

RESOLUTION NO. 2018 - 14

A RESOLUTION OF THE BOARD OF COUNTY COMMISSIONERS OF RIO BLANCO COUNTY, COLORADO, APPROVING THE RENEWAL OF AN AMBULANCE SERVICE LICENSE FOR RANGELY DISTRICT HOSPITAL AMBULANCE SERVICE

WHEREAS, by Resolution number 2006-34, known as the Emergency Medical Services Resolution, adopted by the Board of County Commissioners of Rio Blanco County, Colorado (BOCC) on December 18, 2006, ambulance service providers operating in Rio Blanco County are required to be licensed annually; and

WHEREAS, the BOCC has received an application for renewal of an Ambulance Service License from Rangely District Hospital Ambulance Service; and

WHEREAS, on the 16th day of April, 2018 the BOCC held a public hearing upon notice as required by law, to permit the receipt of input from any interested parties; and

WHEREAS, after reviewing the application, the BOCC has determined it to be complete; and

WHEREAS, BOCC has reviewed the Applicant's record of service during the preceding year and is satisfied appropriate ambulance services have been provided by the Applicant in its service area;

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF RIO BLANCO COUNTY, COLORADO:

The renewal application for an Ambulance Service License submitted by the Rangely District Hospital Ambulance Service is hereby approved and an Ambulance Service License shall be issued effective April 16, 2018, which shall remain in effect until April 15, 2019.

DULY MOVED, SECONDED AND PASSED ON A VOTE OF 3 FOR AND 0 AGAINST, this 16TH day of April, 2018.



ATTEST:

Boots M. Campbell
Boots M. Campbell
Clerk to the Board
Shawn M. Luce
Shawn M. Luce
Deputy Clerk

**BOARD OF COUNTY COMMISSIONERS
OF RIO BLANCO COUNTY, COLORADO**

Shawn J. Bolton
Shawn J. Bolton, Chairman

Jeff Rector
Jeff Rector, Commissioner

Si Woodruff
Si Woodruff, Commissioner

Application for Ambulance Service License

1. Name of Ambulance Service:

Rangely District Hospital Ambulance Service

2. Type of license (check one): BLS ambulance service ALS ambulance service

3. Contact information for the person applying for the license:

Name: Shanna Kinney
Address: 225 Eagle Crest Drive
City: Rangely State: CO ZIP: 81648
Telephone: 970-675-4218 (business) 970-675-4283 (fax)
E-mail: skinney@rdhosp.org

Applicant's training and experience (if listed in attached resume write "See attached"):
Same as below

4. Contact information for the person who will be in charge of the ambulance service:

Name: Shanna Kinney
Mailing address: 225 Eagle Crest Drive
Physical address: Same
City: Rangely State: CO ZIP: 81648
Telephone: 970-675-4218 (business) 970-675-4283 (fax)
Telephone: 970-629-9494 (cell) pager 19 (pager)
E-mail: skinney@rdhosp.org

Manager's training and experience (if listed in attached resume write "See attached"):
Manager for the past 14 years for the Ambulance Department. Assistant Manager - other business. In EMS for 34 years, Currently a Critical Care Paramedic, prior Paramedic (3 years) EMT - Basic / Intermediate for the previous 31 years prior to obtaining my Paramedic .

5. Contact information for owners, partners or directors (attach additional sheets if needed):

Owner Partner Stockholder Director
Name: John Payne
Address: 1228 La Mesa Circle Circle
City: Rangely State: CO ZIP: 81648
Telephone: 970-675-2670 (business) 970-675-5224 (fax)
E-mail: jospayne@netscape.net

Owner Partner Stockholder Director
Name: Nathaniel Polley
Address: 16418 Hwy 64 W
City: Rangely State: CO ZIP: 81648
Telephone: 970-629-2608 (business) 970-675-5224 (fax)
E-mail: npolley@allianceenergyco.com



