

FORTIFIED Home™ Directory & Provider Portal User Guide

November 2023



# FORTIFIED Home™ Directory & Provider Portal User Guide

Thank you for your interest in the FORTIFIED Home™ program. As a certified FORTIFIED provider, you will have access to the Provider Portal, where you can manage your individual provider profile, upload required credentials, update your company's directory listing and get the latest program information.

In addition to providing step-by-step instructions on how to navigate and utilize the Provider Portal, this guide also provides links to video tutorials. If you need further information, please use this form to ask questions: <u>provider-portal-support</u>.

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#### **Create an Account**

- Navigate to <u>www.fortifiedproviders.com</u>.
- Click "Provider Login" in the upper right corner.



• Click "Click here to register"

FORTIFIED	Welcome	Providers Near Me	Provider Login
Provider Por	tal		
Welcome to the FO	RTIFIED Prov	ider Portal.	
Login or Create an account a	nd you'll be able to c	reate/manage your directory l	isting and gain access to provider-only content.
Username or Email cbarros@ibhs.org Password			
			Remember Me     Log In
			Forgot password? Click here to reset
			New User? Click here to register

• Provide name, create and confirm password, check the Captcha box and click "Register."

As a FORTIFIED Certified Provider, are able to manage your public? owner of a FORTIFIED Provider business, you will also be able to co To get started, please create your account below. After registering i	ly-visible Provider profile. If you are the omplete your business listing.
To get started, please create your account below. After registering	
further instructions.	for access, you will receive an email with
New User Registration First Name*	
*	
Last Name"	
Email*	
cbarros@ibhs.org	
Password*	
Confirm Password*	

• Once you've clicked "Register," you will receive an email from admin@fortifiedproviders.com, with a link to confirm your email and directions to get started building your individual provider profile and your company listing.

## Log In to the Provider Portal

- Navigate to <u>www.fortifiedproviders.com</u>.
- Click "Provider Login" in the upper right corner.



• Enter your username or email and your password and click "Log In"

HOME			
Provider Port	al		
Welcome to the FO	RTIFIED Prov	vider Portal.	
Login or Create an account an	d you'll be able to c	create/manage your director	ry listing and gain access to provider-only content.
Eviating Llaara L	a la		
Existing Users Lo	y m		
charros@ibbs.org			
Password			
			Remember Me Log In
			Forgot password? Click here to reset
			New User? Click here to register

## **Create Your Individual Provider Profile**

- Open the email your received from admin@fortifiedproviders.com and click the link provided to confirm your email address.
- Navigate back to <u>www.fortifiedproviders.com</u> and log in.
- The first step is to associate your individual provider profile with your company.
  - If your company is already listed in the FORTIFIED Directory or has been in the past, find them in the list of providers.

You are logged Click to log out	in as cbarros_ucp(	3hotmail.com					
		To get started, s	elect your Cor	<u>mpany's name</u> fror	n the list below.		
	If your compa	any is not listed, scr	oll to the bott	tom and select "Co	mpany Not Found -	Please Add"	
			Filter by K	(eyword			
		Select Your	Company Name	_			
		110 Builders					
		12 Bravo Cor	istruction Compan	nies LLC			
		21st Century	nce Agency Home Inspections	LLC.			
			-		*		

 When you've selected your company from the list of providers, you'll see a message confirming your selection. If it is accurate, click "Create Provider Profile"

	Test Provider Company	<b>^</b>
	The Baldwin Group	
	The BKM Co. LLC	
	The Highland Group	
	The Inspection Specialists	
т	hat's great! It looks like you've located your compar	The st Provider Company.
Ti *Please note: You *	hat's great! It looks like you've located your compar Please continue the process by creating your pe will be required to submit all necessary document button below to get starte	v ny, Test Provider Company. ersonal provider profile. ation in order to create your profile. Click d.

- o If your company is new to the directory, click "Company Not Found Please Add."
  - You will be asked to confirm your company is not listed. Once you've done that, click "Create New Company Listing"



 You will have to create a company listing before proceeding to your individual provider profile.



