

### Commercial Low-Level Radioactive Waste Site Use Permitting Electronic Payment Guide

Online payment options for Low-Level Radioactive Site Use Permits is now available. Facilities may now pay the annual fees online with an electronic check account transfer, Visa or MasterCard.

Additional Use Site Permit disposal information can be <u>found on our website</u>. <u>https://www.doh.wa.gov/CommunityandEnvironment/Radiation/WasteManagement</u>

If you need to apply for a NEW Site Use Permit, please click <u>here</u> to begin process.

### **New User Login Instructions**

Follow each step to ensure your successful online payment.

First-time users must start by creating an account.

# If you have an existing SAW account, skip to step 7 for instructions to log in and sign up for online payment services.

Note: Contact Consolidated Technology Services (24 hours) at 888-241-7597 or email them at servicedesk@cts.wa.gov if you experience problems with the SAW website.

### Site Use Permit payments

Online payments are made through Secure Access Washington (SAW).

### Step 1: Get started at <u>https://secureaccess.wa.gov/</u>

Step 2: Select SIGN UP!

UP!	THE STATE CRAWSEL	<b>WELCOME</b> to your login for Washington state.
	B SecureAccess B Washington	SIGN UP! GET HELP TIPS ON
	LOGIN USERNAME PASSWORD SUBMIT	ON BEHALF OF WASHINGTON STATE AGENCIES
	rorgot your usemamer   rorgot your pass	

**Step 3:** Enter your personal information, create a password and select I'm not a robot. Choose the verification images, select **VERIFY**, then select **Create my account**.

Not sure if you already have an account? CHEC	ĸNOW	
Name and Email		
First Name		
Last Name		
Primary Email		
- Ontional Contact Information		
	Select all images with	-
Provide additional contact information to receive security codes and reduce the chance of losing access to your account. You can add or edit additional contact information later in your	cars	
Additional Email		
Mobile Phone		
	The Balling	I die
Message and data rates may apply. A message will only be sent when you request it. View our Mobile Terms of Service or <u>Privacy Policy</u> for more information.		The Bland
Lasrama and Baanward	Self- Harrison a	Eres fe
- Usemane and Password	A	
	17110	
		-/
PASSWORD REQUIREMENTS	Martin B	11 22
Add at least 10 more characters	CTONES INCOME	
Add a special character or a lower	Harr II	
case letter or an uppercase letter or a number		
Password		- Andrew
	~ ^ ^	
Confirm Password		VE

Privacy Notice Create my account

Step 4: Check your email account to activate your new SAW account.



**CHECK YOUR EMAIL** 

An activation link has been sent to your email. You must click the link to activate your account before you can login.

#### Step 5: Select the link in the email message: To activate your account, please click.

#### SecureAccess Washington : Welcome to SecureAccess Washington



secureaccess@cts.wa.gov <secureaccess@cts.wa.gov> To: daffymouse@yahoo.com

You are almost finished, Daffy...

Thank you for signing up with Secure Access Washington.

С

Your username is: dmouse

To activate your account, please click: https://secureaccess.wa.gov/public/saw/pub/regConfirmdo?s=6524&userid=dmouse

For questions or concerns about your SecureAccess Washington account, please visit https://secureaccess.wa.gov/public/saw//pub/help.do

Thank you, The Secure Access Washington Team

#### Step 6: Select LOGIN



SIGN UP!

×

Not sure if you already have an account? CHECK NOW

### ACCOUNT ACTIVATED!

Your account is activated and you can now log in. Please note: If you do not log in to this account at least once every 24 months, it will be automatically deleted.



### Step 7: Enter the user ID and password you just created. Select SUBMIT.



### Step 8: After logging in, select ADD A NEW SERVICE.



### Step 9: Select I would like to browse a list of services. ADD A NEW SERVICE



# Step 10: Click on Department of Health to expand the list, select ENVIRONMENTAL HEALTH PAYMENT SYSTEM and click APPLY.

	TATE CAN HASHEN	<b>GOOD MORNING!</b> What can we help you access today?
Sec. Was	tureAccess hington	HOME ACCOUNT TIPS ON GET HELP LOGOUT
		ADD A NEW SERVICE
	Department of Early	Learning
	Department of Ecolo	ay
	Department of Finan	cial Institutions
	Department of Fish a	nd Wildlife
	Department of Healt	
THE OF	STATE OF WASHINGS	<b>GOOD MORNING!</b> What can we help you access today
(B)	SecureAccess Washington	HOME ACCOUNT TIPS ON GET HELP L

### SERVICES FROM DOH



CARE COORDINATOR SYSTEM	APPLY
TBD	
CHILD HEALTH INTAKE FORM	APPLY
The CHIF data system partners with the WA Medicaid agency to identify a child or youth who has in order for Apple Health to offer care coordination and other services. CHIF access is limited to	special health care needs NDCs and LHJs.
ENVIRONMENTAL HEALTH PAYMENT SYSTEM	APPLY
Online payment system for Environmental Public Health Invoices and services	

OGOUT

Step 11: You will see the REGISTRATION COMPLETE page. Select OK



### **REGISTRATION COMPLETE**

This service has been added to your list and is ready for you to start

accessing.