- Owner Partner Stockholder Director
 Name: Michael D. Haub
 Address: 231 Ridge road.
 City: Rangely State: CO ZIP: 81648
 Telephone: 970-675-3814 (business) 970-675-5224 (fax)
 E-mail: mhaub@chevron.com
- Owner Partner Stockholder Director
 Name: Jason Kurrasch
 Address: 1218 Ridge View
 City: Rangely State: CO ZIP: 81648
 Telephone: 970-620-2611 (business) 970-675-5224 (fax)
 E-mail: jason.kurrasch@bakerhughes.com
- Owner Partner Stockholder Director
 Name: Michelle Huber
 Address: 109 E. Raven Ave.
 City: Rangely State: CO ZIP: 81648
 Telephone: 970-629-1905 (business) 970-675-5224 (fax)
 E-mail: mhuber@MindSpringsHealth.org

APPLICANT'S ATTESTATION AND SIGNATURE: The *, by this application, agrees to, and complies with, all provisions of these Regulations, or any amendments thereto, any other conditions pertinent to the license reasonably imposed by the Board, and all applicable provisions of Federal, State and local laws, rules and regulations in order to maintain licensure.

BY: *Shanna Kinney - NRP/FP-C*

6. Area to be served by the ambulance service (if described on map write "See attached map"):
see attached mapping
7. Location(s) from which it is intended to operate the ambulance service:
225 Eagle Crest Drive Rangely, CO 81648
8. List of mutual aid or automatic aid agreements (if listed in attachment write "See attached"):
None at this time
9. Waiver of fees (check one, if applicable):

Renewal license for an ambulance service operated by:

- a county government.
- a special district.
- a town or city government.
- other government or political subdivision.
- a not-for-profit corporation.
- a volunteer ambulance service.

Attach additional required documents to this application (see instructions for requirements).



Medical Director Attestation

1. Name of Ambulance Service:


Rangely District Hospital Ambulance Service

2. Contact information for the medical director of the ambulance service:

Name: Timothy Hsu, M.D.
Mailing address: 225 Eagle Crest Drive
Physical address: 225 Eagle Crest Drive
City: Rangely State: CO ZIP: 81648
Telephone: 970-675-4257 (business) 970-675-2759 (fax)
Telephone: 908-399-4967 (cell) (pager)
E-mail: timothyhsu@hotmail.com Medical License #: CO - 43012

2. Attestation by medical director.

By my signature below, I attest that I am the medical director of record for this ambulance service, I am willing to supervise the medical acts of all personnel on the ambulance service and provide an ongoing medical continuous quality improvement program for the ambulance service consistent with the requirements established by the Colorado Board of Medical Examiners pursuant to 3 CCR 713-6, Rule 500, 3.2, b, or its successor. I agree to notify the Board of County Commissioners, in writing, if I cease to serve as medical director for this ambulance service during the term of the ambulance service license.



Medical Director Signature

3/5/18

Date

Instructions for Medical Director Attestation

This application is a Microsoft Word form. Use the CURSOR or TAB key to move between data entry fields. It may be helpful for you to save a copy of this form with the basic information completed. You can simply print out another copy for the medical director's signature if no information has changed when it is time to submit a renewal application.

1. Enter the name under which the ambulance service will be licensed.
2. Complete the contact information for the for the medical director of the ambulance service.
3. Signature by the medical director for the ambulance service.

Attach the original document signed by the medical director to the ambulance service license application. The ambulance service license application must include this attestation by the

1

Application for Ambulance Vehicle Permit

1. Name of Ambulance Service:

Rangely District Hospital Ambulance

2. Type of permit (check one): BLS ambulance ALS ambulance.

3. Contact information for ambulance owner:

Name: Rangely District Hospital
Address: 225 Eagle Crest Drive
City: Rangely State: CO ZIP: 81648
Telephone: 970-675-5011 (business) (fax)
E-mail:

4. Contact information for the person applying for the license:

Name: Shanna Kinney
Mailing address: 225 Eagle Crest Drive
Physical address: 225 Eagle Crest Drive
City: Rangely State: CO ZIP: 81648
Telephone: 970-675-4218 (business) 970-675-4283 (fax)
Telephone: 970-629-9494 (cell) pager 500 (pager)
E-mail: skinney@rdhosp.org

5. Ambulance information:

Chassis year: 2017 Make: FORD Model: F450
VIN: 1FDUF4HT8HDA01967 License plate: JOO-404
Ambulance type (check one): I II III Other
Date in service (month/year): 06/2017
Color: White with blue beltline stripe, blue lettering
Other distinguishing characteristics:
White reflective snake and staff

6. Waiver of fees (check one, if applicable):

Renewal permit for an ambulance operated by:

- a county government.
- a special district.
- a town or city government.
- other government or political subdivision.
- a not-for-profit corporation.
- a volunteer ambulance service.

