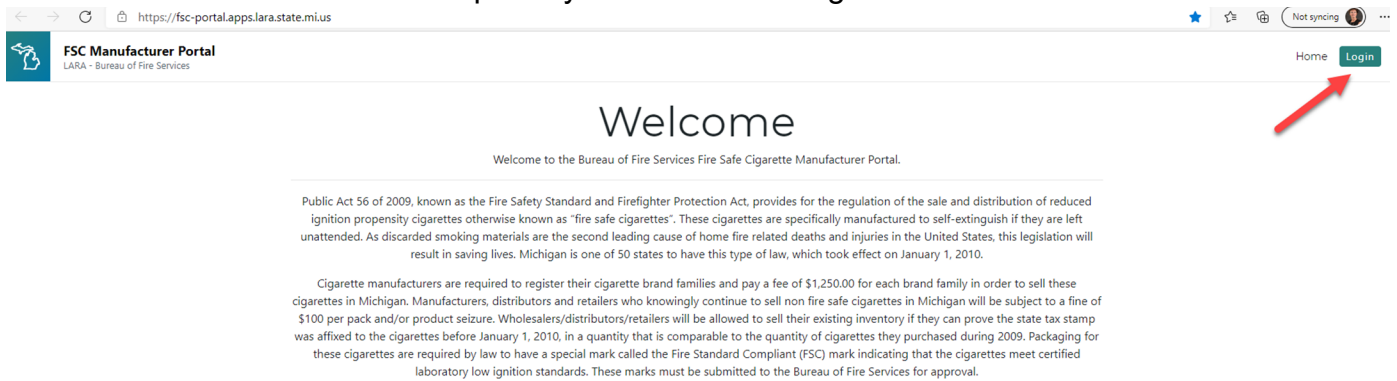


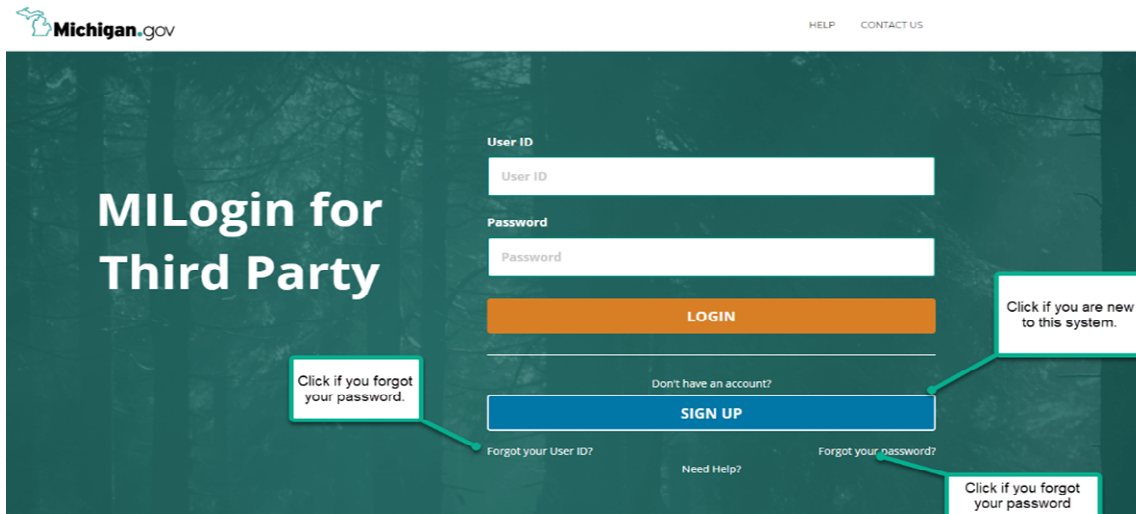
Fire Safe Cigarette Manufacture Instructions

The Bureau of Fire Services has moved the fire safe cigarette data from our old system to a new system. You will need to use the same email that the brands and styles were registered under in the old system, otherwise you won't see anything. If that happens you can contact us at firesafecigarettes@michigan.gov with the new email and we can change the email address for the brand once you have initially registered in the new system.

