

Department of Regulatory and Economic Resources (RER)



Instructions for submitting business license renewal applications and supporting documentation



Consumer Protection Business Licenses

- Online application of Consumer Protection Business Licenses.

Business Licenses
<ul style="list-style-type: none">• Motor Vehicle Repair (MVR)• Towing (TL)• Immobilization (IL)• Locksmith (LK)• Moving (MR)• Water Remetering Company (RM)• Water Remetering Properties (RW)• Pain Clinic (PC)• Personal Injury Protection (PIP)

- For more information such as application requirements, please visit the **Consumer Protection Web Site**:
<https://www.miamidade.gov/global/economy/consumer-protection/home.page>

Consumer Protection Business Licenses

- To **renew** your license, you must register using the email address in your **Miami-Dade County Consumer Protection record**.
- Access the **Citizen Self-Service Portal** at this link:
https://energov.miamidade.gov/EnerGov_Prod/SelfService#/home



Home Apply Links ▾ Today's Inspections Map Fee Estimator Search 🔍 Calendar 1

Expedited plan review now available, please call 305-375-2640 for additional information.

Welcome to Self Service



Estimate Fees

Use this tool to quickly estimate the required fees for a permit or plan.



Search Public Records

This tool can be used to search for existing permits, plans, inspections, code cases, requests and licenses.



Apply

This tool can be used to apply for a permit, plan or license.

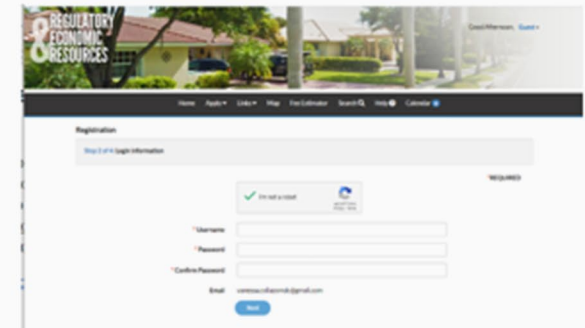
Getting Ready to Submit

- To be able to submit for intake using the **Citizen Self-Service Portal** **you must** register at https://energov.miamidade.gov/EnerGov_Prod/SelfService#/register.
- Please complete the **four (4)** steps in the registration process. After completion, click '**Confirm**' in the confirmation email to access the portal.

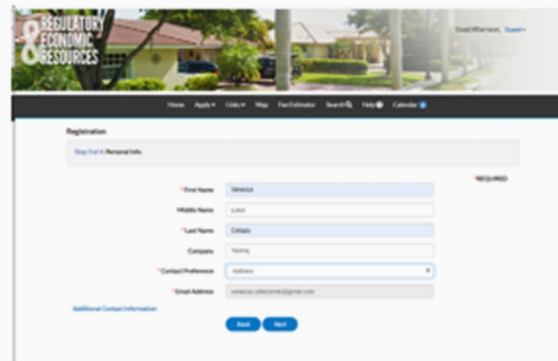
Step 1 Provide an email address



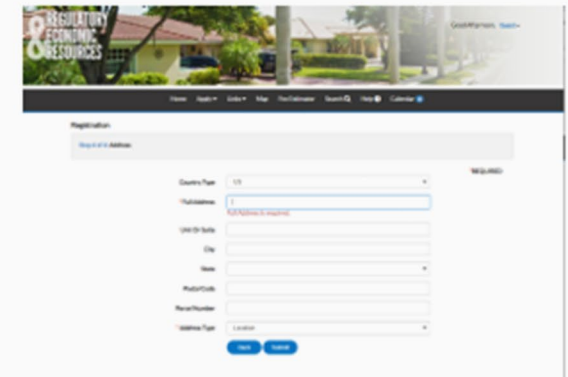
Step 2 Login Information



Step 3 Personal Information



Step 4 Address



Accessing your Citizen Self-Service Account

- An email was sent from **Citizen Self-Service New User Account Confirmation** with instructions for activating your account.
- Please follow the instructions in the email.

