

# How to Print Your 2022 License(s)

## Primary Contact with an Individual Facility

**Step 1:** Select Print License(s) from the “What Do You Want To Do?” Menu on the left side of your home page.

**Contact Information**  
Name: RED BLOOD CELL SURGERY CENTER  
123 WHOLE BLOOD DRIVE,  
RED CELL, NJ 12345  
Phone #: 987-654-3210  
Email: [ALIS-CLIS@DOH.NJ.GOV](mailto:ALIS-CLIS@DOH.NJ.GOV)

**WHAT DO YOU WANT TO DO?**  
View Pending Online Application(s)  
Renew  
Apply for New License  
Print Receipt  
Submit POC/SOD  
Pay Invoice(s)  
Amendment  
Change of Specialty/Service  
**Print License(s)**  
Change Name  
Change Password  
Update Profile  
Personnel Qualification Appraisal

WELCOME TO YOUR HOME PAGE!

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For any questions please contact: Blood Bank ([ALISHelpDesk@doh.nj.gov](mailto:ALISHelpDesk@doh.nj.gov))

**Step 2:** Select the Print link (in blue).

**Entity Information**

**Name**  
RED BLOOD CELL SURGERY CENTER

**Mailing Address**  
123 WHOLE BLOOD DRIVE  
RED CELL, NJ 12345  
[ALIS-CLIS@DOH.NJ.GOV](mailto:ALIS-CLIS@DOH.NJ.GOV)

**License Information**

License Type	License Number	Endorsements	Restrictions	Status	Expiration Date	Print
Blood Bank License	10890	TRANSFUSION, Transfusion Services - On-Site, Processing Routine - ABO Group, Processing Routine - Rh Type, Processing Routine - Antibody Detection, Processing Routine - Antibody Identification, Processing Routine - Crossmatching, Processing Routine - Antiglobulin Test, COLLECTION SERVICES (BLOOD CENTER/HOSPITAL BASED), Collection Services - Mobile Site, Collection Services - Allogeneic, Collection Services - Autologous, Collection Services - Directed, Collection Services - Double Red Cell, Storage - Blood and Blood Products, Distribution - Blood and Blood Products		Active	12/31/2022	<a href="#">Print</a>

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For any questions please contact: Blood Bank ([ALISHelpDesk@doh.nj.gov](mailto:ALISHelpDesk@doh.nj.gov))

**Step 3:** After selecting the Print link, an electronic copy of your license will be generated as a Portable Document File (PDF) file.

Fields marked with asterisk (\*) are required.


Entity Information						
<b>Name</b>		<b>Mailing Address</b>				
RED BLOOD CELL SURGERY CENTER		123 WHOLE BLOOD DRIVE RED CELL, NJ 12345 ALIS-CLIS@DOH.NJ.GOV				

License Information						
License Type	License Number	Endorsements	Restrictions	Status	Expiration Date	Print
Blood Bank License	10890	TRANSFUSION, Transfusion Services - On-Site, Processing Routine - ABO Group, Processing Routine - Rh Type, Processing Routine - Antibody Detection, Processing Routine - Antibody Identification, Processing Routine - Crossmatching, Processing Routine - Antiglobulin Test, COLLECTION SERVICES (BLOOD CENTER/HOSPITAL BASED), Collection Services - Mobile Site, Collection Services - Allogeneic, Collection Services - Autologous, Collection Services - Directed, Collection Services - Double Red Cell, Storage - Blood and Blood Products, Distribution - Blood and Blood Products		Active	12/31/2022	<a href="#">Print</a>