1. Log in <https://fsc-portal.apps.lara.state.mi.us/>
2. This welcome screen will come up and you will click on "login"

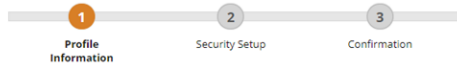


3. This screen will come up. First time users to this system will select sign up. If you have already signed up, you will fill in your user ID and password and click login.



4. You need to fill in all the boxes that have an (*) and click the box that you agree to the terms & conditions. If you provide a mobile phone number, you can be sent a text message to help with resetting a forgotten password. Then you will click next.

Create Your Account



Profile Information

Enter your profile information

* Required

* First Name	Middle Initial	* Last Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

* Email Address	* Confirm Email Address
<input type="text"/>	<input type="text"/>

By providing an e-mail address, a new PIN can be sent to you to help with resetting a forgotten password.

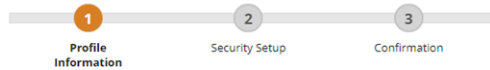
* Work Phone Number	Mobile Number
<input type="text"/>	<input type="text"/>

By providing a mobile number, a text message can be sent to you to help with resetting a forgotten password.

* Verification Question: Red, pants and pink: the 1st color is?

I agree to the terms & conditions.

Create Your Account



Profile Information

Enter your profile information

* Required

* First Name	Middle Initial	* Last Name	Suffix
<input type="text" value="April"/>	<input type="text"/>	<input type="text" value="House"/>	<input type="text"/>

* Email Address	* Confirm Email Address
<input type="text" value="berry@aol.com"/>	<input type="text" value="berry@aol.com"/>

By providing an e-mail address, a new PIN can be sent to you to help with resetting a forgotten password.

* Work Phone Number	Mobile Number
<input type="text" value="616-332-3232"/>	<input type="text"/>

By providing a mobile number, a text message can be sent to you to help with resetting a forgotten password.

* Verification Question: Red, pants and pink: the 1st color is?

I agree to the terms & conditions.

5. You will fill in the user ID and password. See instruction on the right side of this screenshot to create a user ID and password. Then select your security option for your preferred password recovery method. Then click create account.

MILogin for Third Party

HOME

Create Your Account



Security Setup

Provide user id and password information to complete your profile

* Required

1 ***User ID**

2 ***Password**
 ❌

3 ***Confirm New Password**
 ❌

1 User ID Guidelines:

- Enter your last name, first initial, and any 4 numbers with no space between them. For Example: John Smith and using 9999 as an example for the four digit number, you would enter smithy9999.
- User ID cannot contain space.

Password Guidelines:

- Must be at least 8 characters in length
- Must include characters from 3 of the following categories:
 - Upper case letters (A-Z)
 - Lower case letter (a-z)
 - Numbers (0-9)
 - Special characters (\$#.%@-!&* _+><)
- Should not be one of the last 3 used passwords
- Should not be based on your User ID

4 ***Security Options**
 To choose your preferred password recovery method(s), please click on the buttons below. Multiple options can be selected.

Email

Mobile
(Text/SMS)

Security
Questions

5

6. You can choose your preferred password recovery method, email, mobile or security questions. You can choose multiple options. If you choose email or mobile you will receive a confirmation number to type in.

What email looks like.

-----Original Message-----
 From: DONOTREPLY-MILogin@michigan.gov
 To: [REDACTED]
 Sent: Thu, Jul 29, 2021 12:44 pm
 Subject: Account Creation Submission Confirmed

This is to confirm that your request for online account creation has been submitted successfully. Your User ID is [REDACTED].
 If you are facing any issues, please contact the Helpdesk. The Helpdesk information is available at <https://milogintp.michigan.gov/uisecure/tpselfservice/anonymous/help>
 Thanks,
 MILogin team

*Security Options

To choose your preferred password recovery method(s), please click on the buttons below. Multiple options can be selected.



*Email

By providing an e-mail address, a new PIN can be sent to you to help with resetting a forgotten password.

*Mobile (Text/SMS)

By providing a mobile number, a text message can be sent to you to help with resetting a forgotten password.

- By selecting "Mobile" option, you agree to receive text messages on your mobile number.
- Standard message & data rates may apply.

