



To: Fire Chief City of Riverside.

From: American Medical Response Ambulance Service, Inc.

Date: 5/29/2018

Re: Application for Medical Transport Ambulance Franchise.

Attached you will find the Renewal Application Packet for American Medical Response. The document(s) in section B (3 and 6) are on file at Riverside headquarters if you wish to review. Please do not hesitate to reach out to us if you have any questions.

Thank you,

Darrena Devine
Executive Assistant to Doug Key
(951)782-5218
Darrena.devine@amr.net

CITY OF RIVERSIDE
FIRE DEPARTMENT

MAY 30 2018

RECEIVED

PAYEE: RIVERSIDE CITY (CA)			CHECK NUMBER: 4341039154	CHECK DATE: 23-MAY-2018	
INVOICE NUMBER	INVOICE DATE	DESCRIPTION	NET AMOUNT	DISCOUNT	EXTENDED AMOUNT
1007822051118	11-MAY-2018	SH P70445	1,858.00	.00	1,858.00
<p style="text-align: right;">CITY OF RIVERSIDE FIRE DEPARTMENT MAY 30 2018 RECEIVED</p>					

DOCUMENT HAS A COLORED BACKGROUND. A WATERMARK IS VISIBLE WITHIN THE PAPER.

AMR HOLDCO, INC
8363 S Fiddlers Green Cir, 14 Floor
Greenwood Village, CO 80111
888-339-0911

Bank of America.

90-4182
1211 GL

CHECK DATE

CHECK NUMBER

23-MAY-2018

4341039154

PAY: One Thousand Eight Hundred Fifty-Eight Dollars And Zero Cents*****

CHECK AMOUNT

***\$1,858.00

TO THE
ORDER
OF

RIVERSIDE CITY (CA)
3900 MAIN ST
FINANCE DEPT
RIVERSIDE , CA 92522
United States


VOID AFTER 90 DAYS

⑈4341039154⑈ ⑆121141822⑆ 007313126434⑈

MAY 30 2018

RECEIVED

CITY OF RIVERSIDE
Application for Medical Transport Ambulance Franchise

Subject to limited exceptions, Section 5.66.020 of the Riverside Municipal Code mandates that it shall be unlawful for any person, either as owner, agent or otherwise, to operate, conduct, maintain, advertise or be engaged in or profess to be engaged in the operation of ambulance services in the City, except in conformance with a valid franchise to do so granted by the Council. Pursuant to Section 5.66.040, prerequisites to the granting of a franchise or an extended term of an existing franchise to an applicant shall include the filing with the administrator of an application.

Chapter 5.66 of the Riverside Municipal Code governing Ambulances may be found online at <http://www.riversideca.gov/municode/pdf/05/5-66.pdf>.

APPLICATION FEE: The fee of \$1,858.00 is required with any medical transport ambulance franchise application. Payment must be made at the time of submittal with the City of Riverside as the payee. Per Resolution 22904, adopted September 8, 2015.

INSTRUCTIONS: Please type or print clearly in ink. If additional space is necessary to complete any answer, please complete on additional sheet(s) indicating question number being answered. Reference to any attachments/exhibits must be clearly identified in this application and properly labeled.

☐ New Application ☒ Renewal ☐ Amendment

**SECTION A – PLEASE FULLY ANSWER THE FOLLOWING
QUESTIONS****1. Name and description of applicant:**

American Medical Response Ambulance Service, Inc.

2. Business address and residence address of record of the applicant:

879 Marlborough Avenue, Riverside CA 92507

3. Trade or firm name, or DBA as recorded:

American Medical Response (AMR)

4. If a corporation, a joint venture or a partnership or limited partnership, the names of all corporate officers, joint ventures or partners, including limited partners, and their permanent addresses and their percentage of participation in the business:

5. For new applicants only, please provide a statement of facts explaining the past experience of the applicant in the operation of an ambulance service, including the levels of service provided, and showing that the applicant is qualified to render efficient twenty-four-hour ambulance service:

6. Describe in detail the geographical operating area within the City for which the franchise is requested:

Riverside City

7. List the level or levels of service which the applicant proposes to provide:

ALS, BLS, CCT

8a. Does applicant own or will have under applicant's control all equipment required to conduct an ambulance service competently in the operating area for which you are or propose to be franchised, which meet the requirements established by the California Vehicle Code if applicable?

☒ YES ☐ NO

8b. Does applicant own or have access to suitable and safe facilities for maintaining your ambulance service in a clean, sanitary and mechanically sound condition?

☒ YES ☐ NO

If "YES", list each location for maintaining ambulances:

879 Marlborough Avenue, Riverside CA

9. List each ambulance vehicle operated by the applicant, including the patient capacity thereof, which list shall be promptly amended as required from time to time for any changed, substituted, loaned or leased vehicles.

On file at AMR office at 879 Marlborough Avenue, Riverside CA

AMR provides service throughout the County for both Emergency and Non-Emergency

BLS, ALS and CCT transport. As such the list of vehicles is exhaustive and available for review at its offices for inspection.

☒ YES ☐ NO

THE RIVER



FIRE

13. List a proposed schedule of rates to be charged by the applicant for ambulance services:

14. Have any ambulances operated by applicant been taken out of service for safety or other reasons by the California Highway Patrol, any other California law enforcement agency, or any governmental agency?

☐ YES ☒ NO

If "YES", please explain:

15. Has applicant, or any partner, officer, or director of applicant thereof, been previously the holder of a franchise granted by the Council or Ambulance Administrator which was revoked or not extended?

☐ YES ☒ NO

If "YES", please explain and describe if the circumstances upon which the revocation or non-extension was based have not been corrected:

16. Has applicant, or any partner, officer, or director of applicant thereof, committed any act involving dishonesty, fraud, or deceit whereby another person was injured or the applicant has unjustly benefited?

☐ YES ☒ NO

If "YES", please explain:

17. Has applicant, or any partner, officer, or director of applicant thereof, provided or is applicant currently providing ambulance service within the City without having a franchise therefore as required by this chapter?

☐ YES ☒ NO

If "YES", explain:

18. Has applicant, or any partner, officer, or director of applicant thereof, entered a plea of guilty to, been found guilty of, or been convicted of a felony, or a crime involving moral turpitude?

☐ YES ☒ NO

If "YES", name the person convicted, briefly describe the nature of the crimes, the date and place of the conviction and legal disposition of the case:

19. Has applicant received any customer service complaints (any expression of dissatisfaction, whether oral or written, and whether justified or not, from or on behalf of a complainant about the applicant's provision of, or failure to provide, ambulance service) in the past 24 months?

☒ YES ☐ NO

If "YES", please explain:

AMR has a robust program for dealing with customer complaints, complaints can range from billing complaints to service issues.

All complaints are logged and investigated. Please see the attached Annual Performance Report or a detailed review of complaints received.

20. Describe all vehicular accidents involving applicant's ambulances in the past 24 months?

Please see the attached Annual Performance report.

21. Describe all occurrences in the past 24 months that involved failures of equipment or vehicles that occurred during patient delivery.

See email COVER.

NOTE: The City reserves the right to request additional information as it may deem necessary to make a determination on the application for an ambulance franchise.

**SECTION B – PLEASE ATTACH THE FOLLOWING DOCUMENTS
TO THIS APPLICATION**

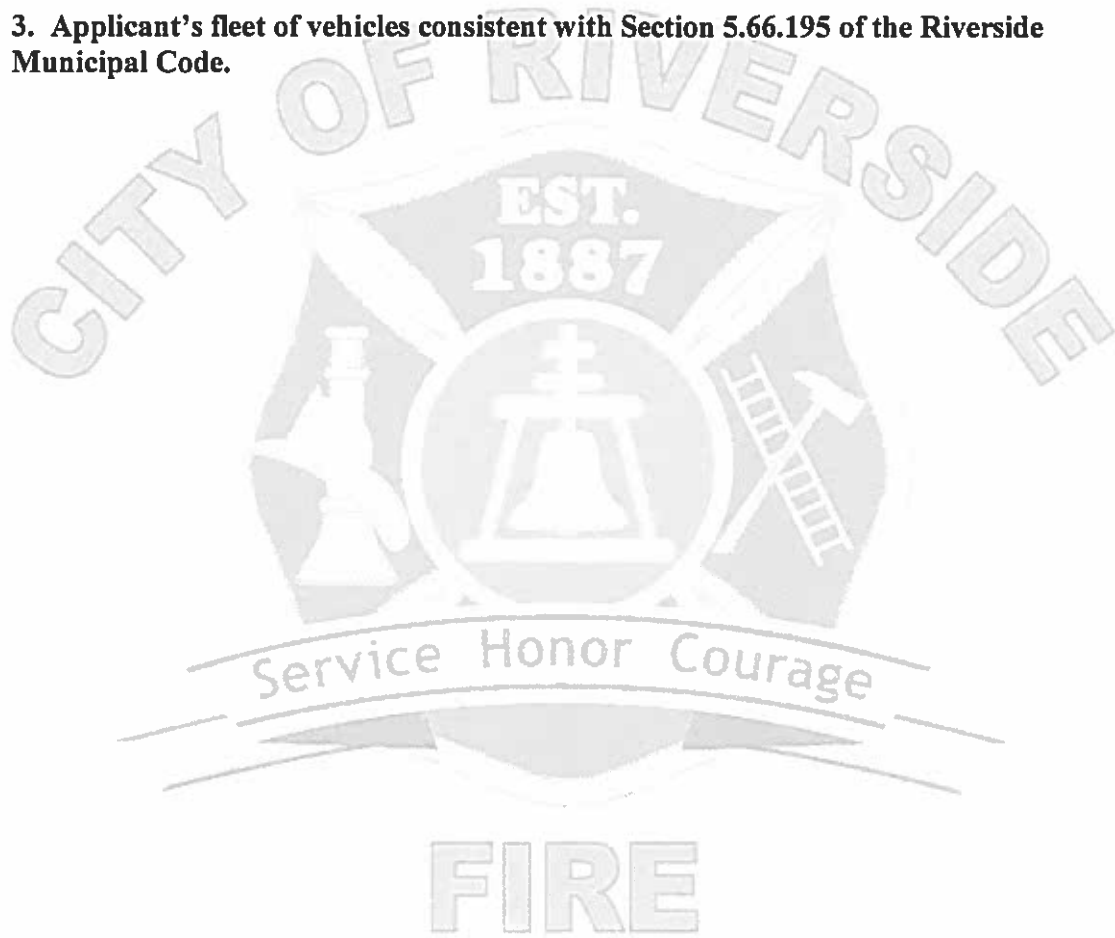
1. A photocopy of the license(s), if any, issued by the Commissioner of the California Highway Patrol to the applicant in accordance with § 2501, California Vehicle Code and Title 13, California Code of Regulations.
2. Verification of current accreditation with the Commission on Accreditation of Ambulance Services (“CAAS”).
3. A copy of the most recent Ambulance Inspection Report, if any, issued by the California Highway Patrol and County of Riverside for each vehicle identified in Question # 9 above.
4. A copy of motor vehicle inspection and maintenance program, if any.
5. A copy of mutual aid policies and provide a list of mutual aid agreements/providers, if any.
6. A copy of response time reports for the last two years that identify when the request for service was received, the time the unit was promised/requested, and the actual time the unit arrived at scene.
7. A copy of the preventive maintenance program for vehicles and durable medical equipment, if any.