EBL\_License\_Certif...PDF


**Step 4:** Open the file and print the license.



**NEW JERSEY DEPARTMENT OF HEALTH  
DIVISION OF PUBLIC HEALTH & ENVIRONMENTAL  
LABORATORIES**

**CLINICAL LABORATORY IMPROVEMENT SERVICES**

**BLOOD BANK LICENSE**



RED BLOOD CELL SURGERY CENTER  
D/B/A RBC CENTER  
123 WHOLE BLOOD DRIVE  
RED CELL, NJ 12345

**BLOOD BANK CODE:** 15041  
**LICENSE #:** 10890  
**EFFECTIVE DATE:** 06/28/2022  
**EXPIRATION DATE:** 12/31/2022

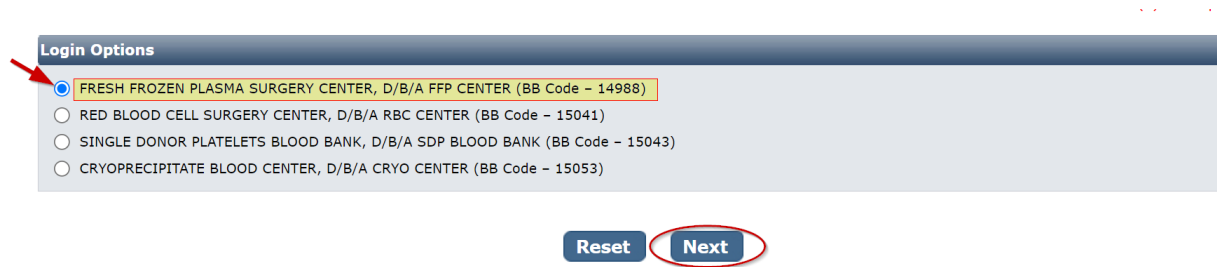
The above, pursuant to Chapter 33, P.L. of 1963, is hereby authorized to perform the below indicated services:

- **COLLECTION SERVICES (BLOOD CENTER/HOSPITAL BASED)**  
Collection Services - Allogeneic, Collection Services - Autologous, Collection Services - Directed, Collection Services - Double Red Cell, Collection Services - Mobile Site, Distribution - Blood and Blood Products, Storage - Blood and Blood Products
- **TRANSFUSION**  
Processing Routine - ABO Group, Processing Routine - Antibody Detection, Processing Routine - Antibody Identification, Processing Routine - Antiglobulin Test, Processing Routine - Crossmatching, Processing Routine - Rh Type, Transfusion Services - On-Site

The blood bank is only authorized to perform the individual tests/sub-services within the above services as approved by the Department per an initial application and subsequent test/sub-service expansion requests effective the date of this license.  
This license must be conspicuously displayed in the Blood Bank. License is not transferable.