CREATE ACCOUNT

BACK

*Security Questions

--Select Security Question #1--	Enter Security Answer #1
--Select Security Question #2--	Enter Security Answer #2
--Select Security Question #3--	Enter Security Answer #3
--Select Security Question #4--	Enter Security Answer #4

CREATE ACCOUNT

BACK

7. Once you have created the account you will get this screen and click request access.

8. If you get this error, click home.

Error

✖ Error ID: 2005

You do not have permissions to access the requested resource.

In case you continue to receive this message, please use [Help Page](#) link to contact the help desk.

HOME

REQUEST ACCESS

9. Then this page will come up. Click on request access.

Home Page of

⌚ Your password will expire in **365** days

Access your applications by clicking on the application links below

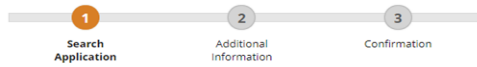
You do not have access to any application. You can request access by clicking on [Request Access](#) link.

10. On this screen you will select Licensing and Regulatory Affairs (LARA) in the drop down. Then you will click on FSC Manufacturer.

MILogin for Third Party

HOME REQUEST ACCESS UPDATE PROFILE SECURITY OPTIONS CHANGE PASSWORD LOGOUT

Request Access



Search Application

Search for an application with a keyword or select an agency to view its applications

Search application

LARA Licensing and Regulatory Affairs (LARA)

- Apply or Renew Adult Foster and Child Care Licenses
- FSC Manufacturer
- Facility Maintenance
- Health Facilities Engineering Section
- MI-FRI: Michigan Facility Reported Incidents for Long Term Care
- MPSC E-Dockets
- Radiation Safety Section Online Registration System

11. Then you will click on I agree to the terms & conditions and click request access.

FSC Manufacturer
Registration to sell cigarettes in Michigan, Fire Safe Cigarette Portal

Terms & Conditions
This warning banner provides privacy and security notices consistent with applicable federal laws, directives, and other federal guidance for accessing this government system.

- This system is provided for authorized use only.
- Unauthorized or improper use of this system is prohibited and may result in disciplinary action and/or civil or criminal penalties.
- By using this system, you understand and consent to the following:

I agree to the terms & conditions
 I do not agree

CANCEL **REQUEST ACCESS**

12. You will put in your address and phone number and click submit.

Request Access



Additional Information

Provide following information to submit your access request

* Required

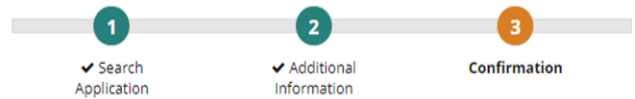
* Email Address

* Work Phone Number




13. You can click on home.

Request Access



Confirmation

 **Success**
The request for your access has been successfully submitted.
You will see the updated list of application(s) on your home page once it is processed.



14. This is what the home page will look like.

MILogin for Third Party

[HOME](#)[REQUEST ACCESS](#)[UPDATE PROFILE](#)[SECURITY OPTIONS](#)[CHANGE PASSWORD](#)[LOGOUT](#)

Home Page of **Jay White**

Your password will expire in **365** days

Access your applications by clicking on the application links below

Licensing and Regulatory Affairs (LARA)

FSC Manufacturer

15. Click on Acknowledges/Agree.

Terms & Conditions

FSC Manufacturer

Terms & Conditions

This warning banner provides privacy and security notices consistent with applicable federal laws, directives, and other federal guidance for accessing this government system.

- This system is provided for authorized use only.
- Unauthorized or improper use of this system is prohibited and may result in disciplinary action and/or civil or criminal penalties.
- By using this system, you understand and consent to the following:

- The government may monitor, record, and audit your system usage. Therefore, you have no reasonable expectation of privacy regarding any communication or data transiting or stored on this system. At any time, and for any lawful

CANCEL ✕ **Acknowledge/Agree**

16. This is what come up after hitting acknowledge/agree. You will click Brands to add a brand.

FSC Manufacturer Portal
LARA - Bureau of Fire Services

Home Brands **Logout**


Welcome

Welcome to the Bureau of Fire Services Fire Safe Cigarette Manufacturer Portal.

