



Vendor Portal New Application User Guide



Welcome to the Connecticut WIC Vendor Portal New Application User Guide, a screen-by-screen review of the online application screens necessary to apply for Connecticut WIC vendor authorization.

This document is a reference guide for the Connecticut WIC Vendor Portal. It focuses on how to apply online for authorization in the WIC Program. It has procedures for registering for a user account and how to create and submit an application. This user guide does not provide information on the WIC Vendor Agreement that determines authorization into the WIC Program. Information regarding authorization can be found on the Department of Public Health WIC Retailers webpage at <https://portal.ct.gov/DPH/WIC/Retailers>.

PLEASE NOTE: The Connecticut WIC Program requires that all vendors be SNAP authorized and open continuously for one full calendar year prior to application to be eligible for authorization.

If at any time during this process you have questions please call the Connecticut WIC Program at 860.509.8084 and press #2 or send an email to DPH.ptwic@ct.gov and ask for assistance with the online portal application.

This application process will require you to enter demographic information in a variety of internet screens. To help you with this task, review and complete the **Vendor Portal Worksheet** available for download and printing on the WIC Retailers webpage.

You will also be required to upload documents to the application through the portal. These uploads can take the form of PDF, word documents, and images. For help with scanning, search your mobile device's app store for "scanner apps." You may also want to consult with your local office supply store about scanning.

Lastly, no matter the internet browser that you use, turn off the pop-up blocker in that browser to ensure that all required screens and pop-ups can open.

Let's begin. Proceed to the Login Page of the vendor portal <https://ctwicportal.dph.ct.gov/Account/Login>.

Login Page – First time users must click on the **Register as a new user** button.

The screenshot shows a web browser window for the DPH CTWIC - Vendor Portal. The URL in the address bar is <https://stag.ctwicportal.dph.ct.gov/Account/Login>. The page title is "DPH CTWIC - Vendor Portal". At the top, there is a "Log in" button. Below it, there are fields for "User Name" and "Password", followed by a "Log in" button. A red circle highlights the text "Login Page" located above the login fields. At the bottom of the page, there is a note for "FIRST TIME USERS" and a red arrow points to the "Register as a new user" link. The footer of the page includes a copyright notice: "© 2018 - DPH CTWIC - Vendor Portal".

Registration Page – After clicking on the **Register as a new user** button, fill in all the fields with the required information.

Registration Page

First Name	*	Store Name	*
MI		<input type="checkbox"/> Multiple Stores	
Last Name	*	Address	*
Driver's License #	*	City	*
Take photo of license (with phone) and email to DPH.PTWIC@ct.gov in order to activate your account.			
Phone Number	*	State	*
Email	*	Zip	*
User Name			
Choose a username that is 6-50 characters long.			
Password			
Passwords must have at least one non letter or digit character. Passwords must have at least one digit ('0'-9'). Passwords must have at least one uppercase ('A'-Z').			
Confirm password			

Disclaimer

- I hereby certify that the creation of a user account and the use of the Vendor Portal are for the purpose of applying for the Connecticut WIC Program.
- I agree not to provide my user name and password to others.
- I have read and understand the Vendor Agreement. I understand that this application and agreement does not guarantee selection and authorization to participate in the WIC Program.
- I hereby certify that the information presented in this application is true and correct to the best of my knowledge and understanding.
- I understand that misrepresentation of the information contained herein will result in rejection of this application and/or immediate revocation for the store's WIC Vendor authorization.
- The undersigned represents that he or she is the owner, partner, member, franchisee or authorized representative or has the authority to contract for and on behalf of the retail vendor.

Please check here if you agree with the above terms.

[Register](#) [Back to Login Page](#)

Only after entering data in all fields correctly, reading the Disclaimer, and clicking the **Disclaimer agreement** checkbox will you be able to click on the **Register** button. Please note the instructions under the **Driver's License #** data field. To complete your registration and have your registration approved, the Connecticut WIC Program must receive an electronic photo of the registrant's valid state or federal identification at DPH.ptwic@ct.gov.

Registration Page

First Name	Open Enrollment	Store Name	Open Enrollment Test Store
MI		<input type="checkbox"/> Multiple Stores	
Last Name	Test Store	Address	410 Capitol Avenue
Driver's License #	CT000000000	City	Hartford
Take photo of license (with phone) and email to DPH.PTWIC@ct.gov in order to activate your account.			
Phone Number	(860) 509-8084	State	CT
Email	DPH.ptwic@ct.gov	Zip	06106
User Name			
Choose a username that is 6-50 characters long.			
Password			
Passwords must have at least one non letter or digit character. Passwords must have at least one digit ('0'-9'). Passwords must have at least one uppercase ('A'-Z').			
Confirm password			

Disclaimer

- I hereby certify that the creation of a user account and the use of the Vendor Portal are for the purpose of applying for the Connecticut WIC Program.
- I agree not to provide my user name and password to others.
- I have read and understand the Vendor Agreement. I understand that this application and agreement does not guarantee selection and authorization to participate in the WIC Program.
- I hereby certify that the information presented in this application is true and correct to the best of my knowledge and understanding.
- I understand that misrepresentation of the information contained herein will result in rejection of this application and/or immediate revocation for the store's WIC Vendor authorization.
- The undersigned represents that he or she is the owner, partner, member, franchisee or authorized representative or has the authority to contract for and on behalf of the retail vendor.

Please check here if you agree with the above terms.

[Register](#) [Back to Login Page](#)

After clicking on the **Register** button, you will receive the message seen below.

