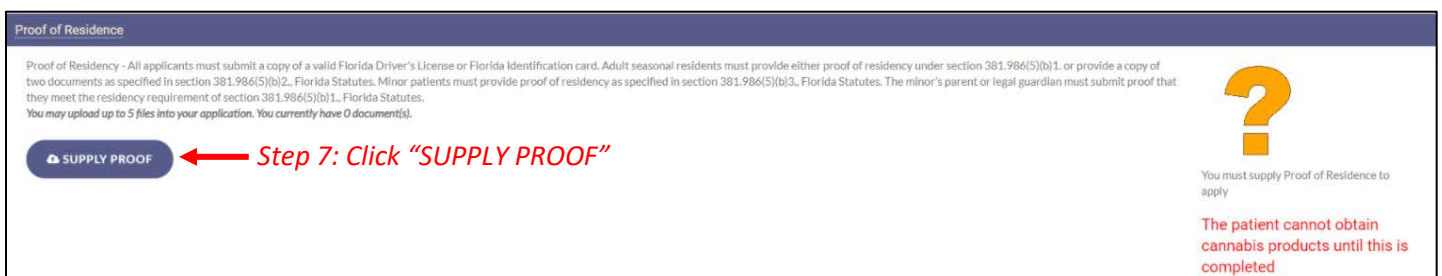


For step-by-step instructions on uploading your photo from your desktop/laptop computer, see our [Uploading a Photo from a Desktop Computer](https://knowthefactsmmj.com/registry/#instructional-guides) guide on our Know the Facts MMJ page (<https://knowthefactsmmj.com/registry/#instructional-guides>).

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:** The next step will be to upload your Proof of Residency documentation. Scroll down to the section titled “Proof of Residence” and then click “Supply Proof.”

Review the [Required Proof of Residency Documentation](https://knowthefactsmmj.com/patients/cards) on our Know the Facts MMJ page (<https://knowthefactsmmj.com/patients/cards>)



**Step 8:** 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 residence, click “Supply My Own” to supply your own proof of residency document. Select the file you wish to upload and click “Open.” The document will appear below the “Supply Residence” button.

For instructions on uploading your proof of residence from a desktop/laptop computer, see our [Uploading Residency Documents 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 proof of residence from a mobile device, see our [Uploading Residency Documents from a Mobile Device](https://knowthefactsmmj.com/registry/#instructional-guides) guide on our Know the Facts MMJ page (<https://knowthefactsmmj.com/registry/#instructional-guides>).

**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.

GO BACK CHECK STATE RESIDENCY STATUS SUPPLY MY OWN

*Step 8: Click “CHECK STATE RESIDENCY STATUS” to supply a valid FL Driver’s License or FL Identification Card*

**Step 9:** Electronically sign your application. Scroll to the bottom of the page to the signature section to type in your first and last name in the boxes provided.

**Step 10:** Click “Submit My Card Application.”

**Signature**

To sign below, supply **Any** in the First Name text box, and **Patient** in the Last Name text box.

Type in your first name:  *Step 9: Type your first name*

Type in your last name:  *Step 9: Type your last name*

**SUBMIT MY CARD APPLICATION** *Step 10: Click “SUBMIT MY CARD APPLICATION”*

You must sign to apply  
You cannot obtain cannabis products until this is completed and reviewed by the Office of Medical Marijuana Use

The undersigned persons certify that the applicant has requested a physical Medical Marijuana Use Registry Identification Card as authorized under section 381.986, Florida Statutes, and Chapter 64-4, F.A.C. The information contained in this application and in any attached exhibits that serves as a basis for card issuance, is accurate and complete, and that no one other than me or my caregiver is submitting this request on my behalf. I understand that knowingly making a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree punishable as provided in sections 775.062 or 775.063, Florida Statutes.

**Step 11:** A pop-up message will appear, stating that the application is not complete until you submit the processing fee. To continue to the payment section, click “Close.”

**Payment Available**

Thank you for submitting your Medical Marijuana Use Registry application. Your application is not complete until we receive your processing fee.

Please go to the Payment Record section to either Pay Online or Pay by Mail.

**CLOSE** *Step 11: Click “CLOSE”*

**Step 12:** 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 12: 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 13:** 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 14:** Select your payment method. Credit cards, debit cards and e-checks are acceptable methods of 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:  
Name on Bank Account

Account Type:  
Select an option...

Routing Number: ?  
Routing Number

Account Number: ?  
Account Number

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

*Step 14: Select Payment Method. Choose Credit Card for Credit Cards and Debit Cards or Bank Account for E-Checks*

Continue

**Step 14a:** If “Credit Card” was selected, fill out all the credit card information. 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 sub-header: "The Florida Department of Health works to protect, promote & improve the health of all people in Florida through integrated state, county, & community efforts." Below this is a progress bar with three steps: "1 Payment Details", "2 Confirm Payment", and "3 Payment Complete".

The main content area is divided into two columns. The left column contains:

- Select Payment Amount:** A blue button labeled "AMOUNT DUE : \$77.75".
- Select Payment Method:** Two radio buttons: "Credit Card" (selected) and "Bank Account".
- Name on Card:** A text input field.
- Credit Card Number:** A text input field with icons for VISA, MasterCard, Discover, and American Express.
- Expiration Date:** A text input field with a "MM / YY" placeholder.
- CVV: ?** A text input field with a "CVV" placeholder and a small card icon.

The right column contains **My Account Details** with the following fields:

- PATIENT ID
- DATE OF BIRTH
- ADDRESS
- AMOUNT DUE: \$77.75

At the bottom center is a blue "Continue" button. Red arrows point from the text "Step 14a: Fill out all payment information" to the Name on Card, Credit Card Number, Expiration Date, and CVV fields. Another red arrow points from the text "Step 14a: Click 'Continue' after all payment information is entered" to the Continue button.

**Step 14b:** 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 one above. The progress bar and header are the same. In the left column, the "Bank Account" radio button is selected under "Select Payment Method".

The right column remains the same, showing "My Account Details" with "AMOUNT DUE: \$77.75".

The left column now contains:

- Name on Bank Account:** A text input field.
- Account Type:** A dropdown menu with "Select an option..." and a downward arrow.
- Routing Number: ?** A text input field.
- Account Number: ?** A text input field.

The blue "Continue" button is at the bottom center. Red arrows point from the text "Step 14b: Fill out all payment information" to the Name on Bank Account, Account Type, Routing Number, and Account Number fields. Another red arrow points from the text "Step 14b: Click 'Continue' after all payment information is entered" to the Continue button.

**Step 15:** Confirm that all the information listed 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

DATE OF BIRTH

PAYMENT METHOD

PAYMENT AMOUNT

Confirmation Email

Email Address

I agree to the Terms and Conditions

Cancel

*Step 15: Confirm all information is correct*

*Step 15: Input Confirmation Email*

**Step 15a:** 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

DATE OF BIRTH

PAYMENT METHOD

PAYMENT AMOUNT

Confirmation Email

Email Address

I agree to the Terms and Conditions

Cancel

*Step 15a: Click "I agree to the Terms and Conditions"*

*Step 15a: Click "Make a Payment"*

**Step 16:** 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 [REDACTED]  
PATIENT ID [REDACTED]  
DATE OF BIRTH [REDACTED]  
PAYMENT DATE [REDACTED]  
PAYMENT METHOD [REDACTED]  
CONFIRMATION EMAIL [REDACTED]  
PAYMENT AMOUNT [REDACTED]

Print for your Records  Step 16: 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](#) 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**