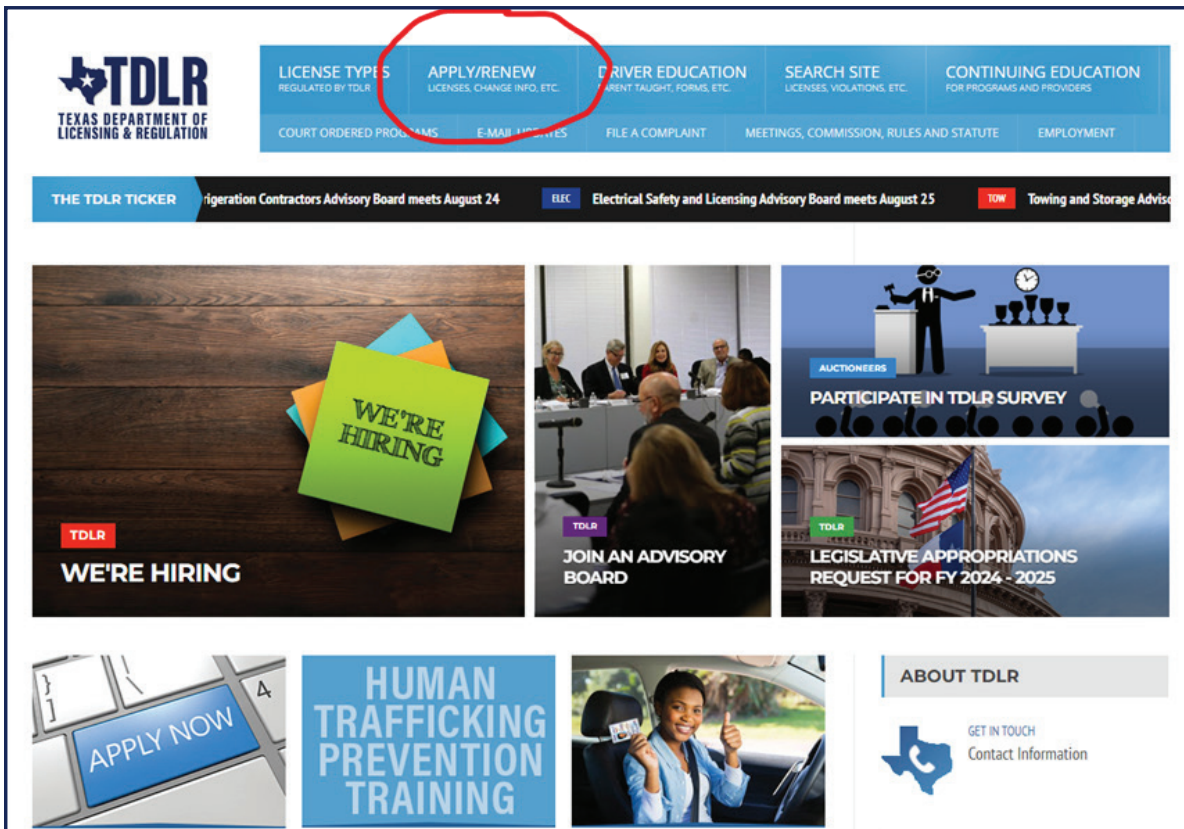


## How to Register as a New User for the New System Below is a step-by-step screen shot of the entire process:

Step 1: Go to our website: Click on Apply/Renew.



## Step 2: Click on Podiatry on the list.

The screenshot shows the TDLR Online Services website. On the left, under the heading "Apply or Renew a License Online", there is a list of professions. "Podiatry" is circled in red. On the right, there is a sidebar with a "Licensing" section containing icons and links for "BARBER AND COSMETOLOGY" (SHEARS - Report Classroom Hours) and "ELECTRICIAN APPRENTICES" (AMPS - Report Apprentice Enrollments). Below this is an "INSIDE TDLR" section with links to "TDLR's Administrative Rules - 16 TAC, Chapter 55", "TDLR's Procedural Rules - 16 TAC, Chapter 60", and "TDLR's Enabling Statute - Occupations Code, Chapter 51".