DPH CTWIC - Vendor Portal

Registration Confirmation.

Your DPH-CTWIC Vendor Portal registration request has been received. DPH-CTWIC personnel will review your registration request and once it is approved you will receive an email notification with the confirmation. Should you have questions, please contact WIC Program at 860-509-8084.

[Back to Log in Page](#)

After WIC personnel have reviewed your registration, received your photo of your valid state or federal identification and activated your user account, you will receive an email similar to the one found below with your specific registration information and instructions to log into the portal to complete your online application. This email will be sent to the email address used for account registration.

Reply Reply All Forward
Wed 11/28/2018 11:23 AM
noreply-ctwic@ct.gov
New DPH Vendor Portal User Registration approved for Open Enrollment Test Store
To DPH.ptwic
Cc DPH.ptwic

Dear Open Enrollment Test Store,

DPH Vendor Portal account has been approved.

Your Username is : openenrollmentteststore

Please wait 24 hours to access the DPH Vendor Portal at <http://stag.ctwicportal.dph.ct.gov/>

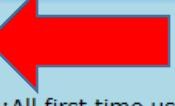
Should you have questions, please contact WIC Program at 860-509-8084. Please do not reply to this e-mail as it is an automated notification.

DPH CTWIC - Vendor Portal

Login Page

User Name

Password



FIRST TIME USERS: All first time users MUST register before you can login to the website.

Select the "Register as a new user" link and create a new account.

[Register as a new user](#) [Forgot your password?](#)

After clicking the **Log In** button, you will be redirected to the **State** screen.

Click on the word **Vendor** in the upper left side.

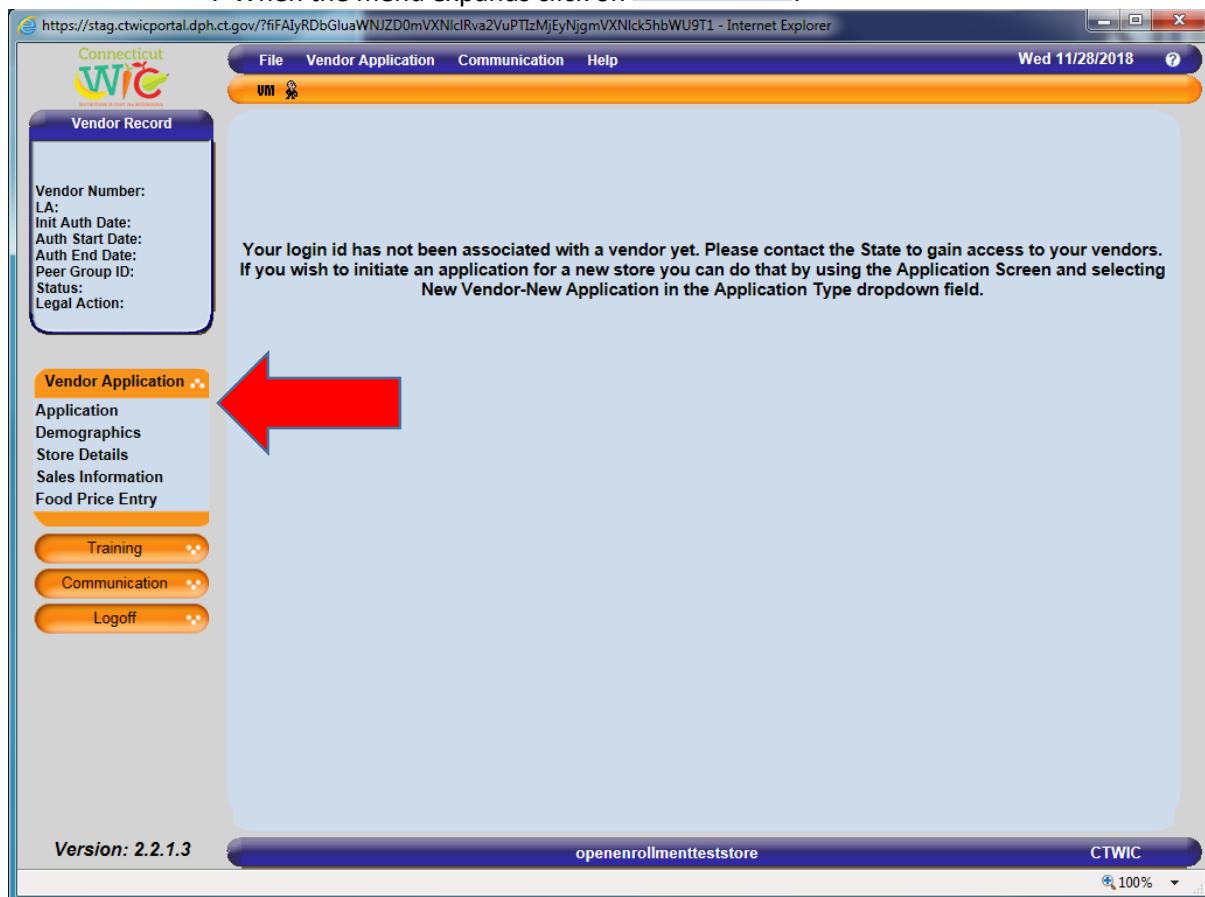
Connecticut Women Infant & Children Program



*** Welcome to the Test Server ***

Use of this system is authorized only to registered Connecticut WIC Program users and limited for approved WIC business purposes. Unauthorized access is prohibited. Anyone knowingly or intentionally accessing State of Connecticut or U.S. government information resources without authorization faces termination of employment or contract, prosecution where applicable, and fines/imprisonment if found guilty. All system activities may be recorded/monitored.