The person adding a company to the list of providers will be the only person with access to edit the company's directory listing.

- Once you have been associated with your company's directory listing, you can create your individual provider profile.
- Enter your *personal* contact information. Information here will not be available to the public and will not appear in your company's directory listing.

FORTIFIED Welcome Powders New Me Powder Portal	
Create Provider Listing	
Joe Testprovider	
Contact Information	
The below contact info is for internal use only, and is not publicly visible in the directory.	
Email	
cbarros_ucp@hotmail.com	
Street Address 1	
Street Address 2	
City	
State - Seed One	
Postal Code	
Provider Company Name	
Provider Type *	

• Select your provider type (evaluator, professional or roofer). This will determine the required eligibility documentation (e.g., certification, proof of insurance, license),

c	City
s	State
	- Select One 🗸
F	Postal Code
F	Provider Company Name
•	Test Provider Company 🗸
F	Provider Type *
	Evaluator
	Professional
	Roofer
• Y	fou will need to provide documentation based on the provider type(s) selected
F	Role / Description

• Check the box confirming that you have reviewed the relevant FORTIFIED handbook and that you understand you must comply with the eligibility requirements described.

	Provider Type *	
	Evaluator	
	Professional	
	Roofer	
	*You will need to provide documentation based on the provider type(s) selected	
	Role / Description	
	FORTIFIED Handbook Attestation	
	I have reviewed the FORTIFIED Handbook that corresponds to my selected provider type(s) (see below), and I understand that it is my responsibility to comply with the requirements.	
	EORTIFIED Roofing Contractor Handbook     EORTIFIED Evaluator Handbook     EORTIFIED Professional Handbook	
	Required Documentation	

- Click "Add File" to upload proof of eligibility requirements.
  - Requirements in red must be provided for initial review.
    - Some fields offer an Eligibility Commitment form which states the provider will obtain and provide the required credential after completing training and certification exam. Using this form may allow for conditional eligibility.
  - All requirements must be provided for you to be listed in the FORTIFIED Directory

	I have reviewed the FORTIFIED Handbook that corresponds to my selected provider type(s) (see below), and I understand that it is my responsibility to comply with the requirements.
	EQUITEED Dedina Contractor Linguised     EQUITEED Dedinator Hindbook     EQUITEED Indiators Hindbook     EQUITEED Preferences Handbook
Re	equired Documentation
	<ul> <li>Required documentation is specific to your Provider Type[d].</li> <li>In order to submit your limiting for Eligibility Review, you are minimally required to upload the documentation extilmed in RED.</li> <li>ALL of the documentation item listed below will be required for your listing to be approved and validle in the directory, so please upload as many as you have at the time.</li> <li>After our team reviews this initial request, you <u>will have</u> the opportunity to upload any remaining documentation to complete your listing.</li> <li>Accepted Filespres as PDF, DDC, DDC, DPG, JPEG</li> </ul>
	Professional Experience / Resume
	Add File
	License (if mandated by state)
	Add File
	Auto Insurance
	Add File
	Proof of \$500,000 in Auto Insurance Coverage

• Click "Submit" to finalize your upload and request a review of your proof of eligibility.

Proof of \$1,000,000 in Ceneral Liability insurance	
FORTIFIED Evaluator Certification Exam Results	
Add File	
FORTIFIED Service Provider Agreement	
	Submit

#### **Maintain Your Individual Provider Profile**

Maintaining your personal profile can entail updating personal contact information, adding or updating eligibility documentation (e.g., license, proof of insurance, certification), and changing the role within your company.

- Navigate back to <u>www.fortifiedproviders.com</u> and log in.
  - o Click "View/Manage Your Individual Provider Profile."