## Step 3: Click on the Register as a New User link. Set up a New User Account.

The screenshot shows the Texas Department of Licensing and Regulation (TDLR) Online Licensing Services page. The page has a blue header with the TDLR logo and the text "Texas Department of Licensing and Regulation". Below the header, there is a section titled "Online Licensing Services" with a link to "Contact Customer Service". There are six service boxes arranged in a 2x3 grid:

- Renew Your License**: Please [login](#) with your existing user ID and password, or [register as a new user](#).
- Apply for a New License**: Please [login](#) with your existing user ID and password, or [register as a new user](#).
- Search the License Database**: Begin your [license search](#) here to verify that a person or business has a current license.
- Change Your Address**: Please [login](#) with your existing user ID and password, or [register as a new user](#).
- Pay Fees**: Please [login](#) with your existing user ID and password, or [register as a new user](#).
- Login or Register**: This box is circled in red. It contains fields for "Username:" and "Password:", a "Sign In" button, and links for [Register as a New User](#), [Forgot User ID?](#), and [Forgot Password](#).



## Step 4: Enter your information.



TEXAS DEPARTMENT OF LICENSING & REGULATION

Return to the Main Menu

### New User Registration

All items marked with a (\*) are required. You will only complete this process once. After you register, you will login with this account. Enter your details and press "Next".

Press "Cancel" to cancel this registration and return to the main menu.

#### Account User Contact Information

\*

First Name:

Second Name:

\*

Last Name:

#### Account Login

\*

Email: (e.g. name@domain.com)

\*

Confirm Email:

Use email address as user ID:☐

\*

User ID:

#### Password Recovery (In case you forget your password, you will be required to answer this question to obtain a new temporary password.)

\*

Secret Question:

▼

\*

Secret Answer:

#### Third Party Payer


Accept payment requests from third parties? [\(what's this?\)](#) ☐

#### Security Measures (This helps to prevent automated registrations.)

\*

I'm not a robot:


☐ I'm not a robot



reCAPTCHA  
Privacy • Terms

Next

Cancel



TEXAS DEPARTMENT OF LICENSING & REGULATION

Return to the Main Menu

### New User Registration

All items marked with a (\*) are required. You will only complete this process once. After you register, you will login with this account. Enter your details and press "Next".

Press "Cancel" to cancel this registration and return to the main menu.

#### Account User Contact Information

\*

First Name:

Second Name:

\*

Last Name:

#### Account Login

\*

Email: (e.g. name@domain.com)

\*

Confirm Email:

Use email address as user ID:☒

\*

User ID:

#### Password Recovery (In case you forget your password, you will be required to answer this question to obtain a new temporary password.)

\*

Secret Question:

Where were you born? ▼

\*

Secret Answer:

#### Third Party Payer


Accept payment requests from third parties? [\(what's this?\)](#) ☒

#### Security Measures (This helps to prevent automated registrations.)

\*

I'm not a robot:

☒ I'm not a robot



reCAPTCHA  
Privacy • Terms

Next

Cancel



## Step 5: Confirm and edit your information, if needed, before hitting “Save.”

The screenshot shows the TDLR registration form. The header includes the TDLR logo and the text "TEXAS DEPARTMENT OF LICENSING & REGULATION". A link "Return to the Main Menu" is in the top right. The form is titled "Preview Registration" and includes instructions: "Press 'Save' to save the registration.", "Press 'Edit' to modify your registration details.", and "Press 'Cancel' to cancel this registration and return to the main menu." The form fields are as follows:

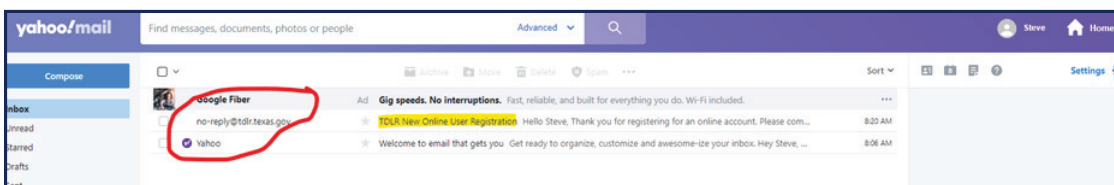
First Name:	Steve
Second Name:	Uecker
Last Name:	Tester
Email:	chocolatethundear@yahoo.com
Userid:	chocolatethundear@yahoo.com
Secret Question:	What street did you grow up on?
Secret Answer:	Sesame
Third Party Payer:	Yes

At the bottom right of the form, there are three buttons: "Save", "Edit", and "Cancel". A red circle is drawn around these buttons. Below the form, there is a disclaimer: "The Texas Department of Licensing and Regulation certifies that it maintains the information for the license verification function of this website, performs daily updates to the information and considers the website to be a secure, primary source for license verification." and "Last Updated: Jan 01, 2017".

## Step 6: You will receive notification of your temporary password for the account. This can be found at the email address you supplied.