Replacement of an ambulance with a current permit:

- accidental loss.
- retirement.

VIN of ambulance lost or retired:

Attach additional required documents to this application (see instructions for requirements).


EMS Services

Eric Thomas Schmidt • Post Office Box 775516 • Steamboat Springs, Colorado 80477 • 719.330.1214 • Emssvcs@aol.com

AMBULANCE CERTIFICATION

I certify that the vehicle described herein has been inspected and meets the requirements for an advanced-life-support-equipped ambulance set forth by the Rio Blanco County Board of Commissioners and the State of Colorado.

Inspector's
Signature



Date

19 February 2018

Name of Service:

Rangely District Hospital

Address:

225 Eagle Crest Drive
Rangely, Colorado 81648

Ambulance Type:

I

Chassis Year and Make:

2017 Ford

Body/Conversion Manufacturer:

LifeLine

Vehicle Identification Number:

1FDUF4HT8HDA01967

License Number:

JOO-404

Unit Number:

MS1

COLOBADO REGISTRATION CARD

TYPE	PLATE	TAB	VIN		EXPIRE	FUEL			
PAS-CNY	JOQ404	JOQ404	1FDUF4HT8HDA01967		PERM.	D			
DUAL REG	DUAL NO	DUAL TAB	DUAL EXPIRE	TITLE	FLEET#				
				49E206170					
YR	MAKE	MODEL	BODY	COL	CWT	CC	WATTS	LxW	T/C
2017	FORD	F-4	AM	WHI	135				
PUR DATE	PUR PRICE	TAX VAL	BUS DATE	PREV EXP	CTY	U/R			
03/15/2017	186124.00	158,205	05/24/2017		49	U			
HVUT	C/P	CARRIER	BUS	CNT	PUC#	PWD ID	ID HOLDER	H/C DATE	
				000					
UNIT #	GVW	GVWR	MILES		HI GVW				

OWNER NAME/MAILING ADDRESS
 RANGELY DISTRICT HOSPITAL E/03152017/ /052021

THIEVES HAVE BEEN KNOWN TO USE THE ADDRESS FROM A REGISTRATION CARD TO STEAL FROM THE VEHICLE'S OWNER. FOR ADDED SECURITY, YOU ARE ENCOURAGED TO KEEP ONLY THIS REGISTRATION CARD IN YOUR VEHICLE. IT DOES NOT CONTAIN YOUR ADDRESS.

VALIDATION						TOTAL
RIO BLANCO	05/24/2017	092042	B04	JGT		10.98

MOTOR VEHICLE INSURANCE IS COMPULSORY IN COLORADO. NON-COMPLIANCE IS A MISDEMEANOR TRAFFIC OFFENSE

Colorado Auto Liability Coverage Identification Card 5

Colorado Special Districts Property and Liability Pool
 Rangely District Hospital
 225 Eagle Crest St
 Rangely, CO 816483105

Policy: 31C22009-154 VIN: 1FDUF4HT8HDA01967
 Effective Date: 1/1/2018 Expiration Date: 1/1/2019
 Year/Make/Model: 2017 / Ford / Ambulance
This card must be carried in the vehicle at all times as evidence of coverage.