### Step 12: Click on ACCESS NOW

RecureAccess Washington	ACCOUNT	GET HELP TIPS ON LOGOUT
ADD A NEW SERVICE		SHOWING YOUR SERVICES FROM
Environmental Health Payment System provided by Department of Health	Access Now	
Online payment system for Environmental Public Health invoices and services         Contact OLPS help desk       Remove from my list		WASHINGTON STATE AGENCIES

# Step 13: Click CONTINUE to be routed to the Department of Health Environmental Health Online Payment System page



Step 14: Follow each step to ensure you complete your payment successfully.

To get started, on the Radiation Protection tab, select Radioactive Waste Site Permit on the drop-down list or under Quick Links on the left side.

Washington State Department of Health			En	viror	nmental Public H	lealth Online Payment System
Division of Environmental Public Health	Home	Drinking Water	Radiation Protection	Enviro	nmental Health and Safety	
Quick Links Drinking Water OpPermit Radioactive Materials Licensing			Radioactive Materials Licensi Radioactive Waste Site Use P About Radiation	Permit	Welcome to Pi	Environmental Public Health Online Payment System ease select an option from the Quick Links.
Export Certificate						Washington State Department of Health Environmental Public Health Online Payment System
SAW					Enviro	Technical issues with this Web site? Email <u>nmental Health Application Testing and Support</u> or call 360-236-4593

### Step 15: Enter your Site Permit Id, Facility Name, and select a Permit Fee Category as appropriate. Click Search

Westington State Department of Health	Environmental Public Health Online Payment System								
Division of Environmental Public Health	Home Drinking Water Radiation	Protection Environmental H	lealth and Safety						
Radioactive Waste Site Use Permit Payment									
If you need to apply for a NEW Site Use P If you hold more than one Permit ID, pleas	/you need to apply for a NEW Site Use Permit, please click here to begin process.  f you hold more than one Permit ID, please enter one of the Permit IDs to make payment  f you hold more than one Permit ID, please enter one of the Permit UDs to make payment  previous calendar year or last time the permit was held.								
* Site Use Permit ID: G000 If you did not renew last year you m	* Site Use Permit ID: G000 ex: G0000 * Facility Name: Test Site * Year: 2020								
			Search	Cancel					
Select to make a payment	Too 1945 Marca	Tura	¥	Durbete	A	Delected and Fee	Delever Due		
G000	Test	Site Use Permit	2020	02/28/2020	\$ 424.00	\$ 1000.00	\$ 1424.00		

Permits are active: -March through Feb 28 - Low Level Waste Generators & Brokers -Agr t through Mar 31 - NARM and Exempt Waste Generators If you have held a site use permit at any time in the past, and that permit was not renewed last year, you must pay an additional \$1000 reinstatement fee to renew your permit If you have held a site use permit at any time in the past, and that permit was not renewed last year, you must pay an additional \$1000 reinstatement fee to renew your permit

If you have questions about fees or application contact Eileen Kramer

### Step 16: Click check box and Continue

Environmental Public Health Online Payment System								
Division of Environmental Public Health Home	Drinking Water Radia	ation Protection Environmental Health	and Safety					
Radioactive Waste Site Use Permit F	Payment							
If you need to apply for a NEW Site Use Permit, please clic	k <u>here</u> to begin process.				Site Use Permit Fee Classifi The fee is based on the volu	ication ime of waste disposed in the		
If you hold more than one Permit ID, please enter one of th	te Permit IDs to make payment				previous calendar year or la	st time the permit was held.		
* Site Use Permit ID: G000	* Site Use Permit ID: [G000 ex:G000 * Facility Name: Test Site * Year: 2020							
If you did not renew last year you must pay a \$1,00	0 reinstatement fee. Check 'Yes' t	o add fee. 🛛 Yes						
			Search	Cancel				
Select to make a payment								
Site Use Permit ID	Facility Name	Туре	Year	DueDate	Amount	Reinstatement Fee	Balance Due	
🕝 G000	Test	Site Use Permit	2020	02/28/2020	\$ 424.00	\$ 1000.00	\$ 1424.00	
Continue								
<ul> <li>Permits are active.</li> <li>- March 1 through Feb 28 - Low Level Waste Gen - Apr 1 through Mar 31 - NARM and Exempt Wast If you have held a site use permit at any time in the If you have questions about fees or application contact <u>F</u></li> </ul>	erators & Brokers le Generators past, and that permit was not renew illeen Kramer	ed last year, you must pay an additional \$1000 rein	nstatement fee to renew your	permit.				