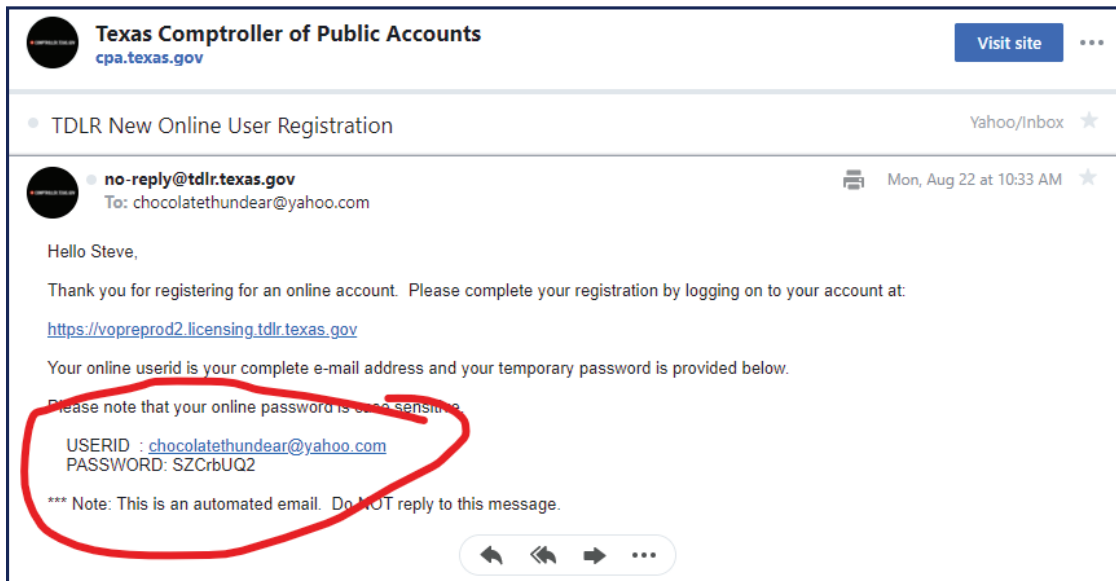
The screenshot shows the TDLR registration confirmation page. The header includes the TDLR logo and the text "TEXAS DEPARTMENT OF LICENSING & REGULATION". A link "Return to the Main Menu" is in the top right. The page is titled "User Registration - Temporary Password Issued" and includes the text: "A temporary password has been issued and sent to you via e-mail with the instructions on how to proceed. Read this e-mail and follow the instructions." At the bottom right, there is a "Return" button.