Certificate of Motor Vehicle Condition

Owner: Rangely District Hospital

Year/Make: Ford F-450 Unit MS-1

VIN: 1FDUF4HT8HDA01967

Mileage: 4043.1

EVALUATION CHECK LIST

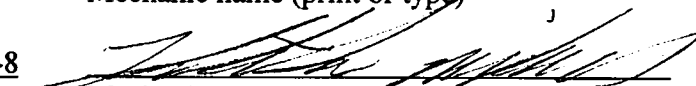
ITEM	ACCEPTABLE	NOT ACCEPTABLE	COMMENTS
Wheels and tires	✓		
Steering, alignment and suspension	✓		
Brakes	✓		
Lighting and electrical system	✓		
Exhaust system	✓		
Fuel system	✓		
Glass, body and sheet metal	✓		

As a qualified motor vehicle mechanic, I have evaluated the mechanical condition of the described vehicle and have determined that the vehicle is in safe operating condition as of this date. This evaluation does not warrantee future status of the vehicle operating condition due to conditions beyond my control.

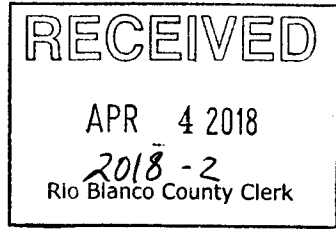
Rangely EMS Maint. Department
Company, Shop or Agency name

Ketchum Millard
Mechanic name (print or type)

225 Eagle Crest Drive, Rangely, CO 81648
Address


Mechanic signature

Date 3/2/18



Application for Ambulance Vehicle Permit

1. Name of Ambulance Service:

Rangely District Hospital Ambulance

2. Type of permit (check one): BLS ambulance ALS ambulance.

3. Contact information for ambulance owner:

Name: Rangely District Hospital
Address: 225 Eagle Crest Drive
City: Rangely State: CO ZIP: 81648
Telephone: 970-675-5011 (business) (fax)
E-mail:

4. Contact information for the person applying for the license:

Name: Shanna Kinney
Mailing address: 225 Eagle Crest Drive
Physical address: 225 Eagle Crest Drive
City: Rangely State: CO ZIP: 81648
Telephone: 970-675-4218 (business) 970-675-4283 (fax)
Telephone: 970-629-9494 (cell) Pager 500 (pager)
E-mail: skinney@rdhosp.org

5. Ambulance information:

Chassis year: 2008 Make: FORD Model: F450
VIN: 1FDXF47R48ED10090 License plate: 693-IUR
Ambulance type (check one): I II III Other
Date in service (month/year): 06/2008
Color: White with blue beltline stripe, blue lettering
Other distinguishing characteristics:
White reflective snake and staff

6. Waiver of fees (check one, if applicable):

- Renewal permit for an ambulance operated by:
- a county government.
 - a special district.
 - a town or city government.
 - other government or political subdivision.
 - a not-for-profit corporation.
 - a volunteer ambulance service.

Replacement of an ambulance with a current permit:

- accidental loss.
 - retirement.
- VIN of ambulance lost or retired:

Attach additional required documents to this application (see instructions for requirements).

AMBULANCE CERTIFICATION

I certify that the vehicle described herein has been inspected and meets the requirements for an advanced-life-support-equipped ambulance set forth by the Rio Blanco County Board of Commissioners and the State of Colorado.

Inspector's
Signature



Date

19 February 2018

Name of Service:

Rangely District Hospital

Address:

225 Eagle Crest Drive
Rangely, Colorado 81648

Ambulance Type:

I

Chassis Year and Make:

2008 Ford

Body/Conversion Manufacturer:

LifeLine

Vehicle Identification Number:

1FDXF47R48ED10090

License Number:

693-IUR

Unit Number:

MS4



COLORADO REGISTRATION/OWNERSHIP TAX RECEIPT								
TYPE	PLATE	TAB/VAL	VIN		EXPIRE			
PAS-CNY	693IUR	693IUR	1FDXF47R48ED10090		PERM.			
TITLE	YR	MAKE	BODY	CWT/PAS	T/C	FLEET#	FUEL	PREV EXP
49E098692	2008	FOR	AM	130			D	07/2014
PUR. DATE	PUR. PRICE	ORIGINAL TAXABLE VALUE		BUS. DATE	CO #	UR/CODE		
06/24/2008	148530.00	126,250		07/29/2014	49	U 24U		
EM. FEE	TITLE FEE	PRIOR O.T.	OWN TAX	LIC. FEE	ROAD FEE	BRIDGE FEE		
0.00	0.00	0.00	0.00	0.00	0.00	0.00		
RTD TAX	COUNTY TAX	CITY/DIST TAX	STATE TAX	SPECIAL FEE	OTHER FEE			
0.00	0.00	0.00	0.00	0.00	0.00	0.00		
UNIT #	GVW	MILES	HI GVW	-HC DATE				