Click on **Vendor Application**. When the menu expands click on **Application**.



You are now on the **Application** screen. There are three application types. If your store has never been WIC authorized before, select **New vendor-New application** and click on **Go**. If your store has previously applied for authorization or was previously authorized by the Connecticut WIC Program, select **Non-active vendor-New application** and click on Go. **Do NOT select Active vendor-Renewal application.**

https://stag.ctwicportal.dph.ct.gov/?f1AlYRDbGluuWNjZD0mVXNlcRva2VuPTIzMjEyNjgmVXNlc5hbWU9T1 - Internet Explorer

File Vendor Application Communication Help

Vendor Record

LA:
Init Auth Date:
Auth Start Date:
Auth End Date:
Peer Group ID:
Status:
Legal Action:

Application Type:

Current Application Type:

Vendor ID: FEIN SSN

Authorized SNAP Number:

Application Requested:

Application Status: In Process

Store Name: * # * Name
Owner:
* Street 1: * Street 2:
* State: Connecticut * Zip: * City:

* Store Phone: () -

Find

Submit

Version: 2.2.1.3 openenrollmentteststore CTWIC

Enter all the required data in the white data fields. When entering the **Owner** information, if you are a new store to the WIC Program click on . If your store was previously authorized by CT WIC, the Owner information is already entered. If you have another store that is either currently or previously authorized by CT WIC, you can find your Owner information using the Find button. You must do this to connect this store that you are applying for CT WIC authorization at this time to all of your other CT WIC authorized stores.

PLEASE NOTE: The Connecticut WIC Program requires that all vendors be SNAP authorized prior to application to be eligible for authorization.

When the **New** button is clicked:

Entity Information

* Type: SOLE PROPRIETOR
PARTNERSHIP
LIMITED LIABILITY
CORPORATION
FRANCHISE

Corporate Address

* # * Name

* Street 1:
Street 2:
* State: Connecticut
* Zip: ... * City:

Save Cancel Close

Select the Owner **Entity Type**, enter the Owner **Entity Name** and address. Then click on **Save** and then **Close**.

When all data has been entered on the **Application** screen click **Save**. The message "Data Saved Successfully" will appear in the blue bar at the bottom of the screen. You may now click **Next**.

NOTE: After saving the **Application** screen with the correct **Application Type** you may **Logoff** and return to your application anytime during the application period. For Open Enrollment this means that you have until January 31 to return to your application, complete it and submit the application. On all screens data that you enter is saved whenever you click **Save**. For **Instructions** on how to **RE-ENTER THE VENDOR PORTAL** please see **Page 18**.

Connecticut WIC

Vendor Record

OPEN ENROLLMENT TEST STORE

File Vendor Application Communication Help Wed 11/28/2018

Application Type: Go

Current Application Type: New vendor-New application

FEIN SSN 00-0000000

* Authorized SNAP Number: 0000000

Application Requested: 11/28/2018 Application Status: In Process

* Store Name: OPEN ENROLLMENT TEST STO Owner: Open Enrollment Test Store

Find New

* Store Phone: (860) 509-8084

* # * Name

* Street 1: 410 CAPITOL AVENUE
Street 2:
* State: Connecticut
* Zip: 06106 ... * City: HARTFORD

Submit Save Cancel Next

Version: 2.2.1.3 Data Saved Successfully

On the **Demographics** screen, enter all the required data in the white data fields that are blank. Add **Store Contacts** and their information by clicking on **Add** and entering the required data. The owner must be listed as a store contact. If you have a store manager or other store personnel who will attend training, communicate with the WIC Program, or be responsible for the training of store personnel that information must be entered here as well.

https://stag.ctwicportal.dph.ct.gov/?f1FAlyRDbGluaWNjZD0mVXNlc1Rva2VuPTIzMjEyNjgmVXNlc5hbWU9T1 - Internet Explorer

File Vendor Application Communication Help

OPEN ENROLLMENT TEST STORE

Vendor Record

Vendor Name: OPEN ENROLLMENT TEST STORE

Vendor Number: Not Assigned

Store Email: DPH.ptwic@ct.gov

Store Phone: (860) 509-8084

Street Address

* Street 1: 410 CAPITOL AVENUE

Street 2:

* State: Connecticut

* Zip: 06106

* City: HARTFORD

Mailing Address

* Same as Street Address

* Street 1: 410 CAPITOL AVENUE

Street 2:

* State: Connecticut

* Zip: 06106

* City: HARTFORD

Store Contacts

Contact Type	First Name	Last Name	Phone Number	Email	Primary
Owner	OPEN ENROLLMENT	TEST STORE	(860) 509-8084	DPH.PTWIC@CT.GOV	<input checked="" type="checkbox"/>

Add

Owner/License Information

* Owner: Open Enrollment Test Store

* Number of Registers: 1

* Device Type: Stand beside

* TPP: NA

Last Updated Date: 11/28/2018

Save Cancel Next

Version: 2.2.1.3 Data Saved Successfully

openenrollmentteststore CTWIC 100%

When all data has been entered on the **Demographics** screen click **Save**. The message “Data Saved Successfully” will appear in the blue bar at the bottom of the screen. You may now click **Next**.

On the **Store Details** screen, enter all the required data in the white data fields that are blank. Selecting the **Language you wish to be trained in** is a very important part of this screen. The language selected in that field will determine what training classes you are offered after your application has been approved. Please select the primary language that is spoken by the store personnel who will attend the mandatory training. Enter the **Open** and **Close** times for your store. Enter the correct **Number of store workers** and **Number of store workers who will handle WIC transactions**. Answer all the **Questions**.