NOTE: All applicants must have a valid Business Tax Certificate issued by the City to conduct business in the City of Riverside in addition to a franchise. A Business Tax Certificate may be obtained from Business Tax Section in City Hall after the franchise has been approved.

NOTE: All applicants are required to have insurance coverage which meets the requirements of the City. Applicant shall submit to the City’s Risk Manager evidence of insurance coverage as required by Section 5.66.060(E) before the franchise can be issued.

SECTION C – PLEASE HAVE AVAILABLE FOR REVIEW

- 1. A copy of each certificate or license issued by the State, County, or local EMS Agency establishing qualifications of such personnel in ambulance operations identified above in Section A, Question 12.**
- 2. A photocopy of a valid DMV license for each personnel in ambulance operations identified above in Section A, Question 12.**
- 3. Applicant's fleet of vehicles consistent with Section 5.66.195 of the Riverside Municipal Code.**



DECLARATION UNDER PENALTY OF PERJURY

I hereby declare under penalty of perjury under the laws of the State of California that the foregoing information in this application is true and correct to the best of my knowledge. Applicant signifies by signing this application that the applicant agrees to meet the requirements of the Riverside Municipal Code if the franchise is granted by the City Council.

As a condition of the Council's granting a franchise, applicant hereby agrees that it will appear in and defend all actions against the City and Council arising out of the exercise of the franchise, and shall indemnify, defend, and save the City and its officers, employees and agents harmless of and from all claims, demands, actions, or causes of action of every kind and description resulting directly or indirectly from, arising out of, or in any way connected with, the granting or exercise of the franchise, unless this would create a conflict of interest.

Additionally, pursuant to Riverside Municipal Code Section 5.66.020(C), this applicant recognizes that it shall be unlawful to refuse or decline to transport a patient in response to a medical request, including due to an actual or perceived inability of the patient to pay for ambulance services. This applicant possesses the ability and commitment to transport all patients in response to medical requests.

I confirm that I have authority to sign on behalf of the legal entity designated as applicant.

Executed on 5/30/18 at Riverside, California.
(date) (city)

[Signature]
SIGNATURE

DOUG KEY
PRINTED NAME

REGIONAL DIRECTOR
TITLE

Submit application and all attachments, including certificate of insurance, and a check or money order payable to the City of Riverside to:

Fire Chief
City of Riverside Fire Department
3401 University Avenue
Riverside, CA 92501

Please direct any questions to (951) 826-5321.

Hearn, Lawayne

From: Key, Douglas <Douglas.Key@amr.net>
Sent: Monday, June 4, 2018 9:53 AM
To: Hearn, Lawayne
Subject: [External] Amended questions
Attachments: Annual Report 2017.docx

LaWayne,

I have attached the annual performance report that we turn into the County each year. This report covers much more than what is required by the franchise application. This information covers the entire county.

Regarding question 20, please note the section on vehicle safety. The AMR fleet traveled over 6.5 million miles and for the period of 1 year we had 17 vehicle contacts which results in the fleet traveling in excess of 385K miles between contacts. As you probably realize this includes contacts regardless of fault. In the vast majority of these AMR was not at fault.

Question 21: There were no critical equipment failures during this time period.

For Question 19, AMR had 343 patient complaints on over 160,000 transports. The top 3 complaints were billing complaints encompassing billing wrong patient, cash or refund issue and incorrect charges. Complaints are logged as they are received and then an investigation is completed and the findings are logged.

Let me know if this addresses the issues for the Public Safety Committee.

Doug Key
Regional Director
AMR Riverside County



Annual Performance Report

Performance Period: July 1, 2016- June 30, 2017

Responses, Transports and Response Time Performance

Previously submitted in AMR's monthly compliance reports

Patient Satisfaction Survey

Please find attached the summary report for patient satisfaction. AMR has implemented a 14 question standardized report that is being used in operations across AMR. AMR has developed a questionnaire based upon Hospital satisfaction scoring models and has benchmarked our performance compared to hospital performance. We are proud to receive scores in most of the applicable categories that are higher than the nationally reported hospital scores. Reports are gathered quarterly and we trend our performance and benchmark against other AMR sites. This data is being used to guide our customer experience training and influence our CE training.

Customer Service

Please find attached the evaluation tool. AMR has used an online survey to gather the results from our customers. Customers include fire agencies, municipalities. AMR sent out over 20 surveys to various agencies and stakeholders. We received 4 responses. This survey will be done annually and trended to assure that we are meeting the needs of our community partners.

Billing Complaints

Please find attached the spreadsheet showing the billing complaints received during the performance period. Billing complaints are extraordinarily low, averaging 0.2%. (Billing complaint/ transports). The top 3 complaints were billing wrong patient, Cash or refund issue, incorrect charges. All reasons are summarized in the attached report.

Workforce satisfaction and Turnover

Workforce Satisfaction

Please find attached the latest AMR Employee Satisfaction survey and the results. These surveys are conducted annually and trended. This survey is the second of this performance contract. We have instituted a number of employee initiatives and will then track the survey response to demonstrate progress.

AMR turnover (tracked on a quarterly basis)

July –Sept 2015	4.5%
Oct – Dec 2015	3.5%
Jan – Mar 2016	4.7%
April – June 2016	3.5%

Top 3 Reasons for leaving

34%	Accepted job with Fire Department
10%	Return to School
7.5%	Career change

Turnover was up year over year due to recent fire department hiring. AMR has instituted a paramedic scholarship program and currently has 35 EMT's enrolled in sponsored training in which AMR is paying tuition. We have also enrolled 11 EMT's in a full time program for which AMR is paying their salary while they attend a full time paramedic program to more quickly move them through the process and aid us in filling open vacancies. AMR will continue our paramedic sponsorships during the nationwide shortage of paramedics.

AMR is also offering sign on bonuses, paramedic upgrade bonuses and in certain locations relocation bonuses to attract candidates.

Vehicle and Equipment Performance and Safety

AMR Riverside County drove 6,500,002 miles in the performance period July 1, 2016 – June 30, 2017

The fleet experienced 17 vehicle contacts during the period resulting in 382,356 miles per contact

This is a 7.5% increase in miles driven per contact, resulting in an improving safety record while driving nearly 1.2 Million more miles.

Employee Injuries and Exposures

76 injuries were reported during the performance period July 1, 2016- June 30, 2017

Compared to 74 injuries for the prior year period

The three most common injuries were:

Strain/Sprain	54%
Contusion/Bruise	12%

Muscle soreness 8%

19 Exposures were reported for the period July 1, 2016 – June 30, 2017

Compared to 17 for the prior year period, AMR is making exposure prevention one of the topics for our upcoming mandatory training in the fall.

Deployment and Unit Hours

AMR has provided both deployment plans and scheduled unit hours. We have implemented a new process, accessing a program called Operational Performance Analytics Program (OPAP). This tool allows us to constantly analyze demand and staffing to better assist with seasonal fluctuation.

Mental Health Services

AMR Riverside 5150 transports by zone for the performance period July 1, 2015 – June 30, 2016

ZONE	TRANSPORTS	PERCENTAGE of TOTAL
Central Zone	2340	18
Desert Zone	3,639	28
Mountain	32	0.2
Northwest	2350	18
Pass	717	5.5
San Jacinto/Hemet	1,815	13.9
Southwest	2,022	15.6
Palo Verde	107	0.8
Total Transports	13,022	100

5150 transports were down by about 400 transports year over year. AMR is working with mental health to develop a crisis response unit to aid officers in not writing 5150's and transporting patients to voluntary treatment centers rather than emergency departments.

37.3% of 5150 transports were from Law enforcement or fire agencies, the majority were from healthcare facilities.

High Users of 9-1-1 Services

AMR has developed a data retrieval program that allows us to data mine the users of the system to identify patients who are heavy users of 911 services. The effort is designed to determine if there are services or education that can be provided to individuals that would lessen the usage of emergency services for patients with chronic medical conditions. This is a new initiative, that in cooperation with REMSA, we hope will help reduce healthcare expenditures. In this next contract year, AMR will coordinate with REMSA to identify patients that are candidates for this outreach program.

