

WE HAVE A NEW LICENSING INFORMATION SYSTEM



The Division of Public Health, Licensure Unit, is excited to announce that we will be moving to an internet based licensing system starting late 2021 and ending 2022 called **LANCE** (Nebraska Licensing and Certification Environment).



Professions & Occupations



Children's Services



Facilities, Services & Establishments

What services will be provided through LANCE?

LANCE will provide 24/7/365 access to real time license-related data, and provide licensees and applicants access to online services such as: application submission, uploading documents, renewal and reinstatement submissions, receiving automatic notifications of upcoming events and application status, updating contact information, and paying fees by credit/debit card or ACH through a PC, tablet, or phone.

An email address is required for licensees and applicants to utilize the on-line services in **LANCE** and to obtain important licensing information via automated notifications.

How will LANCE look?

To use the **LANCE** system, an applicant or licensee is required to create a user account. A sample look and feel of the user registration process in **LANCE** is displayed here.

Online License Look-up: The online license look-up system is also being replaced and will provide 24/7/365 real time information relating to the status of a license, including issuance and expiration dates, and if any disciplinary action has been taken against the license. Registration is NOT required to use this system.

LANCE Nebraska Licensing and Certification Environment

NEBRASKA Good Life. Great Mission. DEPT. OF HEALTH AND HUMAN SERVICES

Licensure Unit User Registration * Indicates required field

Please enter your **Legal Name** below:
 First Name: * Middle Name:
 Last Name: * Suffix:

INDIVIDUAL INFORMATION

List any other names you have ever been known as (AKA), including maiden name and your last name on your birth certificate.
 Date of Birth: *

Mailing Address

Country: * Zip Code: *
 Business Name (if applicable): State: *
 Address Line 1: * City: *
 Address Line 2:
 Address Line 3:

Identification

Are you a US Citizen? *

Phone Number

Primary Phone Number:
 Secondary Phone Number:

Email Address

E-Mail Address: * Re-Type E-Mail Address: *

To learn more about **LANCE**, go to: the DHHS Licensure Unit's Home Page dhhs.ne.gov/licensure.