FORTIFI	Welcome	Providers Near Me	Provider Portal	
Provider	Portal			
You are logged in a <u>Click to log out</u>	cbarros@ibhs.org			
HI Cliff , Welcome bac clicking belov by navigating	k! If your personal lis /. If you are also the p to your company - c	ting submission has b primary contact for yo frectory listing	een accepted, you can view your personal provider listing by ur company, you will be able to modify your company details	
La View/Manag	e Your Individual Provider List	ing View/Manage Yo	our Company Listing	
Latest Ani	nouncements for t	he FORTIFIED Prov	rider Community	
Hurricane Pr	ep: Post-Storm Aud	it Process Review		

• Click "Update Information"

	Providers Near Me	Provider Portal	
Joe Testprovider			Update Information
(m) (m)			
Evaluator working with <u>Samp</u>	le Fortified Provide	<u>er 1</u>	

• Update contact information, if necessary

Joe Testprovider	×
Provider Company Name	
Sample Fortified Provider 1	
If you no longer work for this company, <u>Request Update</u>	
Provider Type	
Z Evaluator	
Roofer	
* You will need to provide documentation based on the provider type(s) selected	
Email	
cbarros@ibhs.org	
Phone	
251-222-2222	
Role / Description	
Evaluator Extraordinaire	
Street Address 1	
789 Home Address St	

- Click "Add File" to upload proof of eligibility requirements.
  - Each requirement highlighted in red must be provided in order to submit any changes to your profile.
  - All requirements must be provided and up to date in order to continue to be listed in the FORTIFIED Directory