Community Education

AMR is actively involved in community activities and education. Please find below a summary by zone identifying the hours of community support and education that we have provided to the communities we serve during the performance period.

In the education of our community partners we have supplied the following hours:

NW Zone:	699 hours
SW Zone:	85 hours
San J – Hemet Zone:	118 hours
Desert Zone:	320 hours
Central Zone:	240 hours
Riverside County:	192 hours unattributed to any one zone

These hours are made up of continuing education courses that we supply free of charge to our community partners.

Additionally we supply the following hours in Community education and support:

NW Zone:	45 hours
SW Zone:	16 hours
San J-Hemet Zone:	196 hours TEMS unit contribution
	14 hours Sherriff and Fire Department support
Pass	154 hours
Desert Zone:	508 hours
Central Zone:	120 hours
Mountain Zone:	19 hours Community Health Visits
	24 hours Community CPR

Pale Verde Zone: 190 hours

Community Health Fairs and educational programs

NW Zone: 438 hours

SW Zone: 479 hours

San J- Hemet Zone: 322 hours

Desert Zone: 160 hours

Central Zone: 49 hours

Mountain Zone: 32 hours

These hours are made up of health fairs, CPR training, Health education visits and other Health awareness programs.

Total Community Partner Education/Training/Support

NW Zone 1182 hours

SW Zone 580 hours

San J/Hemet Zone 650 hours

Desert Zone 988 hours

Central Zone 409 hours

Pass Zone 154 hours

Mountain Zone 75 hours

Pale Verde Zone 190 hours

TOTAL 4,228 hours

AMR has increased its community support/education hours by 30% compared to the last performance period.

Completed System Improvements

As per the Agreement, AMR has upgraded any vehicle over 250,000 miles with a Type III Ambulance. Currently the fleet is at 56.5% Type III vehicles.

Cost: \$3.5M

As per the Agreement, AMR must replace technology on a 5 year refresh basis. During this performance period AMR has spent the following amounts on upgrades:

Mobile Data Terminal Replacement:	\$193,259
Computer Aided Dispatch upgrade:	\$293,838
Vehicle modems:	\$140,000

AMR has stationed a 24/7 ALS 4x4 Type 1 ambulance in Pine Cove. In this performance year we have upgraded this unit to a new Type I Ambulance replacing the previous 4x4 unit which was a place holder until a new unit could be built. AMR is also placing a new 4x4 unit in our Anza station, which will result in complete 4x4 coverage to the mountain zone.

Cost: \$150,000 per vehicle

AMR Mobile Training Unit: AMR has placed into service a mobile training unit with a high fidelity manikin used to simulate more realistic training scenarios. The MTU will be offered to all community partners as well as AMR personnel. The unit also contains cameras and monitors to allow students to watch interactions while outside of the vehicle to enhance the student experience. Further it is stocked with 2 CPR manikins designed to test and provide feedback to healthcare professionals on effective CPR.

Cost: \$180,000

AMR agreed to help Soboba Fire with their ALS program. We have used our purchasing power to buy LifePak 15's for Soboba Fire as well as support their training and system processes. This includes providing medical direction and CQI processes.

AMR has implemented Image Trend ePCR. This project required additional expense for AMR including purchasing new modems for the vehicles as Image Trend Elite requires 4 G modems. We also spent much more than anticipated on the CAD interface and back end billing interfaces. Implementation required additional personnel to be stationed at hospitals and on duty to aid personnel in the initial days of roll out.

Modem costs:	\$140,000
CAD and billing integration costs:	\$124,000
Mandatory training:	\$83,200
Additional Training personnel:	\$20,000
Additional equipment costs:	\$11,000
Total Cost	\$378,200

AMR has purchased 20 AED's to be placed in public buildings to support the Riverside County Public Access Program. These units are provided, maintained and trained by AMR personnel to those facilities designated by REMSA.

Cost: \$41,900 for equipment, with an additional cost of \$4,000 personnel costs

AMR was the major sponsor of the Inland Empire March of Dimes for this year's March for Babies campaign, raising over \$75,000 and participating in a number of March of Dime's educational events throughout the County.

AMR is a major supporter of the Toys4Tots campaign and collects over 6,000 toys each year for needy families.

AMR has trained more than 7,500 citizens in Hands only CPR. AMR personnel have trained more the 10% of the population of Blythe in Hands only CPR. AMR plans to make citizen CPR and early defibrillation a major educational effort for the upcoming year.

AMR has dedicated Two (2) Citizen CPR training units to the fleet. These units are fully stocked with all supplies necessary to conduct Compression only training to any group or organization. AMR has hired a full time CPR coordinator to do community outreach and schedule training classes, including a dedicated CPR hotline for scheduling classes.

Cost: \$100,000

Pechanga response time has been changed from 20 minutes to 14 minutes beginning July 1, 2016. The zone has been in compliance for the full year and has exceeded 91% for 10 or 12 months.

AMR continues to provide Community support to the residents of Pine Cove. During the performance year AMR made 31 home visits. Services include monitoring medication compliance, treatment goals and population health for those households.

AMR responded to 95 911 calls in the Pine Cove area and transported 64 patients during the performance period.



STATE OF CALIFORNIA
DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

**EMERGENCY AMBULANCE
NON-TRANSFERABLE LICENSE**

CHP 360A (REV. 01-00) OPI 062

SERVICE NAME AND PHYSICAL ADDRESS *(only if different from below)*

AMERICAN MEDICAL RESPONSE AMBULANCE SERVICE, INC.
AMERICAN MEDICAL RESPONSE

, CA

SERVICE NAME AND MAILING ADDRESS

AMERICAN MEDICAL RESPONSE AMBULANCE SERVICE, INC.
AMERICAN MEDICAL RESPONSE
4846 STRATOS WAY
MODESTO, CA 95356
Attention: SIMONE JOHNSON

CONTROL NUMBER	LICENSE NUMBER	ISSUE DATE	EFFECTIVE DATE	EXPIRATION DATE
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2155

2155

3/6/2018

3/6/2018

3/5/2019

CHP CARRIER NUMBER

LOCATION

☐ Duplicate

☐ Replacement

CA

465

☒ Initial

☐ Renewal

PROPERTY OF THE CALIFORNIA HIGHWAY PATROL (CHP)

This license is NON-TRANSFERABLE and must be surrendered to the CHP upon demand or as required by law. A majority change in ownership or control of the licensed activity shall require a new license. This license may be renewed within the 30-day period prior to the expiration date indicated above.

Ambulance operations must cease immediately upon expiration of this license. THERE IS NO GRACE PERIOD FOR A LICENSED ACTIVITY. The Department will accept an application for renewal during the 30-day period following the license expiration date provided all required documentation is complete and accompanied by the initial license fee of \$200.00. For license information contact CHP, Research and Planning Section at (916) 843-3440.

Riverside
San Diego
Ventura

All the same CHP License

The Commission on Accreditation of Ambulance Services

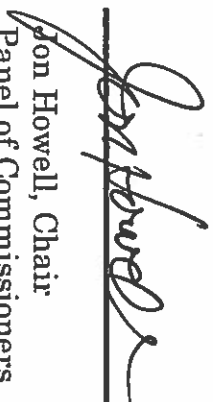
Certificate of Accreditation

American Medical Response – Riverside County, California
Riverside, California

The Commission on Accreditation of Ambulance Services presents this certificate of Accreditation in recognition of this service's voluntary compliance with the Commission's high standards. These standards have been established to encourage and promote improved quality patient care in the medical transportation system. This service has successfully completed a comprehensive external review to verify compliance with these national standards.

Issued: April, 2018

Expires: April 30, 2021


Don Howell, Chair
Panel of Commissioners




Kathy Rinnert, MD, FACP, Chair
Board of Directors



AMERICAN MEDICAL RESPONSE

Fleet Maintenance Procedure Manual

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SECTION 1.0 - FLEET MAINTENANCE DATABASE

POLICY: Using RTA National Fleet Database

Recognizing that well managed fleet maintenance programs are critical to ensuring reliable vehicles, extending vehicle useful life and controlling costs, all vehicle repair and maintenance data must be entered and stored in the RTA National Fleet Database.

Procedures:

1. Use RTA work orders to record all labor and parts expenses allocated to vehicles and equipment.
2. Use RTA Inventory Module to record all in-house spare parts inventory and part allocation.
3. Use RTA to document and record all vehicle mileages.
4. Use RTA to schedule all Preventative Maintenance (PMI)
5. Use RTA purchase order module to record all repair and maintenance parts, tires, supplies, sub-contract labor purchases.
6. Enter all sub-contract maintenance activity into RTA

SECTION 3.0 - MAINTENANCE PROCEDURES

POLICY: Vehicle Maintenance

These maintenance procedures focus on the Ford chassis Type II and III ambulance. Other vehicles shall be maintained in a similar fashion or as prescribed by the original manufacturer.

All procedures will be performed at a maximum of 5,000 miles or every 250-engine hours, whichever comes first, unless otherwise noted.