RER-Energov@miamidade.gov
to vanessa.collazoMDC ▾

Tue, Jan 26, 5:30 PM (2 days ago) ☆ ↶ ⋮

You are receiving this automated e-mail based on a user registration request that we received for the Citizen Self Service tool for our jurisdiction. The purpose of this confirmation is to validate the e-mail address that was provided in the initial user registration process is the correct e-mail address for your user account. Please click the link below to continue to the next step of the user registration process.

[Confirm](#)

- Select **Confirm**.
- You will be redirected to **Citizen Self-Service Portal** to complete your registration process.

For Renewals

- After completing the registration process go to **'My Work'** and select renew your license.

REGULATORY & ECONOMIC RESOURCES

Good Afternoon

Dashboard Home Apply Links My Work Today's Inspections Map Fee Estimator Search Calendar 1

My Work

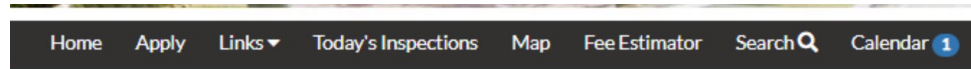
MY PLANS MY EXISTING INSPECTIONS **MYLICENSES**

Search... Export to Excel

License Number	Renew	Name	DBA	Address	Status	Type	Applied
2021-67894.MVR	Renew	Testing		1000 10 ST Miami Beach, FL 33139--532	In Review	Apprentice Mechanic	06/08/2021

Registered Miami-Dade Citizen Self Service Portal Users

- If you already have a **Citizen Self-Service Portal account** that needs your license(s) linked, contact Consumer Protection EnerGov Support at **CPEnerGov@miamidade.gov**.
- If you were previously a registered **Citizen Self-Service Portal user** and forgot your username or password go to [Miami-Dade Citizen Self Service Portal – Login Page](#), select '[Reset it](#)' or '[Email it](#)'.



Log In

* Username

Username is required.

* Password

Password is required

[Log In](#)

Forgot your password? [Reset it](#)
Forgot your username? [Email it](#)
Don't have an account yet? [Register Here](#)

Step 1 - Type

- The information will be automatically populated.
- Select **Next** at the bottom of the page to continue.

License Type Name

Renew License - Immobilization

*REQUIRED



LICENSE DETAILS

Please provide the information for this license to the best of your ability.

License Type

Description

Next



More Info



Motor Vehicle Repair (MVR)

Business License Information

Step 2 - More Info - Motor Vehicle Repair (MVR)

- If renewal, select **2 Year Renewal**.
- Update all the required fields. Select **Next** at the bottom of the page to continue.

Renew License - Motor Vehicle Repair (MVR) *REQUIRED

✓ Type
2 More Info
3 Attachments
4 Review and Submit

MORE INFO

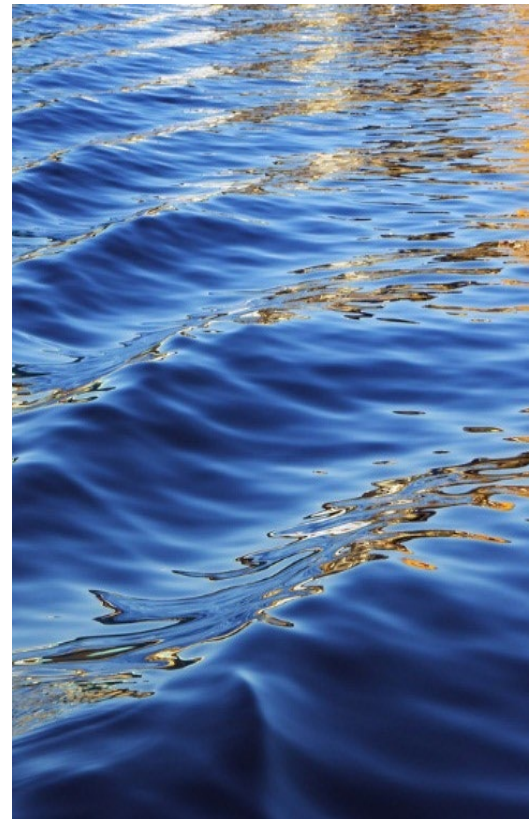
Update the fields below with the relevant information for this license.