## Primary Contact with Multiple Facilities

**Step 1:** Select one facility from the Login Options page and click on the next button at the bottom of the page.



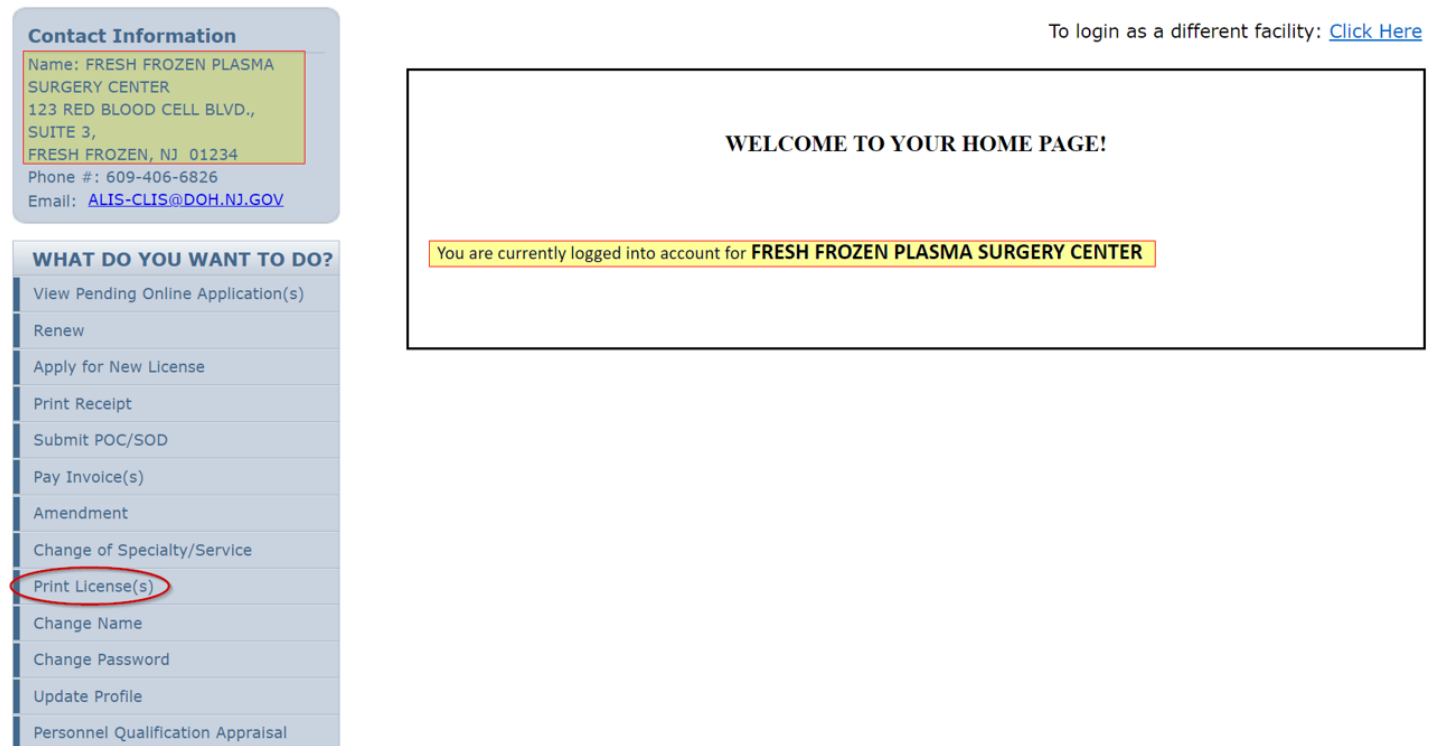
**Login Options**

- ☒ FRESH FROZEN PLASMA SURGERY CENTER, D/B/A FFP CENTER (BB Code - 14988)
- ☐ RED BLOOD CELL SURGERY CENTER, D/B/A RBC CENTER (BB Code - 15041)
- ☐ SINGLE DONOR PLATELETS BLOOD BANK, D/B/A SDP BLOOD BANK (BB Code - 15043)
- ☐ CRYOPRECIPITATE BLOOD CENTER, D/B/A CRYO CENTER (BB Code - 15053)

[Reset](#) [Next](#)

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**Step 2:** You will then land on the facility's home page. Select Print License(s) from the "What Do You Want To Do?" Menu on the left side of your home page.



To login as a different facility: [Click Here](#)

**Contact Information**

Name: FRESH FROZEN PLASMA SURGERY CENTER  
123 RED BLOOD CELL BLVD.,  
SUITE 3,  
FRESH FROZEN, NJ 01234  
Phone #: 609-406-6826  
Email: [ALIS-CLIS@DOH.NJ.GOV](mailto:ALIS-CLIS@DOH.NJ.GOV)

**WHAT DO YOU WANT TO DO?**

- [View Pending Online Application\(s\)](#)
- [Renew](#)
- [Apply for New License](#)
- [Print Receipt](#)
- [Submit POC/SOD](#)
- [Pay Invoice\(s\)](#)
- [Amendment](#)
- [Change of Specialty/Service](#)
- [Print License\(s\)](#)
- [Change Name](#)
- [Change Password](#)
- [Update Profile](#)
- [Personnel Qualification Appraisal](#)

**WELCOME TO YOUR HOME PAGE!**

You are currently logged into account for **FRESH FROZEN PLASMA SURGERY CENTER**

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For any questions please contact: Blood Bank ([ALISHelpDesk@doh.nj.gov](mailto:ALISHelpDesk@doh.nj.gov))

**Step 3:** Select the Print link (in blue).

Fields marked with asterisk (\*) are required.

#### Entity Information

##### Name

FRESH FROZEN PLASMA SURGERY  
CENTER

##### Mailing Address

123 RED BLOOD CELL BLVD. SUITE 3  
FRESH FROZEN, NJ 01234  
ALIS-CLIS@DOH.NJ.GOV

#### License Information

License Type	License Number	Endorsements	Restrictions	Status	Expiration Date	Print
Blood Bank License	10889	TRANSFUSION, Transfusion Only On-Site, COLLECTION SERVICES (BLOOD CENTER/HOSPITAL BASED), Collection Services - On-Site, Collection Services - PAB CA - Platelet Rich Plasma (PRP) Only		Active	12/31/2022	<a href="#">Print</a>

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For any questions please contact: Blood Bank ([ALISHelpDesk@doh.nj.gov](mailto:ALISHelpDesk@doh.nj.gov))

**Step 4:** After selecting the Print link, an electronic copy of your license will be generated as a Portable Document File (PDF) file.

Fields marked with asterisk (\*) are required.