Visual Exterior Inspection: When approaching a vehicle, fleet personnel will perform a quick overall visual inspection looking for obvious problems such as:

- ◆ General cosmetic appearance
- ◆ Body damage
- ◆ Mirrors, reflectors, glass, lenses cracked, missing, discolored, etc
- ◆ Flat or low tires
- ◆ Fluid leaks
- ◆ Suspension sag or list

Cab Inspection: Fleet personnel will enter the driver's compartment examine:

- ◆ Door operations, handle smooth, no door sag or noise when opening, mirror mounting, hinge bolts and pins
- ◆ Condition of brake pedal pad
- ◆ Seat condition and operation
- ◆ Seat belt condition and operation
- ◆ Console mounting, switch operation, illumination
- ◆ Dash panel condition, operation of gauges, switches, etc.
- ◆ Heat, defrost and vent operation (including temperature and fan speeds)
- ◆ Secure mounting of accessories (flashlight, map light, etc.)
- ◆ Operation of windows
- ◆ Operation of horn, turn signals, hazard flashers, dome light, etc.
- ◆ Operation of siren (all modes)
- ◆ Air horn operation (IFAPP)
- ◆ Sliding door
- ◆ Overall condition and cleanliness

START ENGINE:

- ◆ With ignition switch on, wait for the “wait to start” light to go out
- ◆ After starting the engine, observe the voltmeter to assure a reading between 13.5 and 14.5 volts with fast idle on. AMP Meter should read on the positive side of the gauge.
- ◆ Listen for any unusual noises, vibrations, etc. from the engine.

ROAD TEST: All vehicles should be road tested before returning to service. This will allow fleet personnel the opportunity to check:

- ◆ Brake pedal height, pull, fade, dragging, noise, lock-up, etc.
- ◆ Steering wheel play, pull, wander, or vibration, etc
- ◆ Acceleration and engine performance, cruise control
- ◆ Transmission operation, slipping, shudder, delayed shift, etc.
- ◆ Listen for any unusual noises

BRAKES: With the unit raised and all wheels removed:

- ◆ Inspect condition of wheels, lug nuts and studs.
- ◆ **Drum Brakes**
 - ◆ Remove brake drums. Check for scoring, wear and hot spots. Refinish or replace if within 10% of discard specification (specifications stamped on drum).
 - ◆ Inspect shoes. Minimum allowable thickness for friction material is 2/32 for bonded shoes and 4/32 for riveted shoes. Shoes should be replaced at or prior to these measured thicknesses. Replace wheel cylinders anytime brake shoes are replaced.
 - ◆ Inspect all mounting hardware. Mounting hardware should be tight and free of corrosion. Inspect wheel cylinders mounting and check under cups for leaks. Star wheels and adjusting hardware should be inspected, cleaned and lubricated. Remember to lubricate shoe slide points with OEM brake lube.
 - ◆ Check all cables, mounting pins, bolts, etc. in the braking system and replace as necessary.
- ◆ **Rotor Brakes**
 - ◆ Inspect and measure front rotors, if needed, refinish. If rotor is within 10% of discard specification after refinishing it must be replaced. (Note; Rotor Lateral run-out should be measured with rotor mounted on vehicle.)
 - ◆ When replacing rotors – Front wheel bearings and races are to be replaced.
 - ◆ Check front disc pads. Minimum thickness for friction material is 5/32 for bonded pads and 6/32 for riveted pads. Pads should be replaced at or prior to this minimum.

- ◆ Inspect wheel bearing adjustment and operation. Adjust and lubricate as needed. (Note – All wheel bearings will be repacked and adjusted during a C – PMI)
- ◆ Verify that the caliper slide pins and other hardware are in excellent condition, replace if not.
- ◆ Inspect the calipers for any signs of leakage, sticking pistons, corrosion, torn boots or any other condition that may cause them to function improperly. If any problems are found, replace both calipers.
- ◆ Inspect the master cylinder for any signs of seepage, loose reservoir, etc. Replace if any doubt with OEM parts or the equipment equivalent.
- ◆ Bleed the entire brake system with a pressure device until fluid is clear.
- ◆ Inspect all steel and rubber brake lines for seepage, corrosion, cracks, proper mounting, etc. Replace if any doubt.
- ◆ Torque lug nuts in a star pattern when reinstalling wheels according to manufacturer specifications.

CHASSIS: Inspect ALL suspension components, with particular attention to the following:

- ◆ Check rear leaf springs for sagging, cracks, proper mounting, tight saddle and eyebolts.
- ◆ The rear leaf spring brackets crack frequently (shackle to frame).
- ◆ Check the front coil springs for broken or collapsed coils.
- ◆ Check all steering components for wear, looseness, damaged dust boots. All steering components should be within manufacturer specifications.
- ◆ Check all rubber bushings and replace if damaged or worn.
- ◆ Check all fasteners. (Surface rust around the fastener indicates that a fastener or component is loose.)
- ◆ Inspect the I-Beam with particular attention to the inner pivot bolts and bushings.
- ◆ Check the sway bar mounting brackets and bushings for tightness and general condition.
- ◆ Inspect all shock absorber mounting bolts and nuts.
- ◆ Check air bags, levelers and all associated hardware and lines.
- ◆ Inspect all bumper mounting-bolts and adjust if necessary.
- ◆ Inspect rear differential fluid level. Also, check for leaks or other obvious problems. Ensure cover is solid and free of penetrating rust
- ◆ Check transmission for leaks, dents in pan or other problems.
- ◆ Check engine mounts for general condition.
- ◆ Look closely for engine oil or coolant leaks.
- ◆ Check all underbody hoses for secure mounting, sharp edges, condition, etc.

- ◆ Check running boards, body, accessories, for proper and secure mountings.
- ◆ Check all ground cables for condition and connection, replace any corroded wire terminals or connections.
- ◆ Check exhaust-system for leaks, cracks, condition, proper mounting, etc.
- ◆ Check fuel and brake lines for proper mounting, corrosion and condition of flexible lines.
- ◆ Check the lift pump for leaks and hose condition.
- ◆ Check the transmission cooler lines for secure mounting and general condition. Replace the flexible lines if at all stiff.
- ◆ Check the power steering components for routing, leaks and general condition. Pay close attention to the upper seal on the gearbox.

LUBRICATION:

- ◆ Change engine oil and filter.
- ◆ Remember to fill the filter with new oil before installing on the engine.
- ◆ Clean and lubricate all zerk fittings, hood and door hinges and latches.
- ◆ Check all door hold open devices.
- ◆ Check parking brake cables.
- ◆ Transmission shift linkage.

ENGINE: Remove engine cover for access.

- ◆ Check all glow plugs. (If applicable)
- ◆ Inspect all fuel lines and connections.
- ◆ Inspect all heater and radiator hoses for nicks, abrasions, soft spots (oily spots must be replaced). Make certain clamp connections are tight and then pressure test cooling system and cap.
- ◆ Check coolant for condition, freezing protection to -34° F. PH should be adjusted to 9.5 - 10.0. Add Motorcraft FW – 15 or equivalent as needed to the cooling system to prevent cavitation problems. On later model vehicles, check to see if the coolant that is being used is considered a “permanent” type. It is important to remember these coolants will lose their protection quality if mixed with other glycol-based products.
- ◆ Inspect all wiring connections and terminals.
- ◆ Inspect air duct and air filter. Replace filter as needed. Standard replacement cycle is every B PMI – 15,000 miles or as condition warrants.
- ◆ Replace fuel filter every B Service (15,000 miles) or sooner if fuel conditions warrant.
- ◆ Check crank case dipstick for smooth operation.

- ◆ Check fuel injectors for leaks, brittle connecting hose, etc. Replace return-hoses and injector seals as necessary.

BELTS:

- ◆ Remove serpentine belts, tensioners, and idlers. Check for slack, noise, and wear. Inspect water pump at this time also.
- ◆ Inspect serpentine belt during each PMI (every 5,000 miles). Belts on 2003 and earlier model years are replaced as needed and are not to exceed 30,000 miles. Belts on 2004 and newer models are replaced as needed and are not to exceed 90,000 miles.
- ◆ Inspect tensioners and idlers during each PMI (every 5,000 miles). 2003 and earlier model years will be replaced as needed. High salt and sand areas warrant replacement every 30,000 miles. 2004 and newer model years are replaced as needed and will not exceed 90,000 miles.
- ◆ Replace V-belts in accordance with OEM manufactures specifications.
- ◆ Inspect all pulleys and accessory mounting brackets very carefully. Remember, rust may indicate a problem.
- ◆ Inspect all mounting fasteners carefully and replace any questionable fastener.
- ◆ Check that all harnesses, hoses, connectors, etc. are securely mounted to prevent contact with any moving belt or pulley.

ELECTRICAL SYSTEM:

- ◆ Dead batteries should be charged at no more than 30-amps for a period of 2-4 hours, if this is not practical, the batteries should be replaced. Failure to follow this recommendation could result in a premature alternator and/or battery failure.
- ◆ Charging rate should be 13.5 to 14.5 DC volts without any electrical load.
- ◆ Test charging system to ensure it sustains 12.5 volts under total connected load conditions with fast idle on (adjust as necessary).
- ◆ Check and record alternator output and voltage regulator setting (if applicable) on the Vehicle PMI inspection service form CO-0021F-00. Test alternator amp output. If the amp output is less than 75% of the alternator manufacturer's maximum rate, replace it.
- ◆ Check and clean battery terminal connections. If corrosion appears to be "wicking" up cable, replace the terminal and affected cable.
- ◆ Perform a battery load test per the battery manufacturer recommendations.
- ◆ Ensure batteries clamping brackets are tight and batteries are secure. If a primary battery is found to be faulty, the Emergency Start Batteries should be rotated to normal service mode and new batteries should be installed in the emergency start mode

- ◆ Inspect ALL battery cables, terminals, associated wiring for proper routing, secure mounting, insulation protection, corrosion, dark discoloration, which may indicate an overheated terminal.
- ◆ Inspect all wiring in ambulance electrical panel for similar condition as mentioned above. Replace any overheated terminal immediately. Use a top quality terminal crimper to ensure a proper connection.
- ◆ Carefully check breakers for problems such as excessive temperature, discoloration, burns, cracking, or loose fit. Replace any breaker that is questionable after determining the source of cause.

LIGHTING: Engine should be running when checking electrical accessories to reduce strain on the batteries.

