

Respiratory Care Practitioner Online Attachments Step-by-Step Instructions

To attach miscellaneous documents for applications, audits, requests for information, etc. go to www.breeze.ca.gov or follow prompts for BreEZe on www.rcb.ca.gov.

Log into your BreEZe account, enter your User ID and Password and continue.

The screenshot shows the homepage of the DCA BreEZe Online Services. At the top, there is a header with the CA.GOV logo, the Department of Consumer Affairs logo, and the BREZE logo. Navigation links for 'About BreEZe', 'FAQ's', and 'Help Tutorials' are visible. Below the header, there are links for 'Skip navigation' and 'Contact Us'. The main content area is titled 'DCA BreEZe Online Services' and includes a welcome message and a list of services. The page is divided into two columns: 'FOR CONSUMERS' and 'FOR APPLICANTS AND LICENSEES'. The 'FOR CONSUMERS' column has buttons for 'Verify a LICENSE' and 'File a COMPLAINT'. The 'FOR APPLICANTS AND LICENSEES' column has a 'Returning User' section with input fields for 'User ID' and 'Password', a 'Sign In' button, and links for 'Forgot Password?' and 'Forgot User ID?'. A red arrow points to the 'Password' input field. Below the 'Returning User' section is a 'New Users' section with a 'BreEZe Registration' link. At the bottom, there are links for 'Back to Top', 'Conditions of Use', 'Privacy Policy', and 'Accessibility', along with a copyright notice for 2013 State of California.

CA.GOV Department of Consumer Affairs BREZE

About BreEZe FAQ's Help Tutorials

Skip navigation Contact Us

DCA BreEZe Online Services

Welcome to the California Department of Consumer Affairs (DCA) BreEZe Online Services. BreEZe is DCA's new licensing and enforcement system and a one-stop shop for consumers, licensees and applicants! BreEZe enables consumers to verify a professional license and file a consumer complaint. Licensees and applicants can submit license applications, renew a license and change their address among other services.

- If you were registered with the DCA Online Professional Licensing services before, you will need to re-register with BreEZe.
- BreEZe only accepts credit card payments for American Express, Discover, MasterCard, and Visa.

FOR CONSUMERS

Check Licenses and file complaints.

Verify a LICENSE File a COMPLAINT

FOR APPLICANTS AND LICENSEES

Applicant and licensing needs are available here.
You will need to [register](#), or use your existing user name and password

Returning User

Fields marked with * are required

* User ID:

* Password:

[Forgot Password?](#) [Forgot User ID?](#) [Sign In](#)

New Users

[BreEZe Registration](#)

[Back to Top](#) | [Conditions of Use](#) | [Privacy Policy](#) | [Accessibility](#)
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This will bring you to the **Quick Start Menu**.

The screenshot shows the BreEZe website interface. At the top, there is a header with the CA.GOV logo, Department of Consumer Affairs, and BREZE logo. Navigation links include 'About BreEZe', 'FAQ's', and 'Help Tutorials'. A user is logged in as 'Mouse, Mickey'. The main content area is titled 'Quick Start Menu' and contains several sections: 'License Activities', 'Additional Activities', and 'Applications'. A red arrow points to the '<Choose Application>' dropdown menu under 'License Activities - Manage your license information'. The 'Additional Activities' section includes 'Make Payments/Cart', 'Add Authorized Representative', and 'License Notification Subscriptions'. The 'Applications' section includes 'Start a New Application or Take an Exam' and 'View Application Status'. A 'License/Registration Information' sidebar is visible on the right.

To complete an Attachments application, click the '**<Choose Application>**' dropdown menu under **License Activities – 'Manage your license information'**. Select **Attachments** from the dropdown menu, then click the blue **Select** button.

The screenshot shows the 'Attachments - Introduction' screen. On the left is a navigation menu with items: 'Introduction', 'Information Privacy Act', 'Application Questions', 'Name and Personal/Organization Details', 'Contact Details', 'File Attachments', and 'Application Summary'. The main content area contains the following text: 'If you have submitted an initial application for licensure/certification or have a pending renewal requiring additional documentation, these items may be submitted via this online attachment transaction. Your submitted items will be added to your open application for licensure or pending renewal. You may also attach any other necessary documentation pertaining to your license as needed. Press "Next" to continue. Press "Cancel" to exit this application.' At the bottom right, there are 'Next' and 'Cancel' buttons.

At the Attachments - Introduction screen, please read the information carefully, and click **'Next'** to continue.