Public Act 56 of 2009, known as the Fire Safety Standard and Firefighter Protection Act, provides for the regulation of the sale and distribution of reduced ignition propensity cigarettes otherwise known as "fire safe cigarettes". These cigarettes are specifically manufactured to self-extinguish if they are left unattended. As discarded smoking materials are the second leading cause of home fire related deaths and injuries in the United States, this legislation will result in saving lives. Michigan is one of 50 states to have this type of law, which took effect on January 1, 2010.

Cigarette manufacturers are required to register their cigarette brand families and pay a fee of \$1,250.00 for each brand family in order to sell these cigarettes in Michigan. Manufacturers, distributors and retailers who knowingly continue to sell non fire safe cigarettes in Michigan will be subject to a fine of \$100 per pack and/or product seizure. Wholesalers/distributors/retailers will be allowed to sell their existing inventory if they can prove the state tax stamp was affixed to the cigarettes before January 1, 2010, in a quantity that is comparable to the quantity of cigarettes they purchased during 2009. Packaging for these cigarettes are required by law to have a special mark called the Fire Standard Compliant (FSC) mark indicating that the cigarettes meet certified laboratory low ignition standards. These marks must be submitted to the Bureau of Fire Services for approval.

17. To add a new brand, you will click on new brand application.

 **FSC Manufacturer Portal**
LARA - Bureau of Fire Services

Home Brands [Logout](#)


Brands

This is the brand list page. From here, you can start new brand applications and view your existing brands.

If you would like to create a register a new brand, you can begin by clicking the **New Brand Application** button below, or by clicking [here](#).

Brands that you have already registered are listed below. If you have more than 5 registered brands, they will be split across multiple pages. The name, reference number, and expiration date of each brand are displayed in each row. You can view additional information about each brand by clicking the **View details** link in the row of the brand you select.

You can add styles to a brand family by navigating to the detail page of the brand you would like to add them to and clicking the **Register Cigarette Style** button.

[New Brand Application](#) 

We couldn't find any brands registered to you. [Click here](#) to start a new application.

18. Add the brand information and click next.

New Brand Application

Brand Name

Street Address

City

State

Zip Code

Phone Number

Contact First Name

Contact Last Name

[Next](#)

[Back to List](#)

19. Confirm application screen will come up and you will proceed to payment.

Confirm Application

Brand Name	Blue Fly
Street Address	123 Sunset
City	Sunset
State	PA
Zip/Postal Code	48925
Phone Number	555 555 5555
Contact Name	Jane Doe
Payment Amount	\$1,250.00

[Proceed to payment](#)

[Back to application](#)

20. You will pay by credit card by clicking “next”.

Payment Method

MyLicense Payment Request

Welcome to the CEPAS Credit Card Processing Payment Module for MyLicense.
This process is being used as a secure means of processing credit card authorizations.
Payment may be made with a valid Visa, MasterCard, Discover, or American Express credit card.
To begin the payment process, click on "NEXT" in the box below.

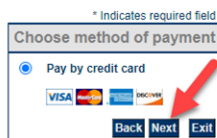
* Indicates required field

Choose method of payment

Pay by credit card

VISA MasterCard Discover

Back Next Exit



21. You will fill out the credit card information and click next.

Payment Information

MyLicense Payment Request

Billing Address information is not required; please scroll down to the Payment Method Section to enter your credit card information.
To continue the payment process, click on "NEXT" in the box below.
If you have entered a valid email address, a confirmation email will be received from ncore@v@liserv.com.

* Indicates required field

Billing Address

Use Business Name

*First Name: Jane

M.I.:

*Last Name: Doe

Street Line 1:

Street Line 2:

City:

State: Select State

Zip:

Country: UNITED STATES

Phone:

*E-Mail: doe@aol.com

Payment Details

*Payment Amount: 1250.00 USD

Payment Method

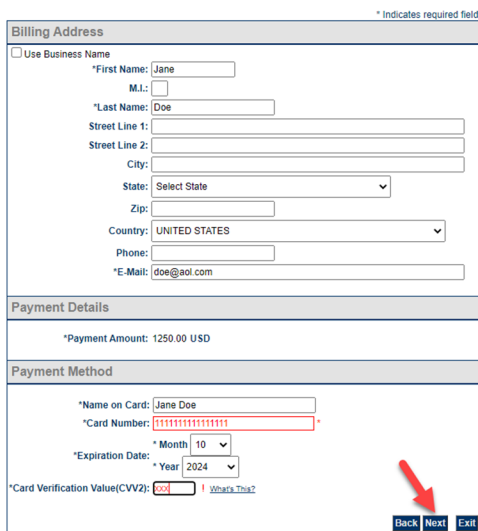
*Name on Card: Jane Doe

*Card Number: 1111111111111111

*Expiration Date: * Month 10 * Year 2024

*Card Verification Value(CV2): 0001 [What's This?](#)