Store Details

* CT Tax ID Number: 77777777
 Authorized SNAP Number: 7777777
 FEIN SSN 77-77-7777
 * Language you wish to be trained in: English
 Other Store Language:
 Number of store workers: 0
 Number of store workers who will be handling WIC transactions: 0

Days/Hours of the Week Open

Day	Open time	Close time
SUNDAY		
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		
SATURDAY		

Questions

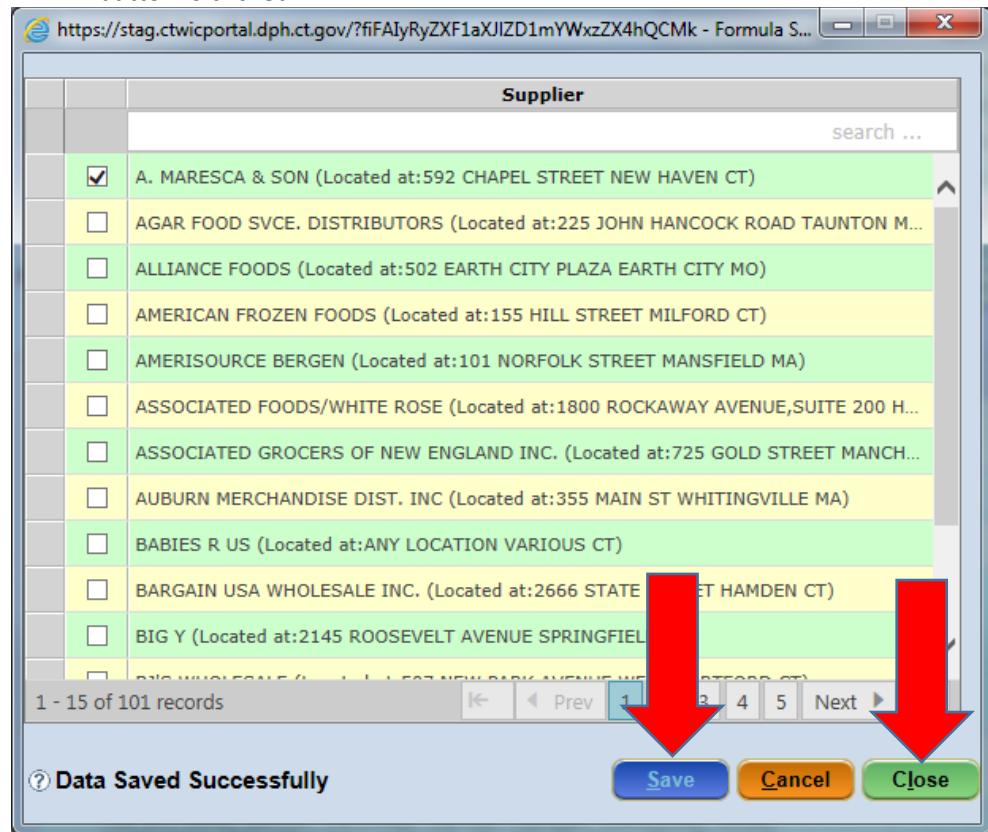
ID	*Question	Yes	No	Notes
1	Do you intend to purchase infant formula from the authorized distributor/retailer list provided to you? If yes, select your authorized distributor/retailer in the Formula Suppliers button.	<input type="checkbox"/>	<input type="checkbox"/>	
2	Do you expect to derive more than 50% of your food sales revenue from WIC sales?	<input type="checkbox"/>	<input type="checkbox"/>	
3	Do you plan on providing incentive items or other free merchandise to WIC customers?	<input type="checkbox"/>	<input type="checkbox"/>	
4	During the past six (6) years, has any current owner, officer, or manager at your store been convicted of or had a civil judgment for any of the following activities: fraud, antitrust violation, embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, receiving stolen property, making false claims, or obstruction of justice? If yes, specify the name of the owner, officer, or manager and the activities involved on a separate sheet. If yes, specify in Notes the name of the owner, officer, or manager and the activities involved.	<input type="checkbox"/>	<input type="checkbox"/>	
5	Has any owner, partner, franchisee, member, manager, shareholder, officer, trustee been authorized by the WIC Program? If yes, list Store name(s) and location(s) in Notes.	<input type="checkbox"/>	<input type="checkbox"/>	

Formula Suppliers

Save Cancel Next

Before clicking **Save** and **Next** click on **Formula Suppliers**.

When the **Formula Suppliers** button is clicked:



Select the Formula Supplier that you will use to supply your store with the required infant formula. Then click on **Save** and then **Close**.

When all data has been entered on the **Store Details** screen click **Save**. The message “Data Saved Successfully” will appear in the blue bar at the bottom of the screen. You may now click **Next**.

On the **Sales Information** screen, enter all the required data in the white data fields that are blank. Please enter the sales and tax information for the last four tax filing quarters going back from the date of your application. For example: If you are applying in January 2022 then report on the four tax filing quarters (twelve months) from January 2021 to December 2021.