## Step 7: The email will be from TDLR.

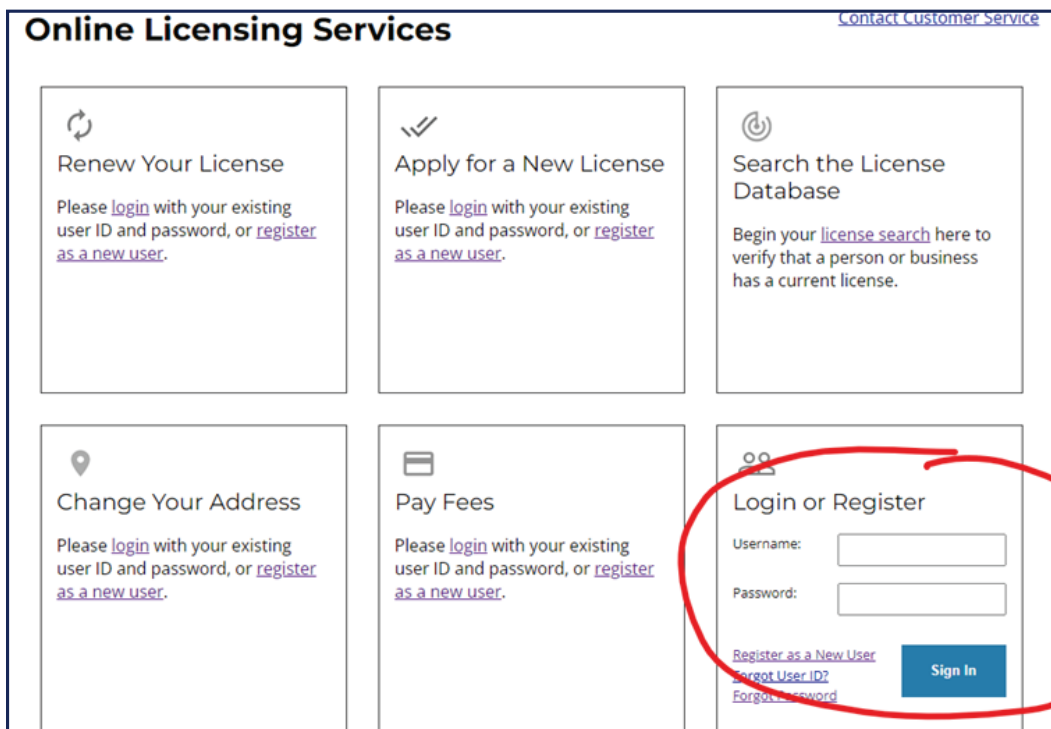


**Step 8: You are issued a password. Now you have a User Account. Open the email. If it is not there, check your spam folder.**

**Step 9: Copy the temporary password.**



**Step 10: Enter your New User Account ID and paste the temporary password.**





**Step 11: Paste the temporary password again and create your own password and confirm it.**

**TDLR**  
TEXAS DEPARTMENT OF LICENSING & REGULATION

Logged in as **Tester, Steve Uecker** [Logoff](#)

### Update Default Registration Information

Enter your new password and press "Save".  
Your new password must contain the following:

- a minimum of (8) characters
- must not be the same as your user id
- must not be a variation of your user id
- must contain at least (1) numeric character
- must contain at least (1) special character

• Old or Temporary Password:

• New Password:

• Confirm Password:

[Save](#)

**Step 12: Congrats. You should not have to do that part again for a long time. You can now link your User Account to your License. Click "Add Licenses to Registration."**

**TDLR**  
TEXAS DEPARTMENT OF LICENSING & REGULATION

Logged in as **Tester2, Steve** [Update Profile](#) | [Logoff](#)

### Quick Start Menu

To start choose an option and you will return to this Quick Start menu after you have finished. If no licenses display under the options, and you are licensed, select 'Add Licenses to Registration' to add your license(s) to your registration.

**License Information**  
No License Information Available

☒ **Apply for a New License**  
What are you applying for?  
<Choose Program>    
<Choose Application>

☒ **Additional Activities**  
**Add Licenses To Registration**

**Step 13: You will now add your License to this User Account. You are a Licensee. Click "Yes."**

**TDLR**  
TEXAS DEPARTMENT OF LICENSING & REGULATION

Logged in as **Tester, Steve Uecker** [Update Profile](#) | [Logoff](#)

### Add Licenses To Registration

Step1: Have You Done Business with Us?      Step2: Provide Identifying Information

**Welcome to OnlineQuickStart**  
By answering a few simple questions we'll help you to get started

**Step 1**  
Select "Yes" for:  
• Current license or permit holder adding a license or permit to their account.  
• Late renewal.

Select "No" for:  
• Password change.

☒ **Yes** ☐ No [How do I know?](#)

[Next](#) [Cancel](#)



## Step 14: Choose your Board and License type:

- Podiatric Medical Examiners Advisory Board and Doctor of Podiatric Medicine.

**TDLR**  
TEXAS DEPARTMENT OF LICENSING & REGULATION

Logged in as **Tester2, Steve**  
[Update Profile](#) | [Logoff](#)

### Add Licenses To Registration - Select License Type

Step1: Have You Done Business with Us?      Step2: Provide Identifying Information

Welcome to **OnlineQuickStart**  
Choose the license you hold

**Step 1**  
Which board/program issues your license?

• Board/Program:

• License Type:

[Next](#) [Cancel](#)

## Step 15: Enter your Name, SSN, and DOB.

**TDLR**  
TEXAS DEPARTMENT OF LICENSING & REGULATION

Logged in as **Tester2, Steve**  
[Update Profile](#) | [Logoff](#)

### Add Licenses To Registration - Validation

Step1: Have You Done Business with Us?      Step2: Provide Identifying Information

Help us to find your records

**Step 2**  
Please provide your credentials  
• Required Information

License Type: Doctor of Podiatric Medicine

• Last Name:

• SSN:  All nine (9) digits of SSN. no hyphens, no spaces **SSN must be 9 numeric characters long**

• SSN (confirm):  All nine (9) digits of SSN. no hyphens, no spaces

• Date Of Birth:  (mm/dd/yyyy)

**Security Measures** (This helps to prevent automated registrations.)



Step 16: Then the system will find your License. You confirm that it's yours.