Back Next Exit



22. Click pay now.

MyLicense Payment Request

To confirm your payment information, click on "Pay Now" in the box below.
If you have entered a valid email address, a confirmation email will be received from nzerech@fliserv.com.

Address	
Billing Address:	Jane Doe doe@aol.com
Payment Method	
Credit Card:	VISA Jane Doe x1111 10/24
Payment Amount	
Amount:	1250.00 USD
Total:	1250.00 USD
Back Pay Now Exit	

23. Once payment goes through you will get "Payment Succeeded".

Payment Succeeded

Your payment request has succeeded. Your payment confirmation number is 21062514422412.


[Go to details](#)

24. If you click on "Go to details" under payment succeeded this will come up and you will be able to update address, update contact, register cigarette styles for this brand or go back to the list.

Blue Fly

[Update Address](#) 
[Update Contact](#) 

REFERENCE ID	000000811	NAME	BLUE FLY
STREET ADDRESS	123 SUNSET	CITY	SUNSET
STATE	PA	ZIP CODE	48925
CONTACT	JANE DOE	PHONE NUMBER	555 555 5555
EXPIRATION DATE	TUESDAY, JUNE 25, 2024	RENEWAL PERIOD BEGINS	SUNDAY, MAY 26, 2024

[Register Cigarette Style](#) 

[Reference ID](#) [Name](#)

[Back to List](#) 

25. To update the address for the cigarette brand, click "update address".

Blue Fly

[Update Address](#) 
[Update Contact](#)

REFERENCE ID
0000000811
STREET ADDRESS
123 SUNSET
STATE
PA
CONTACT
JANE DOE
EXPIRATION DATE
TUESDAY, JUNE 25, 2024

NAME
BLUE FLY
CITY
SUNSET
ZIP CODE
48925
PHONE NUMBER
555 555 5555
RENEWAL PERIOD BEGINS
SUNDAY, MAY 26, 2024

[Register Cigarette Style](#)

Reference ID

Name

[Back to List](#)

26. This will come up and you can make any changes needed to the address. Once you make the changes you click update and it will save the changes and take you back to where you can update the contact or register cigarette styles.

Update Address

You are updating the address for Blue Fly.

Street Address

123 Sunset

City

Sunset

State

Pennsylvania

Zip Code

48925

[Update](#) 

[Back to details](#)

27. To update the contact, click on update contact.

Blue Fly

[Update Address](#)
[Update Contact](#) 

REFERENCE ID
0000000811
STREET ADDRESS
123 SUNSET
STATE
PA
CONTACT
JANE DOE
EXPIRATION DATE
TUESDAY, JUNE 25, 2024

NAME
BLUE FLY
CITY
SUNSET
ZIP CODE
48925
PHONE NUMBER
555 555 5555
RENEWAL PERIOD BEGINS
SUNDAY, MAY 26, 2024

[Register Cigarette Style](#)

Reference ID

Name

[Back to List](#)

28. This screen will come up to change contact information. Once you make changes click update and it will save the changes and take you back to where you can change the address or register cigarette styles.

Change Contact Information

You are changing the contact information for Blue Fly.

Contact First Name	Contact Last Name
<input type="text" value="Jane"/>	<input type="text" value="Doe"/>
Phone Number	
<input type="text" value="555 555 5555"/>	
<input type="button" value="Update"/>	
Back to details	

29. To register a cigarette style click on “Register Cigarette Style”.

Blue Fly

[Update Address](#)
[Update Contact](#)

REFERENCE ID	NAME
000000811	BLUE FLY
STREET ADDRESS	CITY
123 SUNSET	SUNSET
STATE	ZIP CODE
PA	48925
CONTACT	PHONE NUMBER
JANE DOE	555 555 5555
EXPIRATION DATE	RENEWAL PERIOD BEGINS
TUESDAY, JUNE 25, 2024	SUNDAY, MAY 26, 2024

<input type="button" value="Register Cigarette Style"/>		
<table><thead><tr><th>Reference ID</th><th>Name</th></tr></thead></table>	Reference ID	Name
Reference ID	Name	
Back to List		

30. You will register the style by filling in the information in about the style. You will attach illustrations and laboratory accreditations and click create to add the style.