OWNER NAME/MAILING ADDRESS
RANGELY DISTRICT HOSPITAL

225 EAGLE CREST DR
 RANGELY CO 81648

*FEES IN BOLD INCLUDED IN LIC FEE

VALIDATION	TOTAL
PAID RIO BLANCO 10 07/29/2014 155752JGT R01	0.00

Colorado Auto Liability Coverage Identification Card 04

Colorado Special Districts Property and Liability Pool
 Rangely District Hospital
 225 Eagle Crest St
 Rangely, CO 816483105

Policy: 31C22009-154 VIN: 1FDXF47R48ED10090
 Effective Date: 1/1/2018 Expiration Date: 1/1/2019
 Year/Make/Model: 2008 / Ford / Ambulance
 This card must be carried in the vehicle at all times as evidence of coverage.

Certificate of Motor Vehicle Condition

Owner: Rangely District Hospital

Year/Make: Ford F-450 Unit MS-4

VIN: 1FDXF47R48ED10090

Mileage: 94,323.2

EVALUATION CHECK LIST

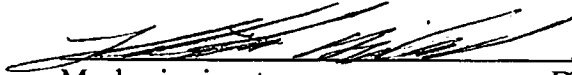
ITEM	ACCEPTABLE	NOT ACCEPTABLE	COMMENTS
Wheels and tires	✓		
Steering, alignment and suspension	✓		
Brakes	✓		
Lighting and electrical system	✓		
Exhaust system	✓		
Fuel system	✓		
Glass, body and sheet metal	✓		

As a qualified motor vehicle mechanic, I have evaluated the mechanical condition of the described vehicle and have determined that the vehicle is in safe operating condition as of this date. This evaluation does not warrantee future status of the vehicle operating condition due to conditions beyond my control.

Rangely EMS Maint. Department
Company, Shop or Agency name

225 Eagle Crest Drive, Rangely, CO 81648
Address

Ketchum Millard
Mechanic name (print or type)


Mechanic signature

3/7/18
Date

3:46 PM
03/13/18
Accrual Basis

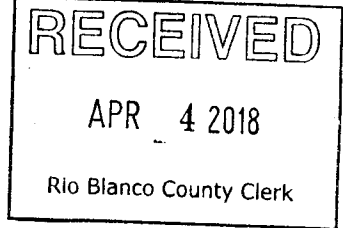
**RANGELY DISTRICT HOSPITAL
AMBULANCE
January through December 2017**

	<u>Jan - Dec 17</u>	<u>Budget</u>	<u>\$ Over Budget</u>
Ordinary Income/Expense			
Income			
OUTPATIENT REVENUE			
3210600 · Ambulance	264,783	242,039	22,744
Total OUTPATIENT REVENUE	264,783	242,039	22,744
INPATIENT ACUTE REVENUE			
3210300 · Ambulance	0	17,846	-17,846
Total INPATIENT ACUTE REVENUE	0	17,846	-17,846
Total Income	264,783	259,885	4,898
Gross Profit	264,783	259,885	4,898
Expense			
SALARIES & BENEFITS			
SALARIES			
6210100 · Salaries - EMS	162,087	123,247	38,840
Total SALARIES	162,087	123,247	38,840
Total SALARIES & BENEFITS	162,087	123,247	38,840
PROFESSIONAL FEES			
6210600 · PF - EMS Physician Advisor	3,000		
Total PROFESSIONAL FEES	3,000		
MEDICAL SUPPLIES			
6210705 · Supplies - EMS	7,287	8,600	-1,313
Total MEDICAL SUPPLIES	7,287	8,600	-1,313
TRAVEL & MTGS			
6210406 · Training - Ambulance	2,367	9,000	-6,633
6210901 · Travel - Ambulance Meals	3,754	5,000	-1,246
6210902 · Travel - Ambulance	2,990	3,900	-911
6210904 · Travel-Ambulance Lodging	164	1,500	-1,336
Total TRAVEL & MTGS	9,275	19,400	-10,125
OTHER OPERATING EXPENSES			
Office Supplies			
6210801 · Off Sup - Ambulance	4,256	1,200	3,056
Total Office Supplies	4,256	1,200	3,056
Dues & Subs.			
6210903 · D&S - EMS	300	400	-100
Total Dues & Subs.	300	400	-100
NONMED SUPP			
6210807 · Other Sup - EMS	3,200	2,000	1,200
6210808 · Other Sup - EMS Gas/Auto	3,537	3,900	-363
Total NONMED SUPP	6,736	5,900	836
SERVICE CONTRACTS			
6210501 · Svc Contract - Ambulance	2,295		
Total SERVICE CONTRACTS	2,295		
MAINTENANCE & REPAIRS			
6210502 · M&R - Ambulance	6,888	1,400	5,488
Total MAINTENANCE & REPAIRS	6,888	1,400	5,488
Total OTHER OPERATING EXPENSES	20,475	8,900	11,575
NON OPERATING EXPENSE			