PLEASE NOTE: The Connecticut WIC Program requires that all vendors be open continuously for one full calendar year prior to application to be eligible for authorization.

https://stag.ctwicportal.dph.ct.gov/?f=FAlyRDbGlusWNjZD0mVNlcIrv2VuPTIzMjEyNjgmVNlc5hbWU9T1 - Internet Explorer

Connecticut WIC
INSTITUTION IS OPEN TO BUSINESS

File Vendor Application Communication Help

Wed 11/28/2018

VM OPEN ENROLLMENT TEST STORE

Vendor Record
OPEN ENROLLMENT TEST

Vendor Number:
LA:
Init Auth Date:
Auth Start Date:
Auth End Date:
Peer Group ID:
Status: Pending
Legal Action: NO

Vendor Application Application Demographics Store Details Sales Information Food Price Entry Training Communication Logoff

Start Date: End Date:

1. When did you assume ownership of this business?
2. On what date did you or will you open continuously for business?
3. Gross Volume of all Sales Last Four Tax Filing Quarters:
4. Provide the information below
a. Enter Line 21 from OS-114:
(Last Four Tax Filing Quarters. Submit OS-114 document)
b. Taxable food sales:
(Sales from soda, candy, gum, and other snack foods)
c. Vending machine sales and hot food sales:
d. Total Food Sales Last Four Tax Filing Quarters:
5. Total Food Sales for the months the store was in operation:
(Submit copy of Bill of Sale)
Number of Months Open if less than 12:
6. What do you estimate the percentages of your future sales by type of payment will be? (Total must equal 100%)
Cash: % WIC: %
SNAP: % Other: %
Gift/Debit Card: %

Save Cancel Next

Version: 2.2.1.3 openenrollmentteststore CTWIC 100%

When all data has been entered on the **Sales Information** screen click **Save**. The message “Data Saved Successfully” will appear in the blue bar at the bottom of the screen. You may now click **Next**.

On the **Food Price Entry** screen, enter all the required data in the **Lowest Price** and **Highest Price** data fields.

https://stag.ctwicportal.dph.ct.gov/?fiFAIyRDbGluaWNJZD0mVXNlcIrvA2VuPTIzMjEyNjgmVXNlc5hbWU9T1 - Internet Explorer

File Vendor Application Communication Help

OPEN ENROLLMENT TEST STORE

Vendor Record

OPEN ENROLLMENT TES

Vendor Number:
LA:
Init Auth Date:
Auth Start Date:
Auth End Date:
Peer Group ID:
Status: Pending
Legal Action: NO

Vendor Application

Application
Demographics
Store Details
Sales Information
Food Price Entry (circled in red)

Training

Communication

Logoff

Food Price Entry

Cat/SubCat	Item	Size	* Lowest Price	* Highest Price
02 / 001	Cheese-1 pound	LB		
03 / 001	Eggs - Large - Dozen	DOZ		
52 / 003	Milk - 1%, Lowfat-Gallon	GAL		
06 / 001	Peanut Butter - 16-18 oz. jar	LB		
16 / 001	Whole Wheat/Whole Grain Bread-16 oz./1 pound	LB		
06 / 002	Dry Legumes-1 pound	LB		
12 / 001	Infant Fruit or Vegetables-4 oz. jar	JAR		
09 / 001	Infant Cereal - 8 oz. boxes	OZ		
05 / 001	Breakfast Cereal -Cold-12 oz. or larger	OZ		
53 / 002	Juice - Fluid- 64 oz. bottle	OZ		
21 / 082	Similac Advance powder 12.4 oz. can (blue label)	CAN		

Version: 2.2.1.3

openenrollmentteststore

CTWIC

100%

Save

Cancel

Next

When all data has been entered on the **Food Price Entry** screen click **Save**. The message “Data Saved Successfully” will appear in the blue bar at the bottom of the screen. You may now click **Next**.

You have now been navigated to the **Uploaded Documents** screen which can be found under the **Communication** button. On the **Uploaded Documents** screen, you are required to **Upload** a minimum of three different documents. The required documents are the following: The **Owner Information Form**, the **Owner's valid and current state or federal picture identification**, and the **Connecticut Department of Revenue Services Sales and Tax Use Summary form OS-114**. There are other documents that may be required for uploading depending on your store's demographic profile. See below.

The **Owner Information Form** must be printed from the WIC Retailers webpage and filled out completely. You must then scan the **two-page form as a one-page PDF** (creating one document) for uploading to this screen.

The Connecticut WIC Program considers a **state issued driver's license or picture identification card** as a valid form of identification if it is not expired. The Program also considers a **U.S. government issued passport or visa** as a valid form of identification if it is not expired. You must take a photo of the valid identification and upload it to this screen.

If you have a **store manager**, you are required to upload their valid picture identification to this screen.

You are required to provide your **Sales and Tax Use Summary form OS-114** for the last four tax filing quarters (the previous twelve months). For each filing, depending on whether you file quarterly or monthly, these documents are two pages each. These two-page documents (eight pages total if you file quarterly or twenty-four pages total if you file monthly) should be **scanned as one document** and then uploaded to your application in the portal.

Required Documents to be Uploaded:

1. Owner's valid picture identification
2. Owner Information Form
3. Form OS-114-Sales and Tax Use Summary

If you have a Store Manager, upload his/her valid picture identification.

During the application process, following the uploading of all required documents and the completion and saving of all other screens, please return to the Application screen and click the blue Submit button. If the submission is successful you will see "Application Submitted Successfully" in the blue bar in the lower left corner. In addition, you will receive an email to all emails listed in the Store Contacts grid on the Demographics screen detailing the successful submission of the application. If the application is missing any required element that will be detailed in a popup message on the Application screen.