- ◆ Check all lights for proper function. When activating electrical accessories, always turn them on one at a time and turn them off the same way.
- ◆ Replace any defective bulb.
- ◆ Use dielectric silicone on the base and contacts of automotive type bulbs as this may help eliminate socket/bulb corrosion and vibration problems.
- ◆ When replacing halogen bulbs, wipe the glass clean with an alcohol-prep after installation to remove skin oil, which may cause premature failure.
- ◆ Check headlights and fog lamps for proper aiming pattern.

HORN/SIREN: Wear proper hearing protection during ALL siren tests.

- ◆ Check O.E. horn for proper operation.
- ◆ Check all siren functions.
- ◆ Check operation of both speakers.
- ◆ Check operation and sound of air horns, if equipped.

MODULE/PATIENT COMPARTMENT:

- ◆ Check operation of all doors, inside and outside.
- ◆ Check for smooth and even release of doors that use multiple latches.
- ◆ Clean and lubricate all paddle latches and rotary latches.
- ◆ Clean and lubricate all door slides.
- ◆ Tighten all door panel-retaining screws. Use of thread locker is recommended.
- ◆ Tighten interior panel screws.
- ◆ Check Plexiglas doors for proper operation.
- ◆ Check all tambour doors for smooth operation, replace if slats are coming loose.

- ◆ Check mounting screws of accessories such as fire extinguishers, IV hooks, mounted suction, sharps containers, interior compartment doors, CPR seat, squad bench latch and lid, etc.
- ◆ Check inverter operation and continuity of shoreline circuit.
- ◆ Check patient compartment overhead lights both low and high beam. Replace any discolored lenses

TIRES

- ◆ Ensure rims are equipped with steel / rubber grommet valve stems. It is acceptable to use rubber stems with steel inserts on original/factory delivered rims. However, these must be replaced with full steel stems at the first tire change.
- ◆ Inspect tires for cracks in the sidewall, bead area, and shoulder. Replace any tire with splits or cracks that penetrate to the cords, bead area, or belt package. Ensure tires do not have any rawhide, spot, or section repairs.
- ◆ Inspect and test pressure in spare tire.
- ◆ Ensure vehicle is equipped with jack, handle, and lug wrench.

MISCELLANEOUS:

- ◆ Check biohazard doors for condition, hinge, safety, etc.
- ◆ Perform preventive maintenance on the ambulance stretcher.
 - Check and adjust gurney lock bar as needed. Lubricate if necessary.
 - Remove and clean threads on the stretcher hold down hardware.
 - Lubricate threads with “never seize” or equivalent.

These recommended maintenance procedures are detailed in a specific check-sheet formatted document to standardize the process and serves as documentation when performing preventive maintenance on an emergency vehicle.



DATE: 09/26/2017
TIME: 11:55 a.m.

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STARTING VMRS CODE: 000-000-000					DATE: 02/27/2017			VEHICLE:: FIRST							
ENDING VMRS CODE: 999-999-999					DATE: 09/26/2017			VEHICLE: LAST							

UNIT: 00554		LF MTR: 73973.0		CUR MTR: 73973.0		YR: 16		MAKE: Ford		DEPT: 13575		SIZE: M CLASS: ALS		FUEL: U	

VMRS CODE	DATE	WO NUM	LF-MILS	ODCM	WORK DESCRIPTION	OUT	PARTS	LABOR	TOTAL	HOURS	MECHANIC	CC	RC	WA	

013 TITLE > Brakes															
013-001-000	04172017	1665677	55480	55477	Front Brakes		46.05	67.50	113.55	1.50	JaimeO	01	7	XX	
013-002-000	03042017	1665467	49900	49901	Rear Brakes		161.44	90.00	251.44	2.00	JesseL	01	5	XX	
013	TOTAL >Brakes														
							207.49	157.50	364.99						
015 TITLE > Steering															
015-000-000	08172017	1682270	70830	70829	Steering		283.85	90.00	373.85	2.00	JaimeO	01	6	XX	
015	TOTAL >Steering														
							283.85	90.00	373.85						
016 TITLE > Suspension															
016-000-000	04172017	1665677	55480	55477	Suspension		59.86	90.00	149.86	2.00	JaimeO	01	7	XX	
016	TOTAL >Suspension														
							59.86	90.00	149.86						
017 TITLE > Tires															
017-000-000	03042017	1665467	49900	49901	Tires		525.00	90.00	615.00	2.00	JesseL	01	5	XX	
017-003-000	08172017	1682270	70830	70829	Mount Tires		261.76	45.00	306.76	1.00	JesseL	01	6	XX	
017	TOTAL >Tires														
							786.76	135.00	921.76						
032 TITLE > Starting System															
032-000-000	05262017	1665834	60900	60899	Starting System		268.39	45.00	313.39	1.00	EdvinO	01	5	XX	
032	TOTAL >Starting System														
							268.39	45.00	313.39						
033 TITLE > Ignition System															
033-001-000	05262017	1665834	60900	60899	Spark Plug		26.62	180.00	206.62	4.00	EdvinO	01	5	XX	
033	TOTAL >Ignition System														
							26.62	180.00	206.62						
066 TITLE > Preventative Mainten															
066-001-000	09082017	1682327	73640	73636	PM A INSPECTION		15.59	135.00	150.59	3.00	WMiles	01	5	XX	
066-001-000	07282017	1682206	68560	68561	PM A INSPECTION		15.59	135.00	150.59	3.00	EdvinO	01	5	XX	
066-001-000	06282017	1665992	64740	64740	PM A INSPECTION		15.59	135.00	150.59	3.00	WMiles	01	5	XX	
066-001-000	05262017	1665834	60900	60899	PM A INSPECTION		15.59	135.00	150.59	3.00	EdvinO	01	5	XX	
066-001-000	05042017	1665770	58480	58480	PM A INSPECTION		15.59	135.00	150.59	3.00	EdvinO	01	5	XX	
066-001-000	03272017	1665637	52660	52656	PM A INSPECTION		15.59	135.00	150.59	3.00	JaimeO	01	5	XX	
066-001-000	03042017	1665467	49900	49901	PM A INSPECTION		15.59	135.00	150.59	3.00	JesseL	01	5	XX	
066-002-000	08172017	1682270	70830	70829	PM B INSPECTION		15.59	135.00	150.59	3.00	JaimeO	01	6	XX	
066-003-000	04172017	1665677	55480	55477	PM C INSPECTION		78.77	180.00	258.77	4.00	JaimeO	01	7	XX	
066	TOTAL >Preventative Mainten														
							263.49	1260.00	1463.49						
111 TITLE > Misc Repair															
111-000-000	05292017	1665843	61030	61026	Misc Repair		0.00	180.00	180.00	4.00	WMiles	01	13	XX	

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STARTING VMRS CODE: 000-000-000				DATE: 02/27/2017				VEHICLE:: FIRST							
ENDING VMRS CODE: 999-999-999				DATE: 09/26/2017				VEHICLE: LAST							

UNIT: 00554		LF MTR: 73973.0		CUR MTR: 73973.0		YR: 16		MAKE: Ford		DEPT: 13575					
										SIZE: M CLASS: ALS FUEL: U					

VMRS CODE		DATE	WO NUM	LF-MILS	ODCM	WORK DESCRIPTION	OUT	PARTS	LABOR	TOTAL	HOURS	MECHANIC	CC	RC	WA
111-000-000		08152017	1665637	52660	52656	Misc Repair		0.00	0.00	0.00	0.00	EdvinO	01	5	XX
111-000-000		03042017	1665467	49900	49901	Misc Repair		0.00	180.00	180.00	4.00	JaimeO	01	5	XX
111		TOTAL >Misc Repair													
								0.00	360.00	360.00					
200 TITLE > Recalls															
200-014-000		08152017	1665637	52660	52656	AEV Light Bar Reinfo		0.00	135.00	135.00	3.00	EdvinO	01	5	XX
200		TOTAL >Recalls													
								0.00	135.00	135.00					

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STARTING VMRS CODE: 000-000-000		DATE: 02/27/2017		VEHICLE: FIRST										
ENDING VMRS CODE: 999-999-999		DATE: 09/26/2017		VEHICLE: LAST										
UNIT: 05453	LF MTR: 130243.0	CUR MTR: 130243.0	YR: 14	MAKE: Ford	DEPT: 13575									
					SIZE: M CLASS: ALS FUEL: U									
VMRS CODE	DATE	WO NUM	LF-MILS	ODCM	WORK DESCRIPTION	OUT	PARTS	LABOR	TOTAL	HOURS	MECHANIC	CC	RC	WA
001 TITLE > HVAC														
001-000-000	07052017	1666015	117920	117922	HVAC		14.66	45.00	59.66	1.00	WMiles	01	5	XX
001-022-000	05222017	1665810	115700	115700	Blower Motor		57.46	90.00	147.46	2.00	JesseL	01	13	XX

001-023-000 07052017 1666015 117920 117922 Blower Fan 116.00 90.00 206.00 2.00 Wmiles 01 5 XX
 001 TOTAL >HVAC 188.12 225.00 413.12

002 TITLE > Cab
 002-062-000 04072017 0009015 115380 115381 Windshield OUT 116.16 100.00 216.16 0.00 01 13 XX
 002 TOTAL >Cab 116.16 100.00 216.16

013 TITLE > Brakes
 013-002-000 04252017 1665741 111890 111893 Rear Brakes 160.07 90.00 250.07 2.00 JaimeO 01 7 XX
 013 TOTAL >Brakes 160.07 90.00 250.07

015 TITLE > Steering
 015-000-000 08122017 1682253 124060 124058 Steering 202.69 90.00 292.69 2.00 JaimeO 01 5 XX
 015 TOTAL >Steering 202.69 90.00 292.69