3:48 PM
 03/13/18
 Accrual Basis

**RANGELY DISTRICT HOSPITAL
 AMBULANCE
 January through December 2017**

	<u>Jan - Dec 17</u>	<u>Budget</u>	<u>\$ Over Budget</u>
TAXES & OTHER FEES			
6210909 · Taxes - Ambulance Licenses	11		
Total TAXES & OTHER FEES	<u>11</u>		
Total NON OPERATING EXPENSE	<u>11</u>		
Total Expense	<u>202,135</u>	<u>160,147</u>	<u>41,988</u>
Net Ordinary Income	<u>62,648</u>	<u>99,738</u>	<u>-37,090</u>
Other Income/Expense			
Other Income			
NON OPERATING REVENUE			
9500026 · Other Rev - EMT Training Fees	195	11,300	-11,105
9500025 · Other Rev - CPR Training Fees	12,079	10,200	1,879
Total NON OPERATING REVENUE	<u>12,274</u>	<u>21,500</u>	<u>-9,226</u>
Total Other Income	<u>12,274</u>	<u>21,500</u>	<u>-9,226</u>
Net Other Income	<u>12,274</u>	<u>21,500</u>	<u>-9,226</u>
Net Income	<u><u>74,922</u></u>	<u><u>121,238</u></u>	<u><u>-46,316</u></u>



Application for Ambulance Vehicle Permit

1. Name of Ambulance Service:

Rangely District Hospital Ambulance

2. Type of permit (check one): BLS ambulance ALS ambulance.

3. Contact information for ambulance owner:

Name: Rangely District Hospital
Address: 225 Eagle Crest Drive
City: Rangely State: CO ZIP: 81648
Telephone: 970-675-5011 (business) (fax)
E-mail:

4. Contact information for the person applying for the license:

Name: Shanna Kinney
Mailing address: 225 Eagle Crest Drive
Physical address: 225 Eagle Crest Drive
City: Rangely State: CO ZIP: 81648
Telephone: 970-675-4218 (business) 970-675-4283 (fax)
Telephone: 970-629-9494 (cell) pager 500 (pager)
E-mail: skinney@rdhosp.org

5. Ambulance information:

Chassis year: 2010 Make: FORD Model: F450
VIN: 1FDAF4HR4AEB16380 License plate: 635-IUR
Ambulance type (check one): I II III Other
Date in service (month/year): 06/2010
Color: White with blue beltline stripe, blue lettering
Other distinguishing characteristics:
White reflective snake and staff

6. Waiver of fees (check one, if applicable):

Renewal permit for an ambulance operated by:

- a county government.
- a special district.
- a town or city government.
- other government or political subdivision.
- a not-for-profit corporation.
- a volunteer ambulance service.

Replacement of an ambulance with a current permit:

- accidental loss.
- retirement.

VIN of ambulance lost or retired:

Attach additional required documents to this application (see instructions for requirements).