Document Format	Document Type	Description	Source	File Name	Uploaded Date
PDF	OS-114	OS-114-Test	Upload page	Open Enrollment Test Do...	12/20/2021
PDF	Owner Information Form	Owner Information For...	Upload page	Open Enrollment Test Do...	12/20/2021
PDF	Driver's License-Owner	Owner Driver's License-...	Upload page	Open Enrollment Test Do...	12/20/2021

Upload **View Doc**

Save **Cancel** **Close**

Version: 0.0.0.0 **testprod10/19/21** **CTWIC**

Upload Documents - Google Chrome

dwicportal.dph.ct.gov/VendorExt/WebForms/Template.aspx?fiFAIyRDbGluwWNJZD0mVXNldRva2VuPTI4NjQ1MTYmVXNldk5hbWU9VEVTVBST0QxMC8xOS8...

File Vendor Application Communication Help

TESTPROD10/19/21

Mon 12/20/2021

Vendor Record
TESTPROD10/19/21

Vendor Number:
LA:
Init Auth Date:
Auth Start Date:
Auth End Date:
Peer Group ID:
Status: Pending
Legal Action: NO

Required Documents to be Uploaded:

1. Owner's valid picture identification
2. Owner Information Form
3. Form OS-114-Sales and Tax Use Summary

If you have a Store Manager, upload his/her valid picture identification.

During the application process, following the uploading of all required documents and the completion and saving of all other screens, please return to the Application screen and click the blue Submit button. If the submission is successful you will see "Application Submitted Successfully" in the blue bar in the lower left corner. In addition, you will receive an email to all emails listed in the Store Contacts grid on the Demographics screen detailing the successful submission of the application. If the application is missing any required element that will be detailed in a popup message on the Application screen.

Vendor Application **Training** **Communication** **Uploaded Documents** **Communication History** **Logoff**

Document Format	Document Type	Description	Source	File Name	Uploaded Date
PDF	OS-114	OS-114-Test	Upload page	Open Enrollment Test Do...	12/20/2021
PDF	Owner Information Form	Owner Information For...	Upload page	Open Enrollment Test Do...	12/20/2021
PDF	Driver's License-Owner	Owner Driver's License-...	Upload page	Open Enrollment Test Do...	12/20/2021

Upload **View Doc**

Save **Cancel** **Close**

Version: 0.0.0.0 **Data Saved Successfully** **testprod10/19/21** **CTWIC**

https://stag.ctwicportal.dph.ct.gov/?fiFAIyRzb3VyY2V0eXBIPTF+IUAjJA== - Upload - Internet Expl...

*** Document Format:** Word

*** Document Type:** Image

*** Description:**

*** Document:** **Browse...**

Upload **Cancel**

https://stag.ctwicportal.dph.ct.gov/?fIAlyRzb3VyY2V0eXBIPTF+IUAjJA== - Upload - Internet Expl...

* Document Format:	<input type="text"/>
* Document Type:	Driver's License-Owner Driver's License-Store Manager OS-114 Bill of Sale Conduent Document W-9 Form Owner Information Form
* Description:	<input type="text"/>
* Document:	<input type="text"/> Browse...
<input type="button" value="Upload"/> <input type="button" value="Cancel"/>	

After uploading all the required documents in the proper format and with the proper document type you must proceed back to the **Application** screen to your application. Do this by clicking on . When the menu expands click on .

Upload Documents - Google Chrome

ctwicportal.dph.ct.gov/VendorExt/WebForms/Template.aspx?fIAlyRDbGluaWNJZD0mVXNldRva2VuPTI4NjQ1MTYmVXNld5hbWU9VEVTVBST0QxMC8xOS8...

File Vendor Application Communication Help

Mon 12/20/2021

VM TESTPROD10/19/21

Vendor Record
TESTPROD10/19/21

Vendor Number:
LA:
Init Auth Date:
Auth Start Date:
Auth End Date:
Peer Group ID:
Status: Pending
Legal Action: NO

Required Documents to be Uploaded:

1. Owner's valid picture identification
2. Owner Information Form
3. Form OS-114-Sales and Tax Use Summary

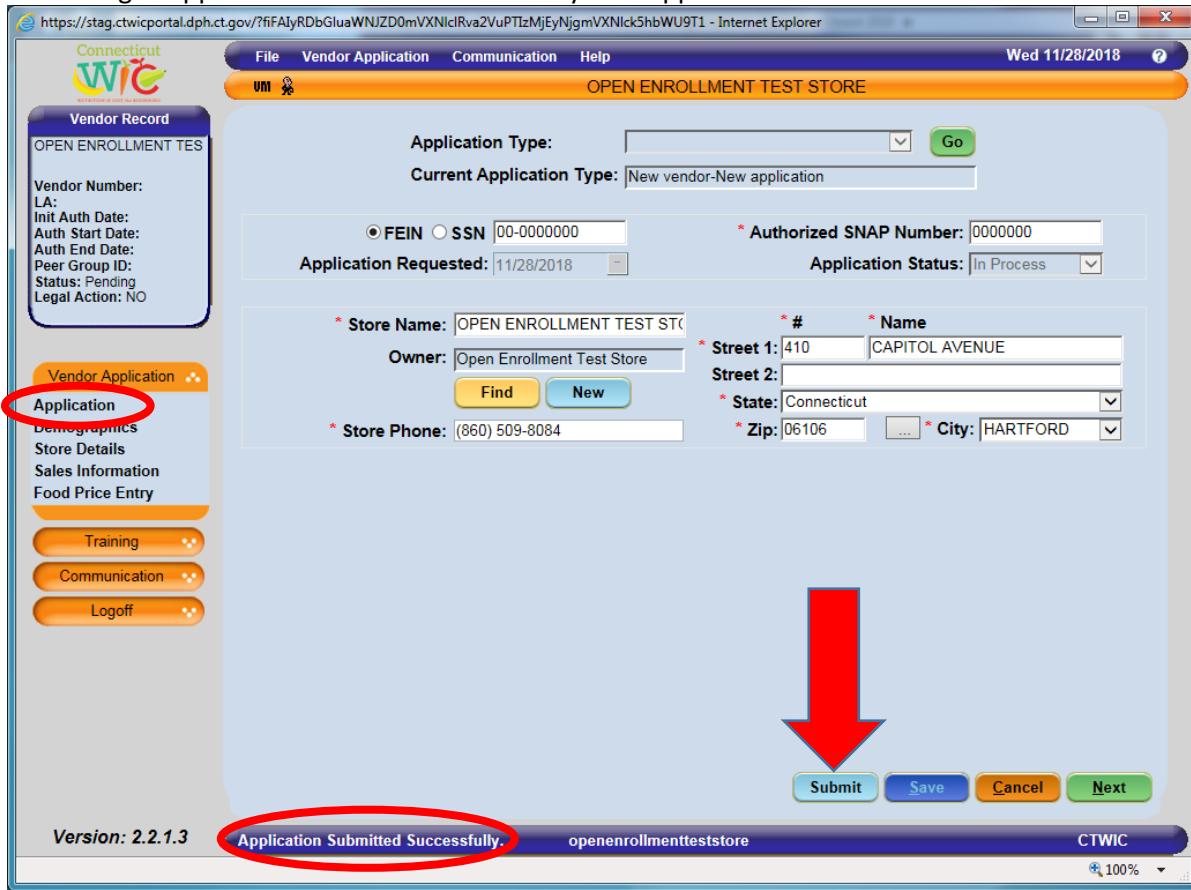
If you have a Store Manager, upload his/her valid picture identification.

During the application process, following the uploading of all required documents and the completion and saving of all other screens, please return to the Application screen and click the blue Submit button. If the submission is successful you will see "Application Submitted Successfully" in the blue bar in the lower left corner. In addition, you will receive an email to all emails listed in the Store Contacts grid on the Demographics screen detailing the successful submission of the application. If the application is missing any required element that will be detailed in a popup message on the Application screen.

Document	Document Type	Description	Source	File Name	Uploaded Date
PDF	OS-114	OS-114-Test	Upload page	Open Enrollment Test Do...	12/20/2021
PDF	Owner Information Form	Owner Information For...	Upload page	Open Enrollment Test Do...	12/20/2021
PDF	Driver's License-Owner	Owner Driver's License-...	Upload page	Open Enrollment Test Do...	12/20/2021

Version: 0.0.0.0 testprod10/19/21 CTWIC

Once back on the Application screen click **Submit**. If all the requirements of the Vendor Application screens have been met then the message “Application Submitted Successfully” will appear in the blue bar at the bottom of the screen.



The screenshot shows the 'Vendor Record' screen for 'OPEN ENROLLMENT TEST STORE'. The 'Application' tab is selected in the left sidebar. The main form is filled with application details. A large red arrow points to the 'Submit' button at the bottom right. A red circle highlights the message 'Application Submitted Successfully' in the status bar at the bottom.

Vendor Record
OPEN ENROLLMENT TEST STORE

Application Type: Current Application Type: New vendor-New application

FEIN SSN 00-000000 * Authorized SNAP Number: 0000000

Application Requested: 11/28/2018 Application Status: In Process

* Store Name: OPEN ENROLLMENT TEST STO * # * Name
Owner: Open Enrollment Test Store Street 1: 410 CAPITOL AVENUE
Find New Street 2:
* Store Phone: (860) 509-8084 * State: Connecticut
* Zip: 06106 * City: HARTFORD

Version: 2.2.1.3 Application Submitted Successfully openenrollmentteststore CTWIC 100%

If you have not fulfilled all the system requirements from the Vendor Application screens, clicking **Submit** will produce an “**Ineligibility**” message that will provide information as to why you are not eligible to submit the application. There are many different versions of this “ineligibility” message. These messages may be generated due to missing information or failure to meet the Connecticut WIC Program’s Vendor Selection Criteria. You should, at all times, refer back to the Vendor Agreement and Appendix A Vendor Selection Criteria for review. The vendor agreement is always available on the WIC Retailers webpage. If you have questions regarding the submission of your application please call the Connecticut WIC Program at 860.509.8084 and press #2 or send an email to DPH.ptwic@ct.gov and ask for assistance with the online portal application.

If your application was successfully submitted, you will receive an email similar to the one found below at the email addresses entered on the **Demographics** screen.

 [Reply](#) [Reply All](#) [Forward](#)
Wed 11/28/2018 11:54 AM
noreply-vendorportal <noreply-vendorportal@ct.gov>
Your WIC Vendor Application has been Submitted for OPEN ENROLLMENT TEST STORE

To DPH.ptwic
Cc DPH.ptwic

Dear OPEN ENROLLMENT TEST STORE:

Thank you for your application. We appreciate your interest in the Connecticut WIC Program. Your application is being reviewed and you will receive an email from a Processing Technician within 5 business days.

If you have any questions about your application, please contact us at DPH.PTwic@ct.gov.

As stated in the **“Application has been Submitted”** email, your application will be reviewed by WIC personnel within five business days. If your application is approved, you will receive an **“Application has been Approved”** email indicating approval. In addition, the email will instruct you to re-enter the vendor portal to select your training class.