Other / Minor Repair	<input type="checkbox"/> Motorcycle Repair
	<input type="checkbox"/> Recreational Trailer Repair
	<input type="checkbox"/> Oil Changes
	<input type="checkbox"/> Glass Installation
	<input type="checkbox"/> Muffler Installation
	<input type="checkbox"/> Tire Installation
	<input type="checkbox"/> Alarm/Radio Installation
	<input type="checkbox"/> Window Tinting
	<input type="checkbox"/> Vehicle Upholstery
	<input type="checkbox"/> Vehicle Graphics & Wraps
Collision & Paint Repair	<input type="checkbox"/> Structural Repair
	<input type="checkbox"/> Paint & Refinishing
	<input type="checkbox"/> Non-Structural Repairs
Heavy Duty Truck Repair	<input type="checkbox"/> Truck Engine Repair - Gasoline
	<input type="checkbox"/> Truck Engine Repair - Diesel
	<input type="checkbox"/> Truck Drive Train
	<input type="checkbox"/> Truck Brake Repair
	<input type="checkbox"/> Truck Suspension & Steering



Towing

Business License Information



Step 2 - More Info - Towing

- If renewal, select 2 Year Renewal.
- Update all the required fields. Select **Next** at the bottom of the page to continue.

Renew License - Towing *REQUIRED

Progress: 1 (Type) — 2 (More Info) — 3 (Attachments) — 4 (Review and Submit)

MORE INFO

Update the fields below with the relevant information for this license..

2 Year Renewal

*Number of Vehicles

Number of Vehicles is required.



Immobilization

Business License Information

Step 2 - More Info - Immobilization

- If renewal, select **2 Year Renewal**.
- Select **Next** at the bottom of the page to continue.

Renew License - Immobilization

*REQUIRED



Type

2

More Info

3

Attachments

4

Review and Submit

MORE INFO

Update the fields below with the relevant information for this license.

2 Year Renewal

Back

Next



Locksmith

Business License Information

Step 2 - More Info - Locksmith

- If renewal, select **2 Year Renewal**.
- Update all the required fields. Select **Next** at the bottom of the page to continue.

Renew License - Locksmith

*REQUIRED



Type



More Info



Attachments



Review and Submit

MORE INFO

Update the fields below with the relevant information for this license.

2 Year Renewal

*Number of Vehicles

Number of Vehicles is required.

*Workers Compensation

- | | |
|--------------------------|--|
| <input type="checkbox"/> | Affidavit (if selected, fill "Affidavit Reason") |
| <input type="checkbox"/> | Certificate of Insurance |
| <input type="checkbox"/> | State Exemption |

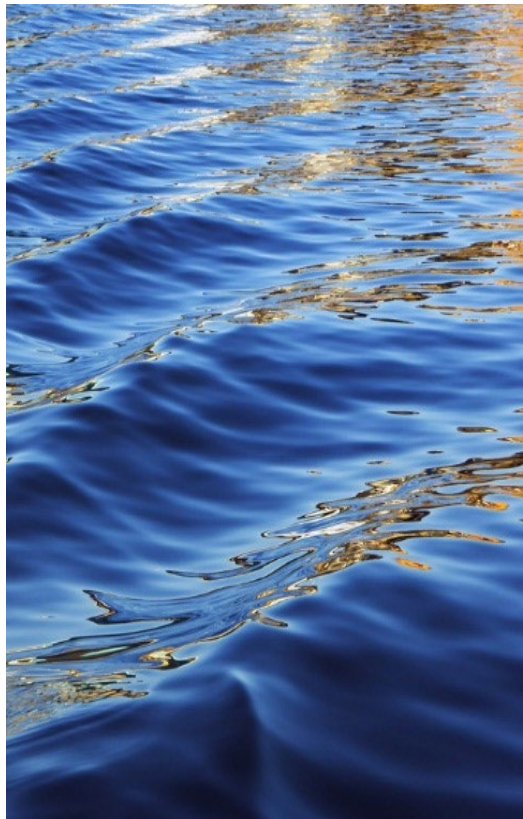
Workers Compensation is required.

Back

Next



Moving
Business License Information

A large, solid green rectangular area that serves as the background for the main text. The text is centered and rendered in a clean, white, sans-serif font.