I have reviewed the FORTHED Handbook that corresponds to my selected provider type(s) [see below), and I understand that is it my responsibility to comply with the requirements.  E CONTEND Docting Contractor Handbook E CONTEND Docting E Booking (Booking Handbook) E Contend E Booking (Booking Handbook) E Contend Docting E Booking (Booking Handbook) E Contend E Booking (Booking Handbooking Handb		
Indextand that it is my responsibility to comply with the requirements.	U I have re	viewed the FORTIFIED Handbook that corresponds to my selected provider type(s) [see below], and I
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Identified Unsearand Francesco     Identified Unsearand France     Identified Unsearand France     Identified     Identified Unsearand France     Identified Unsearand     Identified     Identified Unsearand     Identified	FORT	TED Footnak of Handbook
Exertile to Treeseands Handbook Exercise Ex	• FORT	-IED Evaluator Handbook
A cupriced Documentation	<ul> <li>FORID</li> </ul>	-IED Protessional Handbook
eleguined Jocumentation is specific to your Provider Type): In order to submit your lating for Eligibility Review, you are minimally required to upload the documentation writined in RED. Autor to use and this integrated to upload any remaining documentation to complete your listing to be approved and visible in the directory, so please upload as many as you have at this integrated to upload any remaining documentation to complete your listing to experiment to upload any remaining documentation to complete your listing to upload any remaining documentation to complete your listing. I vacented Flietypes are POF, DOC, DOC, PNG, JNG, 3PEC  Professional Experience / Resume  Licenses (if mandated by state)  Autor Insurance  Autor Insurance  Autor Insurance  Autor Insurance  For of S500,000 in Autor Insurance Coverage	D	
<ul> <li>enclosed documentation is specific toyour bookdor typed).</li> <li>A containing our large for displaying bookery of the displaying an enclose of the displaying bookery of the display bookery of the displaying bookery</li></ul>	Required	Jocumentation
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Add The accurance and and the balance will be required for your balance of and wildble in the direction; polean any updata as many as you have in the intervent the initial request, you will have the opportunity to upload any remaining documentation to complete your listing.     Aler our team reviews the initial request, you will have the opportunity to upload any remaining documentation to complete your listing.     Professional Experience / Resume     Losense (if mandated by state)     Losense (if opposed to update as many as you have below to update as many as yo	<ul> <li>Require</li> </ul>	en oucumentation is specific a your invite in press.
Actor Instruction instructions with the regarder of system sing to be approved and visited in the united by to passe update as indiry day of a sing to be approved and visited in the united by to passe update as indiry day of a sing to be approved and visited are remaining documentation to complete your listing.	- 110104	s to source you instring for Englishing Review, you are minimany requires to uprove the documentation optimier in RED.
After our team means this initial request, you <u>will have</u> the opportunity to upload any remaining documentation to complete your listing.     Yecepted Filetypes are PDF, DOC, DOCX PNC, JPC, 3PEG  Professional Experience / Resume  License (if mandated by state)  Add File  Add File  Add File  Profession in Auto Insurance Coverage	<ul> <li>ALL OF</li> </ul>	the documentation items listed below will be required for your listing to be approved and visible in the directory, so please upload as many as you this time.
en cou ser reverse un service pare PDF, DOC, DOCK PHG, JRG, JREG  Professional Experience / Resume  Add File  License (if mandated by state)  Add File  Auto Insurance  Add File  Prof of 5500,000 in Auto Insurance Coverage	- After o	cuis unre. In team mainur, this initial request you will have the expectively to unlead any remaining decumentation to complete your listing
Add File  A	- Mooon	and Electronic and another copean, you will have use opportunity to upload any remaining documentation to complete your listing.
Professional Experience / Resume          Asis File         License (If mandated by state)         Asis File         Asis File         Asis File         Professional Experience / Coverage	<ul> <li>Accept</li> </ul>	teu niegyes ale nun, uvus, nitu, unu, unu
Professional Experience / Resume Add File License (if mandated by state) Add File Add File Rodrof S500,000 in Auto Insurance Coverage		
Professional Experience / Resume Add File License (if mandated by state) Add File Add File Add File Add File Proof of 5500,000 in Auto Insurance Coverage		
Add File License (if mandated by state) Add File Add File Rod of \$500,000 in Auto Insurance Coverage	Profession	al Experience / Resume
Add File License (if mandated by state) Add File Add File Add File Proof of 5500,000 in Auto Insurance Coverage		
Add File License (if mandated by state) Add File Auto Insurance Add File Proof of \$500,000 in Auto Insurance Coverage		
License (if mandated by state) Add File Add File Proof of \$500,000 in Auto Insurance Coverage	Add File	
License (if mandated by state) Add File Proof of 5500,000 in Auto Insurance Coverage		
License (if mandated by state) Add File Add File Proof of \$500,000 in Auto Insurance Coverage		
License (if mandated by state) Add File Auto Insurance Add File Proof of \$500,000 in Auto Insurance Coverage		
License (if mandated by state) Add File Add File Add File Proof of \$500,000 in Auto Insurance Coverage		
Add File Auto Insurance Add File Proof of \$500,000 in Auto Insurance Coverage	License (if	mandated by state)
Add File Add Tile Proof of \$500,000 in Auto Insurance Coverage		
Add File Auto Insurance Add File Proof of \$500,000 in Auto Insurance Coverage		
Auto Insurance Add File Proof of \$500,000 in Auto Insurance Coverage	Add File	
Auto Insurance Add File Proof of \$500,000 in Auto Insurance Coverage		
Auto Insurance Add Elie Proof of \$5:00,000 in Auto Insurance Coverage		
Auto Insurance Add File Proof of \$500,000 in Auto Insurance Coverage		
Auto Insurance Add File Proof of \$500,000 in Auto Insurance Coverage		
Add File Proof of \$500,000 in Auto Insurance Coverage		
Add File Proof of \$500,000 in Auto Insurance Coverage	Auto Insu	ance
Add File Proof of \$500,000 in Auto Insurance Coverage	Auto Insu	ance
Proof of \$5:00,000 in Auto Insurance Coverage	Auto Insur	ance
Proof of \$500,000 in Auto Insurance Coverage	Auto Insur Add File	ance
	Auto Insur Add File	ance
	Auto Insur Add File Proof of \$50	ance 
	Auto Insur Add File Proof of \$50	ance 
	Auto Insur Add File Proof of \$50	ance J.000 in Auto Insurance Coverage
	Auto Insur Add File Proof of \$50	ance

• Click "Submit" to finalize your upload and request a review of your proof of eligibility.