Introduction	Attachments - Information Privacy Act
Information Privacy Act	INFORMATION COLLECTION AND ACCESS
Application Questions	The Information Practices Act, Section 1798.17 Civil Code, requires the following information to be provided when collecting information from individuals.
Name and Personal/Organization Details	Agency Name: Respiratory Care Board
Contact Details	Title of official responsible for information maintenance: Executive Officer
File Attachments	Address: 3750 Rosin Ct. Ste. 100, Sacramento, CA 95834
Application Summary	Telephone Number: (916) 999-2190
	Authority which authorizes the maintenance of the information: Section 30, Section 2732.1(a), Business and Professions code all information is mandatory.
	The consequences, if any of not providing all or any part of the requested information: Failure to provide any of the requested information will result in the application being rejected as incomplete.
	The principal purpose(s) for which the information is to be used: Section 30 of the business and professions code and public law 94-455 (42 usca 405(c)(2)(c)) authorize collection of your social security number or individual taxpayer identification number. Your social security number or individual taxpayer identification number will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for family support in accordance with section 11350.6 of the welfare and institutions code, or for verification of licensure or examination status by a licensing or examination entity which utilizes a national examination where licensure is reciprocal with the requesting state. If you fail to list your social security number or individual taxpayer identification number, your application for initial or renewal license will not be processed. You will be reported to the franchise tax board, which may assess a \$100 penalty against you. Your name and address listed on this application will be disclosed to the public upon request if and when you become licensed or renewed.
	Any known or foreseeable interagency or intergovernmental transfer which may be made of the information: Possible transfer to law enforcement, other government agencies and reporting social security number or individual taxpayer identification number to the franchise tax board or for child support enforcement purposes pursuant to Section 30 of the business and professions code. Each individual has the right to review the files on records maintained on them by the agency, unless the records are exempt from disclosure.
	Mandatory Reporter: Under California law each person licensed by the Board of Registered Nursing is a "Mandated Reporter" for child abuse or neglect purposes. Prior to commencing his or her employment, and as a prerequisite to that employment, all mandated reporters must sign a statement on a form provided to him or her by his or her employer to the effect that he or she has knowledge of the provisions of Section 11166 and will comply with those provisions.
	California Penal Code Section 11166 requires that all mandated reporters make a report to an agency specified in Penal Code Section 11165.9 [generally law enforcement agencies] whenever the mandated reporter, in his or her professional capacity or within the scope of his or her employment, has knowledge of or observes a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect. The mandated reporter must make a report to the agency immediately or as soon as is practicably possible by telephone, and the mandated reporter must prepare and send a written report thereof within 36 hours of receiving the information concerning the incident.
	Failure to comply with the requirements of Section 11166 is a misdemeanor, punishable by up to six months in a county jail, by a fine of \$1,000, or by both imprisonment and fine.
	For further details, consult Penal Code Section 11164 and subsequent sections.
	Press "Agree" to continue. Press "Cancel" to exit this application.
	Agree Cancel




On the Information Privacy Act screen, please read the information carefully and click **'Agree'** to continue.

On the Application Questions screen, select **'Yes'** or **'No'** from the dropdown boxes on each screen to determine which type of document(s) is/are being submitted, then click **'Next'** to continue. (You must select **'Yes'** on one of these screens to continue with the application.)


Introduction	Attachments - Application Questions
Information Privacy Act	Please answer all the following questions. If the following questions are not applicable to your application, please select "No" as your response.
Application Questions	Answer the questions and press "Next" to continue.
Name and Personal/Organization Details	Press "Previous" to return to the previous section. Press "Cancel" to exit this application.
Contact Details	Are you adding additional document(s) to an open Application? <input type="text"/>
File Attachments	
Application Summary	Previous Next Cancel




Introduction	Attachments - Application Questions
Information Privacy Act	Please answer all the following questions. If the following questions are not applicable to your application, please select "No" as your response.
Application Questions	Answer the questions and press "Next" to continue.
Name and Personal/Organization Details	Press "Previous" to return to the previous section. Press "Cancel" to exit this application.
Contact Details	Are you adding additional document(s) to a pending renewal/reinstatement of a License/Certificate? <input type="text"/>
File Attachments	
Application Summary	Previous Next Cancel



Introduction	Attachments - Application Questions
Information Privacy Act	Please answer all the following questions. If the following questions are not applicable to your application, please select "No" as your response.
Application Questions	Answer the questions and press "Next" to continue.
Name and Personal/Organization Details	Press "Previous" to return to the previous section. Press "Cancel" to exit this application.
Contact Details	Are you adding additional document(s) associated to your Enforcement Case? <input type="text"/>
File Attachments	
Application Summary	Previous Next Cancel



On the Name and Personal Details screen, review the information and click **'Next'** to continue.

Introduction	Attachments - Name and Personal Details
Information Privacy Act	If the following personal information is not correct, please contact the Board to update your information.
Application Questions	Press "Previous" to return to the previous screen.
Name and Personal/Organization Details	Enter your personal details and Press "Next" to continue. Press "Cancel" to exit this application.
Contact Details	Title
File Attachments	First Name
Application Summary	Middle Name (Optional)
	Last Name
	Suffix (Jr, Sr, II)
	SSN/ITIN 
	Date of Birth
	Gender
	Previous Next Cancel

On the Address Detail Summary screen, if you need to fix/update your address, phone number, or e-mail, click the blue ['Address of Record'](#) link under 'License Specific Addresses' to edit the information.