Step 2 - More Info - Moving

- If renewal, select **2 Year Renewal**.
- Update all the required fields. Select **Next** at the bottom of the page to continue.

Renew License - Moving

*REQUIRED



MORE INFO

Update the fields below with the relevant information for this license.

2 Year Renewal

*Number of Vehicles

Number of Vehicles is required.

*Worker's Compensation

<input type="checkbox"/>	Affidavit (if selected, fill "Affidavit Reason")
<input type="checkbox"/>	Certificate of Insurance
<input type="checkbox"/>	State Exemption

Worker's Compensation is required.

Back

Next



Water Remetering Company

Business License Information

Step 2 - More Info - Water Remetering Company

- If renewal, select **2 Year Renewal**.
- Update all the required fields. Select **Next** at the bottom of the page to continue.

Renew License - Water Remetering Company *REQUIRED

✓
Type
2
More Info
3
Attachments
4
Review and Submit

MORE INFO

Update the fields below with the relevant information for this license.

2 Year Renewal

***Number of Properties**

Number of Properties is required.

***Who is/was Respsble for hvin submeters installed**

Who is/was Respsble for hvin submeters installed is required.

***Worker's Compensation**

<input type="checkbox"/>	Affidavit (if selected, fill "Affidavit Reason")
<input type="checkbox"/>	Certificate of Insurance
<input type="checkbox"/>	State Exemption

Worker's Compensation is required.

Back
Next



Water Remetering Properties

Business License Information

Step 2 - More Info - Water Remetering Properties

- If renewal, select **2 Year Renewal**.
- Update all the required fields. Select **Next** at the bottom of the page to continue.

Renew License - Water Remetering Properties

*REQUIRED



Type

2

More Info

3

Attachments

4

Review and Submit

MORE INFO

Update the fields below with the relevant information for this license.

2 Year Renewal

*Name of Management Company

Name of Management Company is required.

Back

Next



Pain Clinic

Business License Information

Step 2 - More Info - Pain Clinic

- If renewal, select **2 Year Renewal**.
- Update all the required fields. Select **Next** at the bottom of the page to continue.

Renew License - Pain Clinic *REQUIRED

1 Type 2 More Info 3 Attachments 4 Review and Submit

MORE INFO

Update the fields below with the relevant information for this license.

2 Year Renewal

*Is the Clinic licensed by Florida? ▼

Is the Clinic licensed by Florida? is required.

*Controlled substance dispensed at Clinic Site? ▼

Controlled substance dispensed at Clinic Site? is required.

*Controlled substance prescribed at Clinic Site? ▼

Controlled substance prescribed at Clinic Site? is required.

[Back](#) [Next](#)



Personal Injury Protection

Business License Information

Step 2 - More Info - Personal Injury Protection

- If renewal, select **2 Year Renewal**.
- Update all the required fields. Select **Next** at the bottom of the page to continue.

Renew License - Personal Injury Protection

*REQUIRED



Type

2

More Info

3

Attachments

4

Review and Submit

MORE INFO

Update the fields below with the relevant information for this license.

2 Year Renewal

*Controlled substance dispensed at
Clinic Site?

Controlled substance dispensed at Clinic Site? is required.

Back

Next

Step 3 - Attachments

3

- Add the **Application** by selecting the **+ plus symbol** on the blue tile
- Select the applicable attachment type from the drop-down list. To add additional attachments, select the **+ plus symbol** on the blue tile. Select **Next** to continue.

Renew License - Motor Vehicle Repair (MVR)

REQUIRED



Attachments

Please attach all the needed application documentation..

Two blue tiles for adding attachments. The left tile is titled "Required Application File" and has a "REQUIRED" label at the bottom. The right tile is titled "Add Attachment" and has a "Select Type" dropdown menu at the top. Both tiles feature a large white plus sign and the text "Supported: .pdf".

Back

Next

Step 4 Review and Submit

4

- Please review your intake submission. You can click **Back** to review prior steps. When you are ready, select **Submit**.