Add File		
Proof of \$1,000,000 in General Liability Insurance		
FORTIFIED Evaluator Certification Exam Results		
Add File		
FORTIFIED Service Provider Agreement		
Add File		
	Submit	

#### **Create Your Company's Directory Listing**

- Open the email your received from admin@fortifiedproviders.com and click the link provided to confirm your email address.
- Navigate back to <u>www.fortifiedproviders.com</u> and log in.
- Since your company is new to the directory, it will not be on the list of providers.
- Click "Company Not Found Please Add."
  - You will be asked to confirm your company is not listed. Once you've done that, click "Create New Company Listing"

Your Roefing Company Inc.         Zah Smith Consuling & Design         Zo's Home Improvement LLC         Zo Home Improvement LLC         Contently Hor FroMito - PREASE ADD    Before moving forward, Please DOUBLE-CHECK that your company is not in the list above. Submitting duplicate company Information will result in a delay in approving your directory listing. Once you are certain that your company is not listed, click the button below to proceed	
Crease Your Company Links	
Hurricane Prep: Post-Storm Audit Process Review	

• Enter your company's contact information. Be sure you have everything entered correctly. It will appear on the FORTIFIED Directory exactly as you type it.

FORTIFIED	Welcome	Providers Near Me	Provider Portal
Create Provid	der Comp	oany Listing	
Company Name			
Street Address 1			
Street Address 2			
City			
State Select One	~		
Postal Code			
Company Email			

• OPTIONAL: Click "Add File" to upload a company logo and/or a photo of your main contact

Company Phone	
Company Logo	
Owner/Representative Headshot	
Add File This will be displayed on the company listing.	
	Submit

• Click "Submit" to finalize your upload and request approval of your directory listing.

Add File		
Owner/Representative Headshot		
Add File This will be displayed on the company listing.		
	Submit	

#### Maintain Your Company's Directory Listing

Maintaining your company's directory listing can entail updating the company's contact information and website or adding/updating a logo or photo.

- Navigate back to <u>www.fortifiedproviders.com</u> and log in.
  - o Click "View/Manage Your Company Listing."

Provider Por	tal		
'ou are logged in as cbarros@ <u>:lick to log out</u>	aibhs.org		
Meleome heeld lfuer	ur nersenel listing a	ubralasian has ha	an accepted you can identify paragonal provider listing by
Welcome back! If you clicking below. If you by navigating to your	ur personal listing s 1 are also the prima 1r company's directo	submission has be ry contact for your ory listing	een accepted, you can view your personal provider listing by r company, you will be able to modify your company details

• Click "Update Information"



• Update contact information, if necessary.

FORTIFIED	Welcome	Providers Near Me	Provider Portal	
Sample Forti	ified Prov	vider 1		X Close Form without Saving
Street Address 1				
123 IBHS Rd				
Street Address 2				
City				
Richburg				
State				
sc	~			
Postal Code				
29729				
Company Email				
sample.fh.provider@gmail.com				
Company Website				
http://www.sampleprovider.com	v			
Company Phone				

• If desired, click "Add File" to upload logo and/or photo.

Company Logo			
sample lo	80	₽ ×	
Add File			
Owner/Representat	tive Headshot		
MarkZehr	nal_IBHS	£ ×	
Add File			
This will be displayed	on the company listing.		

• Click "Submit" to finalize changes

(251) 555-5555		
Company Logo		
sample logo	₽ ×	
Add File		
Owner/Representative Headshot		
MarkZehnal_IBHS	Ŧ ×	
Add File		
This will be displayed on the company listing.		
		Submit

#### **BADGES**

**Please Note:** Your company listing will show every badge earned by your employees. If a badge is missing, please review your employee badges to identify which individual profile needs to be updated. That employee will have to upload the appropriate certification to earn the badge. If you need additional assistance, please use this form: <u>provider-portal-support</u>.

#### **Changing Your Company Association**

Every FORTIFIED provider must be associated with a company. If you have joined a new company, you will need to request a change to your association.

**Please note:** You may also need to update provider credentials typically arranged by a company, such as proof of insurance. See *Maintaining Individual Provider Profile* for instructions.

- Navigate back to <u>www.fortifiedproviders.com</u> and log in.
  - o Click "View/Manage Your Individual Provider Profile."