**TDLR**  
TEXAS DEPARTMENT OF LICENSING & REGULATION

Logged in as **Tester2, Steve**  
[Update Profile](#) | [Logoff](#)

### Add Licenses To Registration - Preview

Step1: Have You Done Business with Us?      Step2: Provide Identifying Information

**Good News! We have located your information**

**Step 3**  
Please confirm your license credentials. If your license is available for renewal, address change, or billing fee, your license will be listed under these options on the Quick Start Menu.

Indiv / Org Number: 11908913  
Name: [REDACTED]

License Type	License Number
Doctor of Podiatric Medicine	[REDACTED]
Hyperbaric Oxygen Permit	[REDACTED]

Select One:

☒ I confirm this is my information  
☐ No this is not my License Information

[Next](#) [Cancel](#)

Step 17: Your DPM License is now linked to the account along with your Hyperbaric Oxygen Permit (HBO).

**TDLR**  
TEXAS DEPARTMENT OF LICENSING & REGULATION

Logged in as **Uecker, Steve**  
[Update Profile](#) | [Logoff](#)

### Quick Start Menu

To start choose an option and you will return to this Quick Start menu after you have finished. If no licenses display under the options, and you are licensed, select 'Add Licenses to Registration' to add your license(s) to your registration.

**It is time to Renew!**

Doctor of Podiatric Medicine [REDACTED]	Renew DPM as Active	<a href="#">Select</a>
Hyperbaric Oxygen Permit [REDACTED]	Renew Hyperbaric Oxygen Permit	<a href="#">Select</a>

**Manage your license information**

Doctor of Podiatric Medicine #2349	<Choose Application>	<a href="#">Select</a>
Hyperbaric Oxygen Permit #2022-01	<Choose Application>	<a href="#">Select</a>

**License Information** [Show Details](#)

Name: [REDACTED]  
License Number: [REDACTED]  
License Type: **Doctor of Podiatric Medicine**

**License Information** [Show Details](#)

Name: [REDACTED]  
License Number: [REDACTED]  
License Type: **Hyperbaric Oxygen Permit**





**Step 18: To begin the HBO Renewal, select “Renew Hyperbaric Oxygen Permit.”**

**Quick Start Menu**

To start choose an option and you will return to this Quick Start menu after you have finished. If no licenses display under the options, and you are licensed, select 'Add Licenses to Registration' to add your license(s) to your registration.

**It is time to Renew**

Doctor of Podiatric Medicine [redacted] Renew DPM as Active **Select**

Hyperbaric Oxygen Permit [redacted] Renew Hyperbaric Oxygen Permit **Select**

**Manage your license information**

Doctor of Podiatric Medicine #2349 <Choose Application> **Select**

Hyperbaric Oxygen Permit #2022-01 <Choose Application> **Select**

**License Information** **Show Details**

Name [redacted]  
License Number [redacted]  
License Type Doctor of Podiatric Medicine

**License Information** **Show Details**

Name [redacted]  
License Number [redacted]  
License Type Hyperbaric Oxygen Permit

**Step 19: The steps will be listed on the left of the screen. Read and follow the instructions.**

**Hyperbaric Oxygen Permit 2022-01**

Logged in as Uecker, Steve  
Update Profile | Logoff

**Introduction**

**Renew Hyperbaric Oxygen Permit - Introduction**

This to renew your Hyperbaric Oxygen permit.

Press "Next" to continue.

Press "Cancel" to cancel this application and return to the main menu.

**PLEASE NOTE:** To avoid delays in processing your application, you must submit **all** required documents while you are logged in during this session.

Follow the instructions on each screen to complete your application. Your information will not be saved until you complete the application and submit your information.

**Next** **Cancel**

**Step 20: Select Attributes: The attribute in this case is military service. The greyed-out boxes show your current status. If you or your spouse are on active duty in the military, select the appropriate box and fill out the linked form MIL 002 form. If not, leave it blank.**

**Hyperbaric Oxygen Permit [redacted]**

Logged in as Uecker, Steve  
Update Profile | Logoff

**Select Attributes**

**Renew Hyperbaric Oxygen Permit - Select Attributes**

Listed below are the license attributes you may add or delete.

Please choose license attribute(s) that apply to you now, then press "Next" to continue.

Press "Previous" to return to the previous section.

Press "Cancel" to cancel this application and return to the main menu.

If Return to Summary Button is available. Press "Return to Summary" to return to the summary.

**Initial Application:** Military Status: Check a box if a military attribute applies to you. Download and submit form MIL001 with your initial license application. Upon verification, your initial fee may be waived.


**Renewal Application:** Military Status: Check a military attribute box only if your license expired while on active duty. Then download and submit form MIL002 with your renewal application. Upon verification, your renewal fee may be waived.