#### Step 17: Click Pay Now Environmental Public Health Online Payment System Washington State Department of Health Division of Environmental Public Health Home Drinking Water Radiation Protection Environmental Health and Safety Entity ID: G000 Entity Name: Test The following entities are selected for payment. Click 'Pay Now' to proceed to payment portal. Entity Name Year DueDate Amount Reinstatement Fee Entity ID Balance Due G000 Test 2020 02/28/2020 \$ 424.00 \$ 1000.00 \$ 1424.00 Amount Due: \$ 2848.00 \* There is an additional 2% fee on a Debit/Credit card payment. \* Electronic check (ACH) payments will not be charged a fee. Total Payment: \$ 2848.00 Pay Now Return to Search

### **Step 18:** You will be directed to the payment site **"PayPoint"** Follow instructions and complete payment.

Wishington State Department of Health	Environmental Public Health Online Payment System
Payment Method	
Please do not use your browser's back button.	
	* Indicates required field
	Choose method of payment
	<ul> <li>Pay by electronic check</li> </ul>
	* Account Type: Personal
	O Pay by credit card
	Back Next Exit

**Step 19:** Choose **method of payment** and **Next**; follow instructions and complete payment. Click **Next** again.



**Note:** Credit card option (a 2% fee will be applied); Electronic Check (No Fee applied)

Use Business Name	
*First Name:	
M.I.:	
*Last Name:	
*Street Line 1:	
Street Line 2:	
*City:	
*State:	Select State 🗸
*Zip:	
*Country:	UNITED STATES
Phone:	
E-Mail:	
Your account will be debi date falls on a non-banki banking day. Current dat the next valid banking day	ited in 1 to 3 days from the date identified. If your payment ing day your payment will be executed on the next available te payments received after 6:00 PM ET will be executed on lay.
the next value banking di	
Payment Method	
Payment Method *Name On Accou	
Payment Method *Name On Accou *Account Numb	unt:
Payment Method *Name On Accou *Account Numb	unt:
Payment Method *Name On Accou *Account Numb *Re-Type Account Numb *Routing Numb	unt:
Payment Method *Name On Accou *Account Numb *Re-Type Account Numb *Routing Numb *Account Ty	unt:
Payment Method *Name On Accou *Account Numb *Re-Type Account Numb *Routing Numb *Account Ty *Driver License Numb	unt:
Payment Method *Name On Accou *Account Numb *Re-Type Account Numb *Routing Numb *Account Ty *Driver License Numb	unt:

Step 20: Click 'I Agree' checkbox and 'Pay Now'. Wait for payment confirmation

Address
Billing Address: Daffy Duck 1111 Test Address Test City, WA 98123
Payment Method
Electronic Check Checking x1111 121000358
Payment Amount
Amount: 1424.00 USD
Convenience Fee: 0.00 USD
Total: 1424.00 USD
Today, being 11/10/2020, by entering my routing and account number above and clicking "Pay Now," I authorize my payment in the amount indicated above to be processed as an electronic funds transfer (EFT) or draft drawn from my checking or savings account as indicated above and, if necessary, to have my account electronically credited to correct erroneous debits. I understand that my payment will be processed within 1-3 banking days. I understand that this authorization will remain in full force and effect until I notify you that I wish to revoke it and allow you reasonable opportunity to act on my notice. PLEASE PRINT A COPY OF THIS PAGE FOR YOUR RECORDS.
Back Pay Now Exit

Once you select 'Pay Now' please wait for confirmation of your payment. If you leave this page, the processing of your payment may not be completed.

#### 🗹 I Agree

### Step 21: Payment receipt available for print

Environmental Public Health Online Payment System								
Division of Environmental	I Public Health Home	Drinking Water Radiation Protec	tion Environmental Health and Safety					
Entity ID: G0000 Entity Name: test								
The following entitie	es are selected for paymen	t.						
Entity ID	Entity Name	Year	DueDate	Amount	Reinstatement Fee	Balance Due		
G0000	test	2020	02/28/2020	\$ 424.00	\$ 1000.00	\$ 1424.00		
			Total An Conv.	nount Paid: \$ 1424.00				
			Conv	emenceree. 30.00				
			Transaction	Status: PaymentSuccess				
	Transaction Date: 11/10/2020							
			Confirmation	Number: 20111012469443				
Return to Search							Print	