Introduction	Attachments - Address Detail Summary
Information Privacy Act	Please ensure the Board has your correct Address of Record (mailing address). If this information is incorrect, please complete the Address Change application from the Quick Start Menu.
Application Questions	Press "Previous" to return to the previous section.
Name and Personal/Organization Details	Press "Next" when finished adding/changing addresses. Press "Cancel" to exit this application.
Contact Details	License Specific Addresses
File Attachments	Address of Record Name:
Application Summary	Address:
	Phone Number:
	E-mail:
	Please note, the 'Address of Record' will be disclosed to the public.
	Previous Next Cancel

The Attachments screen is where you are required to attach any documents related to this application. Click the **'Choose File'** button to select the file from your computer, then click the blue **'Attach'** button at the bottom to include the attached documents to your application. You may upload as many files as necessary, then click **'Next'** to continue.

Introduction	Attachments - Attachments
Information Privacy Act	Begin adding your document(s) below. You MUST click the Attach button below EACH time you add a new file.
Application Questions	Locate a file with the "Browse" button and press "Attach" or "Remove" as required.
Name and Personal/Organization Details	Press "Next" when there are no more files to attach. Press "Previous" to return to the previous screen.
Contact Details	Press "Cancel" to exit this application.
File Attachments	
Application Summary	File Name: <input type="button" value="Choose File"/> No file chosen Notes: <input type="text"/>
	You may attach more than one file to your application. You MUST click the Attach button below each time you add a new file, even if you are only attaching one file. If you do not click the Attach button below before continuing with the online application, your file(s) will NOT be uploaded. Once the online application is submitted, you will not be able to attach any additional documents. PLEASE MAKE SURE TO VERIFY THAT YOUR DOCUMENT(S) WERE ATTACHED CORRECTLY BEFORE CONTINUING ON WITH THE APPLICATION.
	<input type="button" value="Attach"/> <input type="button" value="Previous"/> <input type="button" value="Next"/> <input type="button" value="Cancel"/>

Introduction	Attachments - Attachments
Information Privacy Act	Begin adding your document(s) below. You MUST click the Attach button below EACH time you add a new file.
Application Questions	Locate a file with the "Browse" button and press "Attach" or "Remove" as required.
Name and Personal/Organization Details	Press "Next" when there are no more files to attach. Press "Previous" to return to the previous screen.
Contact Details	Press "Cancel" to exit this application.
File Attachments	Files Uploaded View Remove
Application Summary	Total Size of Attached Files (MB): 0.53
	File Name: <input type="button" value="Choose File"/> No file chosen Notes: <input type="text"/>
	You may attach more than one file to your application. You MUST click the Attach button below each time you add a new file, even if you are only attaching one file. If you do not click the Attach button below before continuing with the online application, your file(s) will NOT be uploaded. Once the online application is submitted, you will not be able to attach any additional documents. PLEASE MAKE SURE TO VERIFY THAT YOUR DOCUMENT(S) WERE ATTACHED CORRECTLY BEFORE CONTINUING ON WITH THE APPLICATION.
	<input type="button" value="Attach"/> <input type="button" value="Previous"/> <input type="button" value="Next"/> <input type="button" value="Cancel"/>

The next screen contains the Application Summary. Review the information that was entered on this application.

Once you review the information entered, click **'Proceed to Payment'** at the bottom of the screen. (**NOTE:** This application does not require payment.)

Introduction	Attachments - Application Summary
Information Privacy Act	Press "Previous" to the return to the previous section.
Application Questions	Review the data and press "Proceed to Payment" to submit this application.
Name and Personal/Organization Details	Press "Cancel" to exit this application.
Contact Details	Attachments Summary
	License Type: Respiratory Care Practitioner
Once you click "Submit" you will be unable to add/delete/change/modify the data contained in this online application.	
Previous Proceed to Payment Cancel	

On the Attestation screen, read the statement, click **'Yes'**, then click **'Proceed to Payment'** to continue. (**NOTE:** No payment is required for this application.)

Introduction	Attachments - Attestation
Information Privacy Act	Press "Previous" to return to the previous section.
Application Questions	Answer "Yes" or "No" to the Attestation and press "Proceed to Payment" to continue.
Name and Personal/Organization Details	Press "Cancel" to exit this application.
Contact Details	I declare under penalty of perjury under the laws of the State of California that I am the person herein submitting this application and that I have read the complete application, know the full content thereof, that the information contained in this application and, if necessary, copies of all documents submitted as part of the application are true and correct and that I have read and understand the disclosure statements provided in the instructions for this application. I hereby grant the Department of Consumer Affairs entity permission to verify any information contained in this application.
File Attachments	I understand that any falsification or misrepresentation of any item or response on this application or any attachment hereto is a sufficient basis for denying or revoking a license.
Application Summary	Failure to provide any of the requested information will delay the processing of your application.
	<input type="radio"/> Yes <input type="radio"/> No
Previous Proceed to Payment Cancel	

You will then be taken to the Fee and Summary Report. Click '**Back**' to return to the Quick Start Menu.

Fee and Summary Report

Your application data has been submitted. Click on "View PDF Summary Report" and print this report for your records.

Press "Back" to return to the main menu.

[Back](#)

[View PDF Summary Report](#)



Please call the RCB at (916) 999-2190, or toll free at (866) 375-0386 if you have any questions.