016 TITLE > Suspension
 016-002-000 03172017 1665607 105810 105810 Shocks 55.36 67.50 122.86 1.50 EdwinO 01 5 XX
 016 TOTAL >Suspension 55.36 67.50 122.86

017 TITLE > Tires
 017-000-000 08162017 1682265 124060 124063 Tires 443.41 67.50 510.91 1.50 EdwinO 01 13 XX
 017-000-000 03172017 1665607 105810 105810 Tires 384.89 45.00 429.89 1.00 EdwinO 01 5 XX
 017 TOTAL >Tires 828.30 112.50 940.80

045 TITLE > Engine
 045-083-000 04252017 1665741 111890 111893 TENSIONER / IDLERS 65.20 45.00 110.20 1.00 JaimeO 01 7 XX
 045 TOTAL >Engine 65.20 45.00 110.20

066 TITLE > Preventative Mainten
 066-001-000 09182017 1682302 129610 129609 PM A INSPECTION 15.59 135.00 150.59 3.00 JaimeO 01 5 XX
 066-001-000 08122017 1682253 124060 124058 PM A INSPECTION 15.59 135.00 150.59 3.00 JaimeO 01 5 XX
 066-001-000 07262017 1665876 121250 121234 PM A INSPECTION 15.59 135.00 150.59 3.00 Wmiles 01 5 XX
 066-001-000 07052017 1666015 117920 117922 PM A INSPECTION 15.59 135.00 150.59 3.00 Wmiles 01 5 XX
 066-001-000 05162017 1665706 115380 115381 PM A INSPECTION 22.00 135.00 157.00 3.00 EdwinO 01 5 XX

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STARTING VMRS CODE: 000-000-000 DATE: 02/27/2017 VEHICLE: FIRST
 ENDING VMRS CODE: 999-999-999 DATE: 09/26/2017 VEHICLE: LAST

UNIT: 05453 LF MTR: 130243.0 CUR MTR: 130243.0 YR: 14 MAKE: Ford DEPT: 13575 SIZE: M CLASS: ALS FUEL: U

VMRS CODE	DATE	MO NUM	LF-MILES	ODCM	WORK DESCRIPTION	OUT	PARTS	LABOR	TOTAL	HOURS	MECHANIC	CC	RC	WA
066-001-000	04042017	1665578	108090	108088	PM A INSPECTION		15.59	135.00	150.59	3.00	JaimeO	01	5	XX
066-001-000	03172017	1665607	105810	105810	PM A INSPECTION		15.59	135.00	150.59	3.00	EdvinO	01	5	XX
066-002-000	09012017	1682349	127060	127061	PM B INSPECTION		15.59	135.00	150.59	3.00	EdvinO	01	6	XX
066-003-000	05152017	1665741	112240	112243	PM C INSPECTION		162.80	225.00	387.80	5.00	JaimeO	01	7	XX
066	TOTAL >Preventative Mainten						293.93	1305.00	1598.93					
100	TITLE > VEHICLE TOW													
100-001-000	05192017	0009408	115700	115700	VEHICLE TOW	OUT	0.00	127.50	127.50	0.00		01	1	XX
100	TOTAL >VEHICLE TOW						0.00	127.50	127.50					
111	TITLE > Misc Repair													
111-000-000	09202017	1682302	129610	129609	Misc Repair		0.00	22.50	22.50	0.50	JaimeO	01	5	XX
111-000-000	08162017	1682265	124060	124063	Misc Repair		0.00	45.00	45.00	1.00	EdvinO	01	13	XX
111-000-000	08162017	1682265	124060	124063	Misc Repair		0.00	90.00	90.00	2.00	EdvinO	01	13	XX
111-000-000	02282017	1665487	102750	102751	Misc Repair		39.54	45.00	84.54	1.00	JaimeO	01	13	XX
111	TOTAL >Misc Repair						39.54	202.50	242.04					

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STARTING VMRS CODE: 000-000-000 DATE: 02/27/2017 VEHICLE: FIRST
 ENDING VMRS CODE: 999-999-999 DATE: 09/26/2017 VEHICLE: LAST

UNIT: 06879 LF MTR: 141111.0 CUR MTR: 141111.0 YR: 14 MAKE: Ford DEPT: 13575 SIZE: H CLASS: ALS FUEL: U

VMRS CODE	DATE	MO NUM	LF-MILES	ODCM	WORK DESCRIPTION	OUT	PARTS	LABOR	TOTAL	HOURS	MECHANIC	CC	RC	WA
001	TITLE > HVAC													
001-000-000	07132017	1665489	129110	129111	HVAC		11.99	45.00	56.99	1.00	Wmiles	01	6	XX
001-000-000	06212017	1665937	124840	124837	HVAC		11.99	45.00	56.99	1.00	Wmiles	01	13	XX
001-022-000	08072017	1682237	132640	132637	Blower Motor		55.27	67.50	122.77	1.50	JaimeO	01	13	XX
001-022-000	07292017	1665874	131250	131254	Blower Motor		0.00	112.50	112.50	2.50	Wmiles	01	5	XX
001-022-000	03162017	1665476	108380	108375	Blower Motor		134.18	135.00	269.18	3.00	JeeseL	01	13	XX
001	TOTAL >HVAC						213.43	405.00	618.43					
002	TITLE > Cab													
002-020-000	03132017	1665502	106700	106700	Door Hinge		50.00	90.00	140.00	2.00	JaimeO	01	5	XX
002-039-000	09212017	1682305	140720	140724	Seat		326.90	67.50	394.40	1.50	EdvinO	01	1	XX
002	TOTAL >Cab						376.90	157.50	534.40					
013	TITLE > Brakes													
013-001-000	06122017	1665581	123430	123433	Front Brakes		311.81	67.50	379.31	1.50	JaimeO	01	5	XX
013-002-000	06122017	1665581	123430	123433	Rear Brakes		143.52	90.00	233.52	2.00	JaimeO	01	5	XX
013	TOTAL >Brakes						455.33	157.50	612.83					
015	TITLE > Steering													
015-005-000	03222017	0322001	109220	109217	Alignment	OUT	0.00	80.00	80.00	0.00		01	13	XX
015-012-000	03232017	1665811	109190	109191	Drag Link		279.24	90.00	369.24	2.00	EdvinO	01	5	XX

015 TOTAL >Steering 279.24 170.00 449.24

017 TITLE > Tires

017-000-000	09212017	1682305	140720	140724 Tires	523.52	90.00	613.52	2.00	EdvinO	01 1	XX
017-000-000	09022017	1682318	137700	137703 Tires	523.52	67.50	591.02	1.50	WMiles	01 5	XX
017-000-000	04242017	1665742	114820	114815 Tires	261.82	45.00	306.82	1.00	EdvinO	01 7	XX
017-000-000	04252017	1665738	114820	114815 Tires	261.82	45.00	306.82	1.00	EdvinO	01 7	XX
017-003-000	07012017	1665997	126560	126556 Mount Tires	523.52	45.00	568.52	1.00	WMiles	01 5	XX
017-003-000	04152017	1665528	113440	113439 Mount Tires	138.78	22.50	153.28	0.50	WMiles	01 13	XX
017-009-000	03132017	1665502	106700	106700 Repair Tire	0.00	45.00	45.00	1.00	JaimeO	01 5	XX
017	TOTAL >Tires				2224.98	360.00	2584.98				

032 TITLE > Starting System

032-000-000	09212017	1682305	140720	140724 Starting System	356.04	67.50	423.54	1.50	EdvinO	01 1	XX
032-000-000	08072017	1682237	132640	132637 Starting System	237.36	67.50	304.86	1.50	JaimeO	01 13	XX
032	TOTAL >Starting System				593.40	135.00	728.40				

042 TITLE > Cooling System

042-017-000	09212017	1682305	140720	140724 RADIATOR	417.53	90.00	507.53	2.00	EdvinO	01 1	XX
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TIME: 11:55 a.m.

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VEHICLE REPAIR HISTORY REPORT
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STARTING VMRS CODE: 000-000-000	DATE: 02/27/2017	VEHICLE: FIRST												
ENDING VMRS CODE: 999-999-999	DATE: 09/26/2017	VEHICLE: LAST												
UNIT: 06879	LF MTR: 141111.0 CUR MTR: 141111.0 YR: 14 MAKE: Ford	DEPT: 13575 SIZE: H CLASS: ALS FUEL: U												
VMRS CODE	DATE	MO NUM	LF-MILS	ODOM	WORK DESCRIPTION	OUT	PARTS	LABOR	TOTAL	HOURS	MECHANIC	CC	RC	WA
042	TOTAL >Cooling System						417.53	90.00	507.53					
066	TITLE > Preventative Mainten													
066-001-000	09212017	1682305	140720	140724	PM A INSPECTION		15.59	135.00	150.59	3.00	EdvinO	01 1	XX	
066-001-000	09022017	1682318	137700	137703	PM A INSPECTION		15.59	135.00	150.59	3.00	WMiles	01 5	XX	
066-001-000	08162017	1682264	134260	134257	PM A INSPECTION		15.59	135.00	150.59	3.00	JaimeO	01 5	XX	
066-001-000	07292017	1665874	131250	131254	PM A INSPECTION		15.59	135.00	150.59	3.00	WMiles	01 5	XX	
066-001-000	07012017	1665997	126560	126556	PM A INSPECTION		15.59	135.00	150.59	3.00	WMiles	01 5	XX	
066-001-000	06122017	1665581	123430	123433	PM A INSPECTION		15.59	135.00	150.59	3.00	JaimeO	01 5	XX	
066-001-000	05272017	1665842	120500	120504	PM A INSPECTION		15.59	135.00	150.59	3.00	WMiles	01 5	XX	
066-001-000	05112017	1665780	117630	117634	PM A INSPECTION		15.59	135.00	150.59	3.00	WMiles	01 5	XX	
066-001-000	04052017	1665646	111690	111685	PM A INSPECTION		22.00	135.00	157.00	3.00	WMiles	01 5	XX	
066-001-000	03232017	1665611	109190	109191	PM A INSPECTION		22.00	135.00	157.00	3.00	EdvinO	01 5	XX	
066-001-000	03132017	1665502	106700	106700	PM A INSPECTION		15.59	135.00	150.59	3.00	JaimeO	01 5	XX	
066-002-000	07172017	1665489	129110	129111	PM B INSPECTION		15.59	135.00	150.59	3.00	WMiles	01 6	XX	
066-003-000	04242017	1665742	114820	114815	PM C INSPECTION		89.29	180.00	269.29	4.00	EdvinO	01 7	XX	
066-003-000	04252017	1665738	114820	114815	PM C INSPECTION		89.29	180.00	269.29	4.00	EdvinO	01 7	XX	
066	TOTAL >Preventative Mainten						378.48	1980.00	2358.48					
071	TITLE > Body													
071-022-000	05112017	1665780	117630	117634	Doors		0.00	112.50	112.50	2.50	WMiles	01 5	XX	
071	TOTAL >Body						0.00	112.50	112.50					
111	TITLE > Misc Repair													
111-000-000	06122017	1665581	123430	123433	Misc Repair		0.00	45.00	45.00	1.00	JaimeO	01 5	XX	
111	TOTAL >Misc Repair						0.00	45.00	45.00					