Renew License - Motor Vehicle Repair (MVR)

*REQUIRED



Type



More Info



Attachments



Review and Submit

Submit

Locations

Location 12459 SW 130th St , Miami, FL, , 33186

Parcel Number 090030

Basic Info

Type Motor Vehicle Repair (MVR)
Description Renewal Issued
Industry Classification(s) 811111 - Automotive repair and replacement shops, general

Accessing your license summary

- A successful message will be displayed in the window. You will be able to access the license details.

✓ Your license application was submitted successfully. No fees are due at this time; we will review your application, and we will be in touch with you shortly. ✕

License Number: MVR-00023

Johnny's Ace Automotive, Inc.

Johnny's Ace Automotive, Inc.

- License cannot be printed at this time. License has not been issued.

[License Details](#) | [Tab Elements](#) | [Main Menu](#)

License Details

License Type:	Motor Vehicle Repair (MVR)	District:		Applied Date:	12/01/2021
Account Number:		Issued By:		Period Start Date:	
Status:	Submitted			Expiration Date:	
Description:	Renewal Issued				

Business

Locations

Fees

Inspections

Attachments

Contacts

Classifications

More Info

[Business](#) | [Next Tab](#) | [License Details](#) | [Main Menu](#)

Business

Pay online

- Once the submission is reviewed, you will receive an invoice with required fees due by email. Login to your **CSS account** and select **Add to Cart** and proceed to pay.

License Number: DP000017-01-2021

[Add to Cart](#)

- License cannot be printed at this time. License has unpaid fees.
- License cannot be printed at this time. License has not been issued.

[License Details](#) | [Tab Elements](#) | [Main Menu](#)

License Details

License Type: Domestic Partnership	District: Commission District 1	Applied Date: 01/26/2021
Account Number:	Issued By:	Period Start Date:
Status: Submitted - Online		Expiration Date:
Description:		

- [Business](#)
- [Locations](#)
- [Fees 1](#)**
- [Inspections](#)
- [Attachments](#)
- [Contacts](#)
- [Classifications](#)
- [More Info](#)

[Fee Summary](#) | [Remaining Fees](#) | [Paid Fees](#) | [Next Tab](#) | [License Details](#) | [Main Menu](#)

Fee Summary

Total Fees: \$64.00	Paid Fees: \$0.00	Unpaid Fees: \$64.00	Add to Cart
----------------------------	--------------------------	-----------------------------	-----------------------------

Remaining Fees

Sort

Fee	Invoice	Computed	Amount Due
DP Registration	I2021040505	\$64.00	\$64.00

Pay online

- Select **Check Out** for payment, you will be redirect to the ePayment portal.

Invoice: I2021040507 Description: NONE
Due Date: 01/29/2021 Billing Contact: Testing (Collazo, Vanessa)

Case Number	Project	Case Address	Amount Due
MVRA-000022-2021		16565 NE 26 AVE North Miami Beach FL 33160-4065	\$40.00

\$40.00
Remove
[Top | Main Menu](#)

- Select Check Out for payment, you will be redirect to the ePayment portal. Click on **EnerGov** button, to go back to CSS portal.

MIAMI DADE COUNTY ePayment TST

[CART](#) [PAYMENT](#) [REVIEW](#) [STATUS](#)

This application is available seven days a week from 12:30 a.m. to 11:30 p.m.
To report a problem, email biddept@miamidade.gov or call (786) 315-2100 during the business hours of 7:30 a.m. to 4:00 p.m., Monday through Friday.

Shopping Cart

There is a maximum of 8 Processes/Invoice Numbers per transaction.

TOTAL **\$748.00**

Process / Invoice Number	Site Address	Amount Due	Options
I2021043362	NW	748.00	<input type="button" value="DELETE"/>

Pay online

- Complete the payment information.

The screenshot displays the ePayment TST web application interface. At the top, there is a blue header with the Miami-Dade County logo on the left, the text "ePayment TST" in the center, and a small circular logo on the right. Below the header is a navigation bar with four icons: a shopping cart labeled "CART", a credit card labeled "PAYMENT", a document with a checkmark labeled "REVIEW", and a document with a checkmark labeled "STATUS".

Below the navigation bar is a light blue banner with the following text: "This application is available seven days a week from 12:30 a.m. to 11:30 p.m. To report a problem, email bldgdept@miamidade.gov or call (786) 315-2100 during the business hours of 7:30 a.m. to 4:00 p.m., Monday through Friday."