Attribute Type:	Military Status	Current License Attribute(s)	Request To Add
Attributes:	<input type="checkbox"/>	<input type="checkbox"/>	Military Service Member
	<input type="checkbox"/>	<input type="checkbox"/>	Military Spouse
	<input type="checkbox"/>	<input type="checkbox"/>	Military Veteran

**Previous** **Next** **Cancel**



## Step 21: Check your name and personal details.



TEXAS DEPARTMENT OF LICENSING & REGULATION

Hyperbaric Oxygen Permit 2022-01

Logged in as Uecker, Steve

Update Profile | Logout

Introduction

Select Attributes

Name and Personal Details

Contact Information

Attachments

Application Summary

Renew Hyperbaric Oxygen Permit - Name and Personal Details

You must be at least 18 years old to obtain a license.  
Enter your personal details and press "Next" to continue.  
Press "Previous" to return to the previous section.  
Press "Cancel" to cancel this application and return to the main menu.  
If Return to Summary Button is available. Press "Return to Summary" to return to the summary.

Title:

First Name:

Second Name:

Last Name:

Suffix:

Social Security Number:

Birthdate:

Gender:

\*\*\*\*\*

(mm/dd/yyyy)

Male

Previous

Next

Cancel

## Step 22: Update any addresses. You must enter the Hospital Address.

Application Summary

If Copy Button is available. Press "Copy" to copy a previously entered address.  
Press "Zip Lookup" after entering the zip code to populate the U.S. city, state and county.

Mailing Address

Copy From:

Copy

Street Number:

920

Street Name:

Colorado St

Address (cont'd):

Zip Code:

78701-2332

Zip Lookup

City:

AUSTIN

State:

Texas

Country:

United States

Phone Number:

512 111-1111

Phone number must be in 999-999-9999 format

Extension:

E-mail:

steve.uecker@tdlr.texas.gov

HOSP Address

Copy From:

Copy

Street Number:

920 Colorado

Street Name:

League City Pkwy

Address (cont'd):

Zip Code:

78701

Zip Lookup

City:

Austin

State:

Country:

United States

Phone Number:

512 111-1111

Phone number must be in 999-999-9999 format

Extension:

Organization Name:

Super Healthy Hospital- 2


Previous

Next

Cancel



**Step 23: Attach any other required documentation.  
Choose the correct file and select "Attach."**



TEXAS DEPARTMENT OF LICENSING & REGULATION

Hyperbaric Oxygen Permit

Logged in as Uecker, Steve

Update Profile | Logoff

Introduction

Select Attributes

Name and Personal Details

Contact Information

Attachments

Application Summary

Renew Hyperbaric Oxygen Permit - Attachments

PLEASE NOTE: to avoid delays in processing your application, you must submit all required documents while you are logged in during this session.

Locate a file with the "Choose File" button and press "Attach" or "Remove" as is required.

Press "Next" when there are no more files to attach.

Press "Previous" to return to the previous screen.

Press "Cancel" to cancel this application and return to the main menu.

Files Uploaded

Hyperbaric Oxygen Certificate.docx

View Remove

Total Size of Attached Files:

50768

File Name:

Choose File No file chosen

Notes:

To upload a document, use the "Choose File" button to locate the document on your computer. Once you find the document(s) you want to add, press "Attach" for each one.

For applications requiring an official transcript from your university or college, please use [cs.transcript@tdlr.texas.gov](mailto:cs.transcript@tdlr.texas.gov) when ordering from your university's transcript ordering service provider.

Press "Next" when you have no more documents to attach.


Attach

Previous

Next

Cancel

**Step 24: Confirm your information on the Summary screen.**



TEXAS DEPARTMENT OF LICENSING & REGULATION

Hyperbaric Oxygen Permit

Logged in as Uecker, Steve

Update Profile | Logoff

Introduction

Select Attributes

Name and Personal Details

Contact Information

Attachments

Application Summary

Renew Hyperbaric Oxygen Permit - Application Summary

Review the data and press "Submit" to submit this application.

Press "Previous" to return to the previous section.

Press "Cancel" to cancel this application and return to the main menu.