DATE: 09/26/2017
TIME: 11:55 a.m.

Menifee - Fleet
VEHICLE REPAIR HISTORY REPORT
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STARTING VMRS CODE: 000-000-000	DATE: 02/27/2017	VEHICLE: FIRST												
ENDING VMRS CODE: 999-999-999	DATE: 09/26/2017	VEHICLE: LAST												
UNIT: 08543	LF MTR: 261241.0 CUR MTR: 261241.0 YR: 13 MAKE: Ford	DEPT: 13575 SIZE: H CLASS: ALS FUEL: U												
VMRS CODE	DATE	MO NUM	LF-MILS	ODOM	WORK DESCRIPTION	OUT	PARTS	LABOR	TOTAL	HOURS	MECHANIC	CC	RC	WA
001	TITLE > HVAC													
001-023-000	06212017	1665929	252130	252130	Blower Fan		116.00	67.50	183.50	1.50	EdvinO	01 13	XX	
001	TOTAL >HVAC						116.00	67.50	183.50					
002	TITLE > Cab													
002-020-000	09212017	1682308	261200	261202	Door Hinge		45.00	90.00	135.00	2.00	JaimeO	01 5	XX	
002	TOTAL >Cab						45.00	90.00	135.00					
012	TITLE > Rear Axle													
012-066-000	06212017	1665929	252130	252130	Service Diff		29.43	45.00	74.43	1.00	EdvinO	01 13	XX	
012-066-000	04112017	1665657	250890	250885	Service Diff		29.56	45.00	74.56	1.00	EdvinO	01 6	XX	
012	TOTAL >Rear Axle						58.99	90.00	148.99					
013	TITLE > Brakes													
013-005-000	09012017	1682316	259640	259640	Parking Brake		224.80	90.00	314.80	2.00	WMiles	01 13	XX	
013-005-000	06212017	1665929	252130	252130	Parking Brake		70.00	180.00	250.00	4.00	EdvinO	01 13	XX	
013-005-000	04112017	1665657	250890	250885	Parking Brake		174.58	90.00	264.58	2.00	EdvinO	01 6	XX	
013	TOTAL >Brakes						469.38	360.00	829.38					
015	TITLE > Steering													
015-021-000	04112017	1665657	250890	250885	Steering Pump		160.15	90.00	250.15	2.00	EdvinO	01 6	XX	
015	TOTAL >Steering						160.15	90.00	250.15					
033	TITLE > Ignition System													
033-001-000	08012017	1682212	254890	254888	Spark Plug		0.00	90.00	90.00	2.00	EdvinO	01 5	XX	
033	TOTAL >Ignition System						0.00	90.00	90.00					



AMERICAN MEDICAL RESPONSE

Fleet Maintenance Procedure Manual

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SECTION 12.0 - PREVENTITIVE MAINTENANCE

POLICY: Conducting certified PMIs

REFERENCE: PM Inspection Form CO 0021F-00

AMR Certified "PMI" Inspections must be completed at intervals that will monitor wear conditions to ensure repair prior to becoming a mechanical failure and to proactively change fluids to prolong the vehicle life.

PMI Inspections are classified as "A" or "B" or "C". Inspections are performed every 4,000 mi. (min) to 5,000 mi. (max) or every 250 hours, whichever occurs first.

- A - PMI is conducted every 5,000 miles.
- B - PMI is conducted every 15,000 miles and includes an A PMI.
- C - PMI is conducted every 30,000 miles and includes B and A PMI

A PMI cycle is a set of six inspections. PMI's run in a cycle of "A, A, B, A, A, C"

Note: Certain models or model year vehicles may require a PMI at an earlier mileage or hour interval. A PMI interval should not, under any circumstance, exceed 5,000 miles or 250 operating hours.

Each Fleet Foremen or Fleet Supervisor will consult with the National Fleet Director to formulate inspection intervals for specialty or contract specific vehicles.

All work involved with PMIs must be recorded in the National RTA Database. Shops will use PMI schedules produced from RTA.

The standard checklist for PMI Inspections is the PM Inspection Form CO 0021F-00. It is a minimal requirement checklist and must be completed with each PMI inspection.

Oil changes and lubrication intervals will be established to meet manufacture's recommendations and will be conducted during scheduled PMI's. Oil and petroleum products must be purchased through established National Account programs.

Preventative Maintenance Inspection (PMI)

Operating Company _____ **Date** _____
Vehicle Number _____ **Cot Number** _____
VIN Number _____ **Stair Chair Number** _____
(Last 5 Digits)
Odometer _____
Hours _____

- (✓) Item is Okay
 (X) Repairs are Needed
 (O) Circle X When Repairs are Completed

Type of PMI **A** **B** **C**
 (Circle One) **5K** **15K** **30K**

Ground Level Check During PMI Inspections A, B, C

Status	Item	Status	Item	Status	Item
	Review Unit History		AM / FM Radio		Body Panels / Rust / Paint
	Scan - Pull Vehicle Codes		Two Way Radios		Striping and Decals
	Road Test - Eng and Trans Run Smooth		Road Safety Speaker		Grille and Hood Condition
	Shifter Operation / OD Light		Dome and Map Lights		Antennas
	Engine Power - Response		Engine Cover, Latches and Gasket		Running Boards Tight / Secure
	Steering Control & Tightness		Emergency Switches and Knobs.		Shoreline Cover
	* Steering - (See Spec #1)		Emergency Console Lights and Labels.		Box Rub Rails - Tight / Secure
	Brakes - Pedal, Stopping, Pulsation		Siren / PA - Function		AMB Compartment Doors.
	Pedal Pads		Handheld Spot Light		Tire Jack and Storage
	Test City and Air Horns		Windows and Regulators		Road Safety Spotter Button
	* Parking Brake Holds (See Spec #6)		Door Panels and Locks		Pressure Check Coolant System
	High Idle Operation.		Door Gaskets and Hinges		Antifreeze Level & Protection F
	Gauges, Warning Lights, Dash Lights		Lube Doors, Hinges, Alignment OK		Antifreeze PH (Record 7-9.5)
	Wipers, Operation and Washer		Fire Extinguishers 2 ea. 5 lbs.		Engine Oil Level
	Mirrors and Glass		Headlights - Hi / Low		Power Steering Fluid Level
	Headliner and Visor		Running Lights / Markers / Reflectors		Brake Fluid Level
	Registration or Copy		Turn Signals and Hazards		Windshield Washer Fluid
	Fuel Card # _____		All Brake Lights		ATF Level
	Floor mats and Carpet		Back Up Alarm and Light		* Vac Pump Pressure (See Spec #7)
	Seat Belts and Seats		License Plate and Lights		Fan Shroud / Upper Radiator
	Defrost, Heat, A/C		Emergency Lights and Light Bar		Belt / Tensioner / Idlers (Spec # 10)
	Vents and Louvers		Flood Lights		GM / Chevy - Check Ball Joints
	A/C Operation _____ F Ambient		Scene Lights on with Door Open		* Inspect Lift (Aux Equip guide)
	Front _____ F Rear _____ F		Document Body Damage		*Onboard Gen. (Aux Equip Insp. Guide)

Check Charging System

Status	Item	Status	Item	Status	Item
	Up Alt. Output Amps _____		Primary Battery		Secondary Battery
	Low Alt. Output Amps _____		# 1 Volts _____ #1 Amps _____		# 1 Volts _____ #1 Amps _____
	Starter Draw _____ (Spec #8)		# 2 Volts _____ #2 Amps _____		# 2 Volts _____ #2 Amps _____
	Battery Box & Hold Downs		Visual		Visual
	Cables & Connections				

Patient Compartment

Status	Item	Status	Item	Status	Item
	Ceiling, Floor - no wood visible.		Patient Compartment Lighting.		O2 Tanks and Brackets Secured
	Cabinets, Walls, Bench no wood visible.		Exhaust Fan		O2 Regulator / Tanks Closed
	Upholstery - tight, no rips or cuts.		Onboard Suction, Quick Disconnect		Compressed Air Mounted / Secured
	Doors and Latches		Inverter Operation		Air Regulator / Tanks Closed
	Cabinet Door Latches		Lighted 110 VAC Outlet Operation		Antlers - Damage / Secure / Floor Hook
	Storage Straps and Brackets		Grab Handles		*Inspect Stretcher-use Inspection Guide
	Safety Straps, Patient Seat Belts		Sharps Secured		Stretcher Bar / Match / Adjustment
					Road Safety Spotter Button