EMS Services

Eric Thomas Schmidt • Post Office Box 775518 • Steamboat Springs, Colorado 80477 • 719.330.1214 • Emssvcs@aol.com

AMBULANCE CERTIFICATION

I certify that the vehicle described herein has been inspected and meets the requirements for an advanced-life-support-equipped ambulance set forth by the Rio Blanco County Board of Commissioners and the State of Colorado.

Inspector's
Signature



Date

19 February 2017

Name of Service:

Rangely District Hospital

Address:

225 Eagle Crest Drive
Rangely, Colorado 81648

Ambulance Type:

I

Chassis Year and Make:

2010 Ford

Body/Conversion Manufacturer:

LifeLine

Vehicle Identification Number:

1FDAF4HR4AEB16380

License Number:

635-IUR

Unit Number:

MS2

COLORADO REGISTRATION/OWNERSHIP TAX RECEIPT

594 PAGE 473

TYPE	PLATE	TAB/VAL	VIN			BOOK	PERM.
PAS-CNY	635IUR	635IUR	1FDAF4HR4AEB16380				
TITLE	YR	MAKE	BODY	CWT/PAS	T/C	FLEET#	FUEL
49E200477	2010	FOR	AM	20			D 07/2014
PUR. DATE	PUR. PRICE	ORIGINAL TAXABLE VALUE		BUS. DATE	CO #	UR/CODE	
05/26/2010	145011.00	123,259		07/29/2014	49 U	24U	
EM. FEE	TITLE FEE	PRIOR O.T.	OWN TAX	LIC. FEE	ROAD FEE	BRIDGE FEE	
0.00	0.00	0.00	0.00	0.00	0.00	0.00	
RTD TAX	COUNTY TAX	CITY/DIST TAX	STATE TAX	SPECIAL FEE	OTHER FEE		
0.00	0.00	0.00	0.00	0.00	0.00		
UNIT #	GVW	MILES	HI GVW	HC DATE			

OWNER NAME/MAILING ADDRESS

*FEES IN BOLD INCLUDED IN LIC FEE

RANGELY DISTICT HOSPITAL

225 EAGLE CREST DR
RANGELY CO 81648

VALIDATION	TOTAL
PAID RIO BLANCO 10 07/29/2014 155735JGT R01	0.00

Colorado Auto Liability Coverage Identification Card

3

Colorado Special Districts Property and Liability Pool

Rangely District Hospital
225 Eagle Crest St
Rangely, CO 816483105

Policy: 31C22009-154 VIN: 1FDAF4HR4AEB16380

Effective Date: 1/1/2018 Expiration Date: 1/1/2019

Year/Make/Model: 2010 / Ford / Ambulance

This card must be carried in the vehicle at all times as evidence of coverage.

Certificate of Motor Vehicle Condition

Owner: Rangely District Hospital

Year/Make: Ford F-450 Unit MS-2

VIN: 1FDAF4HR4AEB16380

Mileage: 29,248.3

EVALUATION CHECK LIST

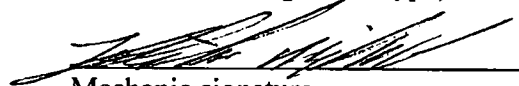
ITEM	ACCEPTABLE	NOT ACCEPTABLE	COMMENTS
Wheels and tires	✓		<i>Brand new tires</i>
Steering, alignment and suspension	✓		
Brakes	✓		
Lighting and electrical system	✓		
Exhaust system	✓		
Fuel system	✓		
Glass, body and sheet metal	✓		

As a qualified motor vehicle mechanic, I have evaluated the mechanical condition of the described vehicle and have determined that the vehicle is in safe operating condition as of this date. This evaluation does not warrantee future status of the vehicle operating condition due to conditions beyond my control.

Rangely EMS Maint. Department
Company, Shop or Agency name

225 Eagle Crest Drive Rangely, CO 81648
Address

Ketchum Millard
Mechanic name (print or type)


Mechanic signature

3/2/18
Date

State of Colorado, County of Rio Blanco
BY AUTHORITY OF THE BOARD OF COUNTY COMMISSIONERS

AMBULANCE PERMIT #2018-1

This is to certify that

Rangely District Hospital Ambulance Service

IS HEREBY authorized to operate an Advanced Life Support Ambulance in Rio Blanco, Colorado, pursuant to the Rio Blanco County Ambulance Resolution #2006-34 and the laws of the State of Colorado, for a period of one year, under Ambulance Service License #2018-1.