 [Reply](#) [Reply All](#) [Forward](#)
Thu 12/6/2018 2:33 PM
noreply-ctwic <noreply-ctwic@ct.gov>
Your WIC Vendor Application has been Approved for OPEN ENROLLMENT TEST STORE

To Marszalek, Eric
Cc DPH.ptwic

Dear OPEN ENROLLMENT TEST STORE:

Your WIC application has been approved for OPEN ENROLLMENT TEST STORE. You are invited to attend training for WIC authorization. You must attend a training to complete your application process. Bring this email and a copy of the WIC Vendor Agreement to the training.

If the person who will attend is someone other than the owner of the store, he or she must bring a signed training authorization letter that authorizes that person to be trained on their behalf by the WIC Program and present it to be admitted to the training session. This representative will be responsible for training the owner and all other employees handling WIC transactions. The training authorization letter is found on the WIC website.

You may log back into your vendor portal account and select the training date and location that is most convenient for you. All trainings start promptly and you will not be allowed to enter after the training has begun.

If you have any questions about your application, please contact us at DPH.PTwic@ct.gov.

Thank you.

At any time, and for any reason (completing or editing the application, submitting the application, or choosing training), when **RE-ENTERING THE PORTAL** you will now be re-directed from the **State** screen to the **Make Active** screen seen below. **EVERY TIME** that you login to the vendor portal you will be re-directed to this screen and you must make the vendor record that you want to access “Active.” Do this by clicking on the row then clicking **Make Active**. The message “Vendor has been made active” will appear in the blue bar at the bottom of the screen.

To enter a vendor record click on the row of the store that you want to enter and click the Make Active button.

- If you have entered the portal for the purpose of completing an application click on the Vendor Application menu on the left and click on the Application screen.
- If you have entered the portal for the purpose of selecting training click on the Training menu on the left and click on the Select Training screen.
- If you have entered the portal for the purpose of uploading or reviewing documents click on the Communication menu on the left and click on the Uploaded Documents screen.

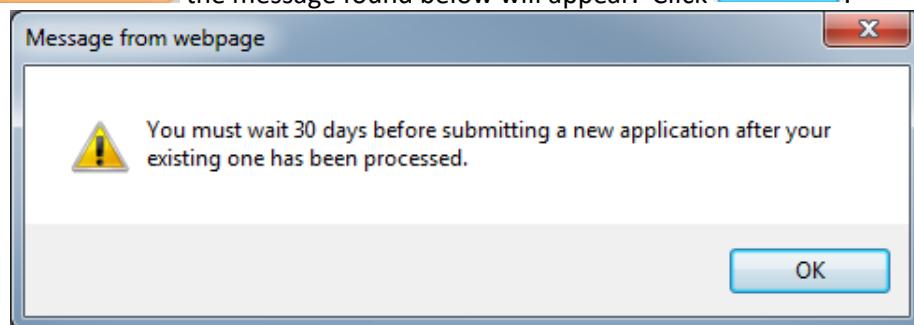
Vendors

MARA'S GROCERY LLC					
Vendor ID	Vendor Name	Status	App. Status	App. Date	Auth End
TESTPROD10/19/21		Pending			

Make Active

To select your Training class, click on **Training**.

When you click on **Training** the message found below will appear. Click **OK**.



When the menu expands click **Select Training**.

On the **Select Training** screen you will have a selection of training classes available to you for attendance. This list is created based on your **Store Type**, **Device Type**, and **Preferred Store Language**. Select the training class that you will attend. When you click **Save** an email will be sent to the email addresses listed on the **Demographics** screen. This email will contain the details of the training class you selected.

Vendor Record

OPEN ENROLLMENT TES

Vendor Type: Grocer
Device Type: Stand beside
Language: English

Available Classes:

Date	Time	Class Type	Location	Avail...	Select
12/24/2018	9:00 AM	Interactive	Connecticut Agricultural Experiment Station 123 Hunt...	19	<input checked="" type="checkbox"/>
12/24/2018	1:00 PM	Interactive	Connecticut Agricultural Experiment Station 123 Hunt...	21	<input type="checkbox"/>
1/31/2019	9:00 AM	Interactive	DPH 410 Capitol Ave , Hartford CT-06106	25	<input type="checkbox"/>

Vendor Application Training Select Training Communication Logoff

Save Cancel Close

Version: 2.2.1.3 Data Saved Successfully openenrollmentteststore CTWIC 100%

Reply Reply All Forward

Thu 12/6/2018 3:05 PM

 noreply-vendorportal <noreply-vendorportal@ct.gov>

Your WIC Training Class has been selected for OPEN ENROLLMENT TEST STORE

To Marszalek, Eric
Cc DPH.ptwic

Dear OPEN ENROLLMENT TEST STORE:

You have selected the following training class for OPEN ENROLLMENT TEST STORE.

Date: 12/24/2018
Time: 9:00 AM
Location: Connecticut Agricultural Experiment Station 123 Huntington Street, New Haven CT-06511
Language: English
Device Type: Stand beside

You must attend this training class to complete your application process. Bring this email and your copy of the WIC Vendor Agreement to the training. If the person who will attend is someone other than the owner of the store, he or she must bring a signed training authorization letter that authorizes that person to be trained on their behalf by the WIC Program and present it to be admitted to the training class. This representative will be responsible for training the owner and all other employees handling WIC transactions. The training authorization letter is found on the WIC website, ct.gov/dph/wic/Retailer.

All training classes start promptly and you will not be allowed to enter after the training class has begun.

If you have any questions about your training class please contact us at DPH.PTwic@ct.gov.