Register Cigarette Style

Name

Flavor
 Non-menthol
 Menthol
 Other

Is this cigarette filtered?
 Yes
 No

Packaging?
 Hard Pack
 Soft Pack

Length (mm) Circumference (mm)

Laboratory Name Laboratory Phone Number

Date Tested

Illustrations No file chosen

Laboratory Accreditation No file chosen

[Back to Brand](#)

31. Once you have added your style it will show up under your brand. You can click details to see information about the style.

Blue Fly

[Update Address](#)
[Update Contact](#)

REFERENCE ID 0000000811	NAME BLUE FLY
STREET ADDRESS 123 SUNSET	CITY SUNSET
STATE PA	ZIP CODE 48925
CONTACT JANE DOE	PHONE NUMBER 555 555 5555
EXPIRATION DATE TUESDAY, JUNE 25, 2024	RENEWAL PERIOD BEGINS SUNDAY, MAY 26, 2024

[Register Cigarette Style](#)

Reference ID	Name	Details
0000002051	White Menthols	Details

32. If you click details above, you can see the information about the style. You can update style information.

White Menthols

[Update Style Information](#)



Name White Menthols
Flavor Menthol
Filter No
Package Soft Pack
Descriptor
Length (mm) 98.5
Circumference (mm) 24.8
Reference Number 0000002051
Status Drafted

Illustrations
Laboratory
Accreditation

[Back to Brand](#)



33. Once you clicked update style information you will come to this screen and you can update this information, click update and you can go back to details.

Change Demographics

Flavor
 Non-menthol
 Menthol
 Other

Is this cigarette filtered?
 Yes
 No

Packaging?
 Hard Pack
 Soft Pack

Length (mm)

Circumference (mm)

[Back to details](#)

34. You will come to this screen once you updated your style information and clicked back to details.

White Menthols

[Update Style Information](#)

Name White Menthols
Flavor Menthol
Filter No
Package Soft Pack
Descriptor
Length (mm) 98.5
Circumference (mm) 24.8
Reference Number 0000002051
Status Drafted

Illustrations
Laboratory
Accreditation

[Back to Brand](#)



35. Click "back to brand" and you will come to this screen where you can register another cigarette style. This is where you will add cigarette styles for each brand. Click Register

Cigarette Style to add each style for this brand. You will go to # 28 for instructions to register another cigarette style.

Blue Fly

[Update Address](#)
[Update Contact](#)

REFERENCE ID 000000811	NAME BLUE FLY
STREET ADDRESS 123 SUNSET	CITY SUNSET
STATE PA	ZIP CODE 48925
CONTACT JANE DOE	PHONE NUMBER 555 555 5555
EXPIRATION DATE TUESDAY, JUNE 25, 2024	RENEWAL PERIOD BEGINS SUNDAY, MAY 26, 2024

[Register Cigarette Style](#)

Reference ID	Name	Details
0000002051	White Menthols	Details

[Back to List](#)

36. This is how it looks with more than one cigarette style under a brand. You will notice that you can see when your brand expires and when you can renew it.

Blue Fly

[Update Address](#)
[Update Contact](#)

REFERENCE ID 000000811	NAME BLUE FLY
STREET ADDRESS 123 SUNSET	CITY SUNSET
STATE PA	ZIP CODE 48925
CONTACT JANE DOE	PHONE NUMBER 555 555 5555
EXPIRATION DATE TUESDAY, JUNE 25, 2024 	RENEWAL PERIOD BEGINS SUNDAY, MAY 26, 2024 

[Register Cigarette Style](#)

Reference ID	Name	Details
0000002051	White Menthols	Details
0000002052	Blue Wing	Details

[Back to List](#)