Vehicle Description: 2017 Ford F450, 1FDUF4HT8HDA01967, License #JOO-404

This license is issued subject to the laws of the State of Colorado and especially under the provisions of Article 46 and 47 of Title 12, Colorado Revised Statutes, as amended.

IN TESTIMONY WHEREOF, the Board of County Commissioners has hereunto subscribed its name by its officers duly authorized this 16th day of April 2018.

Attest:

Torrie Cook
Torrie Cook, Chief Deputy

Board of County Commissioners

Shawn J. Bolton
Shawn J. Bolton, Chairman

This permit expires on April 15, 2019.

This permit must remain in the ambulance and is not transferable.

State of Colorado, County of Rio Blanco
BY AUTHORITY OF THE BOARD OF COUNTY COMMISSIONERS

AMBULANCE PERMIT #2018-2

This is to certify that

Rangely District Hospital Ambulance Service

IS HEREBY authorized to operate an Advanced Life Support Ambulance in Rio Blanco, Colorado, pursuant to the Rio Blanco County Ambulance Resolution #2006-34 and the laws of the State of Colorado, for a period of one year, under Ambulance Service License #2018-1.

Vehicle Description: 2008 Ford F450, 1FDXF47R48ED10090, License #693-IUR

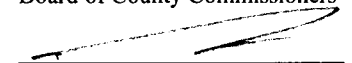
This license is issued subject to the laws of the State of Colorado and especially under the provisions of Article 46 and 47 of Title 12, Colorado Revised Statutes, as amended.

IN TESTIMONY WHEREOF, the Board of County Commissioners has hereunto subscribed its name by its officers duly authorized this 16th day of April 2018.

Attest:


Torrie Cook, Chief Deputy

Board of County Commissioners


Shawn J. Bolton, Chairman

This permit expires on April 15, 2019

This permit must remain in the ambulance and is not transferable.

State of Colorado, County of Rio Blanco
BY AUTHORITY OF THE BOARD OF COUNTY COMMISSIONERS

AMBULANCE PERMIT #2018-6

This is to certify that

Rangely District Hospital Ambulance Service

IS HEREBY authorized to operate an Basic Life Support Ambulance in Rio Blanco, Colorado, pursuant to the Rio Blanco County Ambulance Resolution #2006-34 and the laws of the State of Colorado, for a period of one year, under Ambulance Service License #2018-1.

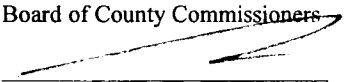
Vehicle Description: 2010 Ford F450, 1FDAF4HR4AEB16380 #635-IUR

This license is issued subject to the laws of the State of Colorado and especially under the provisions of Article 46 and 47 of Title 12, Colorado Revised Statutes, as amended.

IN TESTIMONY WHEREOF, the Board of County Commissioners has hereunto subscribed its name by its officers duly authorized this 16th day of April 2018.

Attest:


Torric Cook, Chief Deputy

Board of County Commissioners

Shawn J. Bolton, Chairman

This permit expires on April 15, 2019.

This permit must remain in the ambulance and is not transferable.

This License Expires the 15th of April 2019

No. 2018-1

License Fees \$.00

State of Colorado, County of Rio Blanco
BY AUTHORITY OF THE BOARD OF COUNTY COMMISSIONERS

Advance Life Support
Ambulance Service License
Rangely District Hospital
Ambulance Service

This is to certify that

IS HEREBY authorized to operate as an Advanced Life Support Ambulance Service in Rio Blanco County, Colorado, pursuant to the Rio Blanco County Ambulance Resolution #2006-34 and the laws of the State of Colorado, for a period of one year.

IN TESTIMONY WHEREOF, the Board of County Commissioners has hereunto subscribed its name by its officers duly authorized this 16th day of April 2018.

Attest:

Boots M. Campbell
Boots M. Campbell, County Clerk



Board of County Commissioners

[Signature]
Shawn J. Bolton, Chairman

This license is not transferable.