Application

License Type:

Hyperbaric Oxygen Permit

Application Date:

09/27/2022

Personal Details

Full Name:

Edit

Social Security Number:

\*\*\*\*\*

Birthdate:

Gender:

Male

General Addresses

Mailing Address

920 Colorado St

AUSTIN, Texas

78701-2332

US

Phone Number:

512-111-1111

E-mail:

steve.uecker@tdlr.texas.gov

HOSP Address

920 Colorado League City Pkwy

Austin, Texas

78701

US

Phone Number:

512-111-1111

Name:

Super Healthy Hospital- 2

Attachments

File Name:

Hyperbaric Oxygen Certificate.docx

Edit

Notes:


Previous

Submit

Cancel



## Step 25: Attest that you will adhere to the Standard of Care for Hyperbaric Oxygen use.



TEXAS DEPARTMENT OF LICENSING & REGULATION

Hyperbaric Oxygen Permit

Logged in as Uecker, Steve

Update Profile | Logout

Introduction

Select Attributes

Name and Personal Details

Contact Information

Attachments

Application Summary

Renew Hyperbaric Oxygen Permit - Attestation

Press "Previous" to return to the previous section.  
Press "Submit" to continue.  
Press "Cancel" to cancel this application and return to the main menu.

All documents must be attached during this session to avoid delays. Press "Previous" to add documents.

Standard of Care Requirements


1. I will maintain a current history and limited physical evaluation on all podiatric medical patients.
2. I will provide training on emergency procedures to my staff.
3. I will only administer hyperbaric oxygen treatment in a hospital setting.

I certify that I have read and will comply with all applicable provisions of the Podiatry Medical Practice Act; Texas Occupations Code, Chapter 202, and 16 Texas Administrative Code, Chapter 130. I understand that providing false information on this application may result in denial of this application and/or revocation of the license I am requesting and the imposition of administrative penalties.

☒ Yes  
☐ No

Previous Submit Cancel

## Step 26: The amount owed will be displayed.



TEXAS DEPARTMENT OF LICENSING & REGULATION

Hyperbaric Oxygen Permit

Logged in as Uecker, Steve

Update Profile | Logout

Fee and Summary Report


Your application data has been submitted. Click on "View PDF Summary Report" and print this report for your records.  
You are required to pay the amount below for your application to be processed.  
Press "Pay Now" to proceed to the fee payment page.  
Press "Pay Later" to return to the main menu. Select "Pay for Online Applications" from the main menu when you are ready to pay.

Fees

Hyperbaric Oxygen Permit Renewal Fee:	\$25.00
Total Amount Due:	\$25.00

Pay Now Pay Later View PDF Summary Report

## Step 27: Select your payment method.



TEXAS DEPARTMENT OF LICENSING & REGULATION

Hyperbaric Oxygen Permit

Logged in as Uecker, Steve

Update Profile | Logout

Online Application Payment

Select the applications you wish to pay for and press "Next" to continue

Press "Main Menu" to return to the main menu

Application Number	Description	License Number	License Type	Applicant Name	Fee
3	Renew Hyperbaric Oxygen Permit		Hyperbaric Oxygen Permit		\$25.00 <input checked="" type="checkbox"/>


Payment Method

☒ Credit Card  
☐ Electronic Check


Next Show Fee Details Main Menu

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Podiatry Program VERSA Registration and HBO Initial or Renewal Application



## Step 28: Again, confirming payment details.

**TDLR**  
TEXAS DEPARTMENT OF  
LICENSING & REGULATION

TEXAS DEPARTMENT OF LICENSING & REGULATION

Hyperbaric Oxygen Permit

Logged in as Uecker, Steve

[Update Profile](#) | [Logoff](#)

**Confirm Payment Details**


If more than one payment method is listed, first select payment method and then press "Next" to pay for these applications.  
Press "Cancel" if you do not wish to continue with the payment.

Application Number	Description	License Number	License Type	Applicant Name	Fee
3	Renew Hyperbaric Oxygen Permit		Hyperbaric Oxygen Permit		\$25.00
Total					\$25.00

Payment Method: Credit Card

Next Cancel

## Step 29: Enter your credit card information.

**tdlr**

TEXAS DEPARTMENT OF LICENSING & REGULATION

**Payment**

**Payment Type** ✓

**Credit/Debit Card**

**Customer Information**

Country \*  
United States ✓

First Name \*  
Steve ✓

Last Name \*  
Tester ✓

Address \*  
920 ✓

Address 2  
Colorado St ✓

City \*  
AUSTIN ✓

State \*  
TX - Texas ✓

ZIP/Postal Code \*  
78701-2332 ✓

**Transaction Summary**

TDLR Health Professional	\$25.00
<b>Texas.gov Price</b>	<b>\$25.00</b>


**Need Help?**

Please complete the Customer Information Section





### Step 30: Enter the credit card account information.

TEXAS DEPARTMENT OF LICENSING & REGULATION

Customer Information

Address

Steve Tester  
920  
Colorado St  
AUSTIN, TX 78701-2332

Phone Number

5121111111

Country

United States

Email Address

steve.uecker@tdlr.texas.gov

Edit

Payment Information

Credit Card Number \*

Credit Card Number is missing.