Provider Poi	rtal		
You are logged in as cbarros <u>Click to log out</u>	@ibhs.org		
HI Cliff , Welcome back! If yo clicking below. If yo	our personal listi u are also the pr ur company all	ing submission has b rimary contact for you rectory listing	een accepted, you can vlew your personal provider listing by ur company, you will be able to modify your company details

• Click "Update Information"

	Providers Near Me Pro	ovider Portal
Joe Testprovider		Update Information
الله الله		
Evaluator working with Sar	nple Fortified Provider 1	

• Directly beneath Provider Company Name, click "Request Update."

FORTIFIED	Welcome	Providers Near Me	Provider Portal	
Joe Testpro	vider			X Close Form without Saving
() () () () () () () () () () () () () (				
Provider Company Name				
Sample Fortified Provider 1	~			
If you no longer work for this o	ompany, <u>Request Up</u>	odate		
Provider Type				

• A new window will open, displaying the "Update Company Affiliation Request" form. Complete and click "Submit"

If you no longer work for the company you ar	e listed under, use this form to request removal or to be listed under another company.
Your name	Your email
Company Name You Wish to be Removed Fre	om
Company Listing O My New Company IS Already Listed O H	My New Company IS NOT Already Listed $\odot$ I NO LONGER with to be listed with ANY Company
New Company Name	
New Company Name	New Company State

## **Changing Your Company's "States Served"**

When homeowners access the FORTIFIED Provider Directory, they typically sort the list by state. By default, your directory listing will appear in searches of the state listed in your company's address. Your company can appear in multiple state searches if you offer service in additional locations.

- Generally, we will allow companies to be listed in bordering states if you attest that you do offer services in those states and if they can be reached, by car, in under 2 hours.
- If your company has multiple offices, those offices with certified FORTIFIED providers may be listed separately in the directory. This will allow each of your company's locations to appear in the directory's map feature.
  - To set up a new company listing, use the States Served form to provide the new location's address and the individual provider who will be associated with that location.
- If you wish for your company to be listed in locations outside of the service area described above and without employing individual providers in those areas, you can submit a detailed operations plan for consideration. The plan must be submitted by using the <u>provider-portal-</u> <u>support-form</u> and contain the following:
  - States in which you want your company listed.
  - $\circ$   $\;$  Details on how your firm plans to provide services in these locations.
  - (Evaluators only) Details on how the company plans to meet the minimum site visit requirements in all locations.

#### If you would like to request additional states served

- Navigate back to <u>www.fortifiedproviders.com</u> and log in.
  - o Click "View/Manage Company Listing."

Provider Por	tal				
You are logged in as cbarros@ <u>Click to log out</u>	ibhs.org				
HI Cliff , Welcome back! If you clicking below. If you by navigating to you	ir personal listing s are also the prima company's direct	submission has bee iry contact for your ory listing	n accepted, you ca company, you will	n vlew your personal p pe able to modify your	rovider listing by company details

• Confirm the states for which you are currently listed as a provider.



• Click "Lets Us Know"

	oviders Near Me Provider Portal	
Sample Fortified Provide	er 1	🖉 Edit Company Listing
Providing services with FORTIFIED of	certified Evaluators	
<u></u>		SAMPLE
123 IBHS Rd Richburg, SC 29729		PROVIDER
Serving Homeowners in: <b>SC</b> If your company listing does not accurately reflect the sta	πes you work in, <u>Let Us Know.</u>	Shielding Homes from Bebere Meather
🥒 Call   🖾 Email   🖾 Visit Website   🗞 Get	Directions	- York
Providers		Rock Hill Waxhaw

• A new window will open, displaying the "State Served Update Request." Complete the form and click "Submit"

If your company listing	door not accurately reflect th	a statos vou work in uso thi	s form to lot us know	
Your name	aves not accordibly reliect o	re autorea you work in, use une	a rotter og ret og rottow.	
Your email				
What States do you war	nt added or removed on you	r profile?		

• A member of the FORTIFIED team will reach out to you if there are any questions.

Thank you for your commitment to making your community stronger and better prepared for the next storm.

For additional information about becoming a certified FORTIFIED Provider, please visit: fortifiedhome.org/how-to-become- fortified-certified.