The main content area is titled "Payment Information" and includes navigation buttons "« Back" and "Next »". A dropdown menu is set to "MasterCard".

The form is divided into three sections:

- Credit Card Information:** Includes input fields for "Card Number", "Exp. Month", "Exp. Year", and "CVV".
- Personal Information:** Includes input fields for "First Name", "Middle Nam", "Last Name", "Phone Number", and "Email Address".
- Billing Information:** Includes input fields for "Billing Address 1", "Billing Address 2", "United States" (with a dropdown arrow), "City", "Florida" (with a dropdown arrow), and "Zip Code".

At the bottom right of the form, there is a graphic showing three credit cards: a Visa, a MasterCard, and an American Express. The text "CVV" is positioned above the cards, and red lines point from the "CVV" text to the CVV numbers on the American Express and MasterCard.

Pay online

- Review payment information along with **Invoice Number**.
- Select **Yes** to submit payment and **Understood** to move forward.

The screenshot shows the 'Review Payment' step of the ePayment TST process. At the top, there is a navigation bar with the Miami-Dade County logo and the text 'ePayment TST'. Below the navigation bar is a progress indicator with four steps: CART, PAYMENT, REVIEW (highlighted in blue), and STATUS. A light blue banner provides availability information: 'This application is available seven days a week from 12:30 a.m. to 11:30 p.m. To report a problem, email bldgdept@miamidade.gov or call (786) 315-2100 during the business hours of 7:30 a.m. to 4:00 p.m., Monday through Friday.' The main content area is titled 'Review Payment' and includes a '« Back' button and a 'Submit »' button. The 'Payment Method' section shows a selected credit card: 'IPASTEST IPASTEST' with an email notification address 'vanessa.collazo@miamidade.gov'. Below this, a VISA card is listed as 'Visa ending in 9990' with the address '5680 SW 87 Ave'. The 'Process / Invoice Number' section contains a table with the following data:

Process / Invoice Number	Price
I2021043362	\$748.00
TOTAL	\$748.00

This dialog box is titled 'Submit Payment' and contains the text: 'Your are about to proceed with your payment. Do you want to continue?'. At the bottom right, there are two buttons: 'YES' (highlighted in blue) and 'CANCEL'.

This dialog box is titled 'Important!' and contains the text: 'Please, do not close or refresh the page during next process.' At the bottom, there are two buttons: 'UNDERSTOOD' (highlighted in yellow) and 'CANCEL'.

This dialog box is titled 'Payment Status' and contains the text: 'Payment applied successfully.' At the bottom right, there is a 'CLOSE' button.

- You will be able to print a receipt of the transaction and/or Return to CSS-EnerGov.

The bottom navigation bar contains two buttons: '« Return To EnergovCashiering DEV' and 'Print »'.

Licensing Process Complete

- Once the application status has been updated to Issued, you will receive the license in **PDF** format by email.
- You can also download the license from **Citizen Self Service account** by selecting **Attachments**.

License Number: IL000019-06-2021



[License Details](#) | [Tab Elements](#) | [Main Menu](#)


License Details			
License Type:	Immobilization	District:	Commission District 4
Account Number:		Issued By:	Collazo, Vanessa
Status:	Issued	Applied Date:	06/01/2021
Description:		Period Start Date:	06/04/2021
		Expiration Date:	06/04/2022

[Business](#) [Locations](#) [Fees](#) [Inspection](#) **[Attachments](#)** [Contacts](#) [Classifications](#) [More Info](#)

[Attachments](#) | [Next Tab](#) | [License Details](#) | [Main Menu](#)

Attachments

Sort



Attachment

TestLicensePrint.pdf

Uploaded: 06/04/2021

Required Application F

Add Attachment

+

Supported: .pdf

[Submit](#)

Sample license

Miami-Dade County

BUSINESS LICENSE

Department of Regulatory and Economic Resources - Business Affairs

Business Name:

License Type: Immobilization

Business Location:

License Number:

Expiration Date:



This registration is **non-transferable**. The registration/license # must be stated in all advertisements.

TO BE POSTED IN A CONSPICUOUS PLACE