#### Entity Information

##### Name

FRESH FROZEN PLASMA SURGERY  
CENTER

##### Mailing Address

123 RED BLOOD CELL BLVD. SUITE 3  
FRESH FROZEN, NJ 01234  
ALIS-CLIS@DOH.NJ.GOV




#### License Information

License Type	License Number	Endorsements	Restrictions	Status	Expiration Date	Print
Blood Bank License	10889	TRANSFUSION, Transfusion Only On-Site, COLLECTION SERVICES (BLOOD CENTER/HOSPITAL BASED), Collection Services - On-Site, Collection Services - PAB CA - Platelet Rich Plasma (PRP) Only		Active	12/31/2022	<a href="#">Print</a>

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For any questions please contact: Blood Bank ([ALISHelpDesk@doh.nj.gov](mailto:ALISHelpDesk@doh.nj.gov))

[BBL\\_License\\_Certif...PDF](#)

## Step 5: Open the file and print the license.

	<p>NEW JERSEY DEPARTMENT OF HEALTH DIVISION OF PUBLIC HEALTH &amp; ENVIRONMENTAL LABORATORIES</p> <p>CLINICAL LABORATORY IMPROVEMENT SERVICES</p> <p><b>BLOOD BANK LICENSE</b></p>	 
<p><b>FRESH FROZEN PLASMA SURGERY CENTER</b> D/B/A FFP CENTER 123 RED BLOOD CELL BLVD. SUITE 3 FRESH FROZEN, NJ 01234</p>		
<p>The above, pursuant to Chapter 33, P.L. of 1963, is hereby authorized to perform the below indicated services:</p> <p>→ <b>COLLECTION SERVICES (BLOOD CENTER/HOSPITAL BASED)</b> Collection Services - On-Site, Collection Services - PABCA - Platelet Rich Plasma (PRP) Only</p> <p>→ <b>TRANSFUSION</b> Transfusion Only On-Site</p>		
<p><b>BLOOD BANK CODE:</b> 14988 <b>LICENSE #:</b> 10889 <b>EFFECTIVE DATE:</b> 06/30/2022 <b>EXPIRATION DATE:</b> 12/31/2022</p>		
<p>The blood bank is only authorized to perform the individual tests/sub-services within the above services as approved by the Department per an initial application and subsequent test/sub-service expansion requests effective the date of this license. This license must be conspicuously displayed in the Blood Bank. License is not transferable.</p>		

## Step 6: To print a license for another facility, you must return to the Login Options page. Select the Click Here link in the upper right corner.

<p><b>Contact Information</b></p> <p>Name: FRESH FROZEN PLASMA SURGERY CENTER 123 RED BLOOD CELL BLVD., SUITE 3, FRESH FROZEN, NJ 01234 Phone #: 609-406-6826 Email: <a href="mailto:ALIS-CLIS@DOH.NJ.GOV">ALIS-CLIS@DOH.NJ.GOV</a></p> <p><b>WHAT DO YOU WANT TO DO?</b></p> <ul style="list-style-type: none"><li>View Pending Online Application(s)</li><li>Renew</li><li>Apply for New License</li><li>Print Receipt</li><li>Submit POC/SOD</li><li>Pay Invoice(s)</li><li>Amendment</li><li>Change of Specialty/Service</li><li>Print License(s)</li><li>Change Name</li><li>Change Password</li><li>Update Profile</li><li>Personnel Qualification Appraisal</li></ul>	<p>To login as a different facility: <a href="#">Click Here</a></p> <p><b>WELCOME TO YOUR <u>HOME PAGE</u>!</b></p> <p>You are currently logged into account for <b>FRESH FROZEN PLASMA SURGERY CENTER</b></p>
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Login Options

☐ FRESH FROZEN PLASMA SURGERY CENTER, D/B/A FFP CENTER (BB Code - 14988)

☐ RED BLOOD CELL SURGERY CENTER, D/B/A RBC CENTER (BB Code - 15041)

☐ SINGLE DONOR PLATELETS BLOOD BANK, D/B/A SDP BLOOD BANK (BB Code - 15043)

☒ CRYOPRECIPITATE BLOOD CENTER, D/B/A CRYO CENTER (BB Code - 15053)

Reset

Next

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For any questions please contact: Blood Bank ([ALISHelpDesk@doh.nj.gov](mailto:ALISHelpDesk@doh.nj.gov))

**Repeat Steps 1 through 6 to print licenses for multiple facilities.**

For any questions or assistance that require an expedient reply, please email the NJDOH ALiS Implementation Team at [ALISHelpDesk@doh.nj.gov](mailto:ALISHelpDesk@doh.nj.gov) and be sure to include that the inquiry is for Blood Bank with the Facility Name and BB Code in the email subject line.