

LARA

Department of Licensing and Regulatory Affairs

Accela Citizen Access

Create an Account in

 **Accela**

Creating a User Profile

1. Please be sure your pop-up blocker is turned off before starting.

Go to <http://www.michigan.gov/MRAonline> and click **Register for an Account**.

2. Read the General Disclaimer and check the **General Disclaimer Box**.

3. Click **Continue Registration**.

LARA
Department of Licensing and Regulatory Affairs

Home Dashboard Search + New Help

Accessibility Support Register for an Account Login

Home Medical Facility Licensing Adult-Use Establishment Licensing Facility & Establishment Complaints Registry Cards

Advanced Search

User Name or E-mail: Password: Login »

Remember me on this computer I've forgotten my password New Users: Register for an Account

Home Medical Facility Licensing Adult-Use Establishment Licensing Facility & Establishment Complaints Registry Cards

Advanced Search

Account Registration

You will be asked to provide the following information to open an account:

- Choose a user name and password
- Personal and Contact Information
- License Numbers if you are registering as a licensed professional (optional)

Please review and accept the terms below to proceed.

2. General Disclaimer

While the Agency attempts to keep its Web information accurate and timely, the Agency neither warrants nor makes representations as to the functionality or condition of this Web site, its suitability for use, freedom from interruptions or from computer virus, or non-infringement of proprietary rights. Web materials have been compiled from a variety of sources and are subject to change without notice from the Agency as a result of updates and corrections.

I have read and accepted the above terms.

3. Continue Registration »

Home Medical Facility Licensing Adult-Use Establishment Licensing Facilities

Advanced Search

Account Registration Step 2: Enter/Confirm Your Account Information

Login Information

Enter your User Name and Password. You must also enter a unique email address

* User Name:

* E-mail Address:

* Password:

Password Strength Requirements

* Type Password Again:

* Enter Security Question:

* Answer:

Contact Information

Please select whether you are registering as an individual or as an organization (business) and enter your contact information

← 4.

← 5.

4. Fill out all the **Required Fields (*)**.

Please Note: Your password **must** contain 8-20 characters including 1 upper case letter, 1 special character, and 1 number.

5. Click **Add New** for Contact Info.

6. For Contact Type select **Individual**.

7. Click **Continue**.

Select Contact Type

* Type:

← 6.


← 7.

Contact Information

*First: Middle: *Last: Suffix: Jr, Sr, III, etc.

Primary Phone: Work Phone: Mobile Phone:

*E-mail: Preferred Channel:

*Birth Date: 

8.



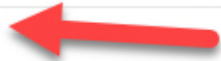
8. Enter your Contact Information (***** field is required):
First Name, Middle Initial, Last Name and **Date of Birth** must match your proof of Michigan residency.

Doing Business As:

▼ Contact Addresses

Add Additional Contact Address

9.



To edit a contact address, click the address link.
Required contact address type(s): Mailing

Showing 0-0 of 0

Action	Address Type	Address	Recipient	Status	Start Date	End Date
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No records found.

Contact Information

Contact Address Information

* Address Type:

Mailing

10.

* Address Line 1:

* City:

State:

--Select--

ZIP Code:

County

--Select--

Save and Close

Save and Add Another

Clear

Discard Changes

11.

10. Select **Mailing Address**. Then enter your:


- **Address**
- **City**
- select **Michigan** from the drop-down
- enter only a 5 digit **zip code**
- select **county** from the drop-down

11. Click **Save and Close**.

Contact Information

Primary Phone: Work Phone: Mobile Phone:

*E-mail: Preferred Channel:

*Birth Date: 

Doing Business As:

▼ Contact Addresses

Add Additional Contact Address

To edit a contact address, click the address link.
Required contact address type(s): Mailing

✔ Contact address added successfully.

Showing 1-1 of 1

Action	Address Type	Address	Recipient	Status	Start Date	End Date
Actions ▼	Mailing	<input type="text"/>		Active		

Continue **Clear** Discard Changes

12.

12. On the Contact Information window click **Continue**.

13. A Pop Up will appear, click **Continue** again.

The information you entered is not found. Click Continue to create a new account. Click Cancel to change the information.

Continue **Cancel** **13.**

14. Under Contact Info, click **Continue Registration**.

15. Now you will be back at the Home page. This will show your account has been completed and you may now **Login**.

Contact Information

Please select whether you are registering as an individual or as an organization (business) and enter your contact information.

✔ **Contact added successfully.**

Bobby Bushay
HappyG12@123.com
Home phone:
Mobile Phone:
Work Phone:
Fax:
Edit Remove

▼ Contact Addresses

Add Additional Contact Address

To edit a contact address, click the address link.
Required contact address type(s): Mailing

Showing 1-1 of 1

Action	Address Type	Address	Recipient	Status	Start Date	End Date
Actions ▼	Mailing	123 South St		Active		

Continue Registration » ← 14.

Home Medical Facility Licensing Adult-Use Establishment Licensing Facility & Establishment Complaints Registry Cards

Advanced Search

Register for an Account **Login**

15.

✔ Your account has been created successfully. You can login immediately using your User Name and Password

Your account has been successfully created.

Congratulations. You have successfully created an account with the Agency and can login immediately. If you have registered as a licensed professional, additional activation by the Agency may be required. If activation is necessary, another e-mail will be sent notifying you when activation is complete.