Credit Card Type

01 - January

Expiration Month \*

Expiration Year \*

Select a Year

Security Code \*

Security Code is missing.

Name on Credit Card \*

Next >


Transaction Summary

TDLR Health Professional	\$25.00
<b>Texas.gov Price</b>	<b>\$25.00</b>

Need Help?

You have selected to pay by credit card. Complete Customer Billing information and enter Credit Card information.

### Step 31: Confirm and select "Submit."

TEXAS DEPARTMENT OF LICENSING & REGULATION

Customer Information

Address

Steve Tester  
920  
Colorado St  
AUSTIN, TX 78701-2332

Phone Number

5121111111

Country

United States

Email Address

steve.uecker@tdlr.texas.gov

Edit

Payment Information

Credit Card

Visa \*\*\*\*1111  
Exp. 01/2025

Name on Credit Card

DR. Steve T. Tester

Edit

Verification

I'm not a robot

reCAPTCHA

Cancel

Submit Payment

Transaction Summary


TDLR Health Professional	\$25.00
<b>Texas.gov Price</b>	<b>\$25.00</b>

Need Help?

Review payment information. You may edit Billing and Payment Method here if needed. When complete, select Make Payment. You will receive a printable receipt at the end of your successful payment transaction.


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Podiatry Program VERSA Registration and HBO Initial or Renewal Application





**Step 32: You will receive immediate confirmation of a successful transaction. You can also view a PDF summary. A confirmation email will be sent to your user account address.**

**TEXAS DEPARTMENT OF LICENSING & REGULATION**


Hyperbaric Oxygen Permit [REDACTED] Logged in as Uecker, Steve  
[Update Profile](#) | [Logout](#)

**Online Application Payment Success**  
Press "Main Menu" to return to the main menu.  
Press "View PDF Summary" and print this page for your records using the print function of your browser.


Thank you. Your online payment was processed successfully. Please print this page or record the authorization and trace numbers for future reference.

Amount Paid: \$25.00  
Authorization Number: OK4150  
Trace Number: 452RG880290PPD

Application Number	Description	Applicant Name	Fee
2005-3	Renew Hyperbaric Oxygen Permit	[REDACTED]	\$25.00

[Next](#) [View PDF Online Payment Summary Report](#) 

**Step 33: PDF Summary Report.**

**Licensing and Regulation**  
**Podiatric Medical Examiners Advisory**  
**Online Payment**

Amount Paid: 25.00  
Authorization Number: OK4150  
Batch Trace Number: 452RG880290PPD  
Payment Date: 27-Sep-22 2:22 PM  
Payor Name: [REDACTED]


Your application summary will be emailed to the email address provided.

Application Number	Description	Applicant Name	Fee Trace Number
2005-3	Renew Hyperbaric Oxygen Permit	[REDACTED]	25.00 452RG880290PP



## Step 34: The confirmatory email to user account address immediately as well.

Texas.gov TDLR Health Receipt

 noreply@tdlr.texas.gov  
To  
Retention Policy TDLR - 1 Year Delete (1 year) Expires 9/27/2023  
[If there are problems with how this message is displayed, click here to view it in a web browser.](#)

### Payment Receipt Confirmation

Your payment was successfully processed. You may print this receipt page for your records by selecting Print. To complete the transaction, you MUST click Continue to return to the TDLR web site.

#### Transaction Summary

Description	Amount
TDLR Health Professional	\$25.00
Texas.gov Price	\$25.00

#### Customer Information

**Customer Name** Steve Tester  
**Local Reference ID** 452RG880290PPD  
**Receipt Date** 9/27/2022  
**Receipt Time** 02:22:44 PM CDT

#### Payment Information

**Payment Type** Credit Card  
**Credit Card Type** VISA  
**Credit Card Number** \*\*\*\*\*1111  
**Order ID** 65379750  
**Billing Name** DR. Steve T. Tester

#### Billing Information

**Billing Address** 920 Colorado St  
**Billing City, State** AUSTIN, TX  
**ZIP/Postal Code** 78701-2332  
**Country** US  
**Phone Number** 5121111111  
**This receipt has been emailed to the address below.**  
**Email Address** [clayton.mackey@tdlr.texas.gov](mailto:clayton.mackey@tdlr.texas.gov)