Preventative Maintenance Inspection (PMI)

On The Lift Check During PMI Inspections A, B, C					
Status	Item	Status	Item	Status	Item
	Drain Engine Oil		Radius Arm Bushings and Brackets		Differential Leaks and Oil Level
	Replace Oil Filter		Remove Tires		Leaf Springs/Center Bolts/Shackles
	Lube Chassis		* Check Front Brakes (See Spec #4)		Inspect Brake Lines
	Inspect Front Bumper and Fasteners		Inspect Hoses / Calipers/ Hardware		* Check Rear Brake (See Spec #4)
	Lower Coolant Hoses / Radiator		Front Rotor Condition (See Spec #5)		Inspect Hoses / Calipers / Hardware
	Trans Cooling Lines, Fasteners		Inspect Bearings / Adjustment		Rear Rotors / Drums condition (Spec #5)
	Fan Clutch and Shroud		Motor Mounts		Inspect Bearings / Adjustment
	Water Pump / Condition		Oil Leaks		Check Axle Seals / Leaks
	Coolant Leaks		Fuel Leaks		Spare Tire / Secure & PSI (See Spec #3)
	Front Stabilizer Bushings		Trans Mount and Leaks		Rear Step, Bumper, Lift and Brackets
	PS Box, Hoses and Leaks		Inspect Parking Brake Cable		Rear Kick Plate
	Tighten Pitman Arm and Nut.		Parking Brake Assembly		Check Wheel Covers / Hub Caps
	Check Drag Link		U-Joints / Yokes / Center Brgs.		Steel Valve Stems
	Check Inner Drag link		Inspect Exhaust Sys. and Brackets		* Tire Pressure (See Spec # 2)
	Tie Rod Ends, Sleeves, Clamps		Inspect Body Mounts		* Tread Depth (See Spec # 3)
	Ball Joints		Inspect Fuel Tank and Straps		Rotate Tires / Inspect Rims / Clean
	Control Arm Bushings (Chevy)		Inspect Rear Shocks / Mounts		* Torque Lug Nuts 140 Ft lbs.
	Front Shocks / Towers / Coil Springs		Inspect Rear Stabilizer / Bushings		See Sprinter PMI Tasks.
Done	A PMI Tasks	Done	B PMI Tasks (Diesel Only)	Done	C PMI Tasks
	Perform Every 5k mi.		Every 15k mi. and all A PMI Tasks		Every 30k mi. and all A and B Tasks
	Change Engine Oil _____ Qts		Change Fuel Filters		Change Transmission Fluid. _____ Qts
	Change Engine Oil Filter		Change Air Filter		Replace External Trans Filter
	Fuel Additive PM22A _____ OZs		Replace External Trans Filter.		Inspect / Repack / Adjust Wheel Brgs.
	Check Road Safety Operation				Add Biocide Treatment to Fuel Tank as Needed
OK	Components				
	6.0L Belts and Pulleys - Last Changed _____ miles. Not to exceed 90k miles. Local conditions may warrant earlier replacement.				
	6.0L Vacuum Pump - Last Changed _____ miles. Not to exceed 90k miles. Local conditions may warrant earlier replacement.				
	7.3L Vacuum Pump - Last Changed _____ miles. Not to exceed 90k miles. Local conditions may warrant earlier replacement.				
	7.3L Pulleys and Idlers Last changed _____ miles. Every 30k for salt / sand areas. All others as needed. Replace belt as needed.				
	Differential Fluid - Last Changed _____ miles. Not to exceed 90k miles.				
Document			Specifications		
Position - LF <div style="border: 1px solid black; width: 40px; height: 40px; margin: 5px;"></div> #2 Tire PSI _____ #3 Tread Depth _____ /32nds #4 Brake Pads _____ /32nds Rotor Condition _____		Position - RF <div style="border: 1px solid black; width: 40px; height: 40px; margin: 5px;"></div> #2 Tire PSI _____ #3 Tread Depth _____ /32nds #4 Brake Pads _____ /32nds Rotor Condition _____		#1 Steering - Acceptable Play 1 1/2 " to 2" #2 Tire PSI - Check Builders Recommendation. #3 Tread Depth < 4/32 nds at thinnest point #4 Brake Pad Pull < 5/32 nds. #5 See manufacturer rotor specification. #6 At Idle - Holds in Forward & Reverse #7 Vacuum HV range 17-21 #8 Starter Draw > 500 Amps. #9 Antifreeze Mix 60/40 #10 Idlers/Tensioners 30k or 60k see components	
Position - LR <div style="border: 1px solid black; width: 40px; height: 40px; margin: 5px;"></div> #2 Tire PSI _____ #3 Tread Depth _____ /32nds #4 Brake Pads _____ /32nds Rotor Condition _____		Position - RR <div style="border: 1px solid black; width: 40px; height: 40px; margin: 5px;"></div> #2 Tire PSI _____ #3 Tread Depth _____ /32nds #4 Brake Pads _____ /32nds Rotor Condition _____			
<div style="border: 1px solid black; width: 40px; height: 40px; margin: 5px;"></div> Dual Rear - LRI #2 Tire PSI _____ #3 Tread Depth _____ /32nds		<div style="border: 1px solid black; width: 40px; height: 40px; margin: 5px;"></div> Dual Rear - RRI #2 Tire PSI _____ #3 Tread Depth _____ /32nds			
<div style="text-align: center; border-top: 1px solid black;"> Mechanic Signature </div>					



DATE: 09/26/2017
TIME: 11:55 a.m.

Menifee - Fleet
VEHICLE REPAIR HISTORY REPORT
FACILITY: 02109

ID: 1-32/RRV

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STARTING VMRS CODE: 000-000-000					DATE: 02/27/2017		VEHICLE:: FIRST							
ENDING VMRS CODE: 999-999-999					DATE: 09/26/2017		VEHICLE: LAST							
UNIT: 00554	LF MTR:	73973.0	CUR MTR:	73973.0	YR: 16	MAKE: Ford	DEPT: 13575		SIZE: M	CLASS: ALS	FUEL: U			
VMRS CODE	DATE	WO NUM	LF-MILS	ODCM	WORK DESCRIPTION		OUT	PARTS	LABOR	TOTAL	HOURS	MECHANIC	CC	RC WA
013 TITLE > Brakes														
013-001-000	04172017	1665677	55480	55477	Front Brakes			46.05	67.50	113.55	1.50	JaimeO	01	7 XX
013-002-000	03042017	1665467	49900	49901	Rear Brakes			161.44	90.00	251.44	2.00	JesseL	01	5 XX
013	TOTAL >Brakes							207.49	157.50	364.99				
015 TITLE > Steering														
015-000-000	08172017	1682270	70830	70829	Steering			283.85	90.00	373.85	2.00	JaimeO	01	6 XX
015	TOTAL >Steering							283.85	90.00	373.85				
016 TITLE > Suspension														
016-000-000	04172017	1665677	55480	55477	Suspension			59.86	90.00	149.86	2.00	JaimeO	01	7 XX
016	TOTAL >Suspension							59.86	90.00	149.86				
017 TITLE > Tires														
017-000-000	03042017	1665467	49900	49901	Tires			525.00	90.00	615.00	2.00	JesseL	01	5 XX
017-003-000	08172017	1682270	70830	70829	Mount Tires			261.76	45.00	306.76	1.00	JesseL	01	6 XX
017	TOTAL >Tires							786.76	135.00	921.76				
032 TITLE > Starting System														
032-000-000	05262017	1665834	60900	60899	Starting System			268.39	45.00	313.39	1.00	Edvino	01	5 XX
032	TOTAL >Starting System							268.39	45.00	313.39				
033 TITLE > Ignition System														
033-001-000	05262017	1665834	60900	60899	Spark Plug			26.62	180.00	206.62	4.00	Edvino	01	5 XX
033	TOTAL >Ignition System							26.62	180.00	206.62				
066 TITLE > Preventative Mainten														
066-001-000	09082017	1682327	73640	73636	PM A INSPECTION			15.59	135.00	150.59	3.00	Wmiles	01	5 XX
066-001-000	07282017	1682206	68560	68561	PM A INSPECTION			15.59	135.00	150.59	3.00	Edvino	01	5 XX
066-001-000	06282017	1665992	64740	64740	PM A INSPECTION			15.59	135.00	150.59	3.00	Wmiles	01	5 XX
066-001-000	05262017	1665834	60900	60899	PM A INSPECTION			15.59	135.00	150.59	3.00	Edvino	01	5 XX
066-001-000	05042017	1665770	58480	58480	PM A INSPECTION			15.59	135.00	150.59	3.00	Edvino	01	5 XX
066-001-000	03272017	1665637	52660	52656	PM A INSPECTION			15.59	135.00	150.59	3.00	JaimeO	01	5 XX
066-001-000	03042017	1665467	49900	49901	PM A INSPECTION			15.59	135.00	150.59	3.00	JesseL	01	5 XX
066-002-000	08172017	1682270	70830	70829	PM B INSPECTION			15.59	135.00	150.59	3.00	JaimeO	01	6 XX
066-003-000	04172017	1665677	55480	55477	PM C INSPECTION			78.77	180.00	258.77	4.00	JaimeO	01	7 XX
066	TOTAL >Preventative Mainten							203.49	1260.00	1463.49				
111 TITLE > Misc Repair														
111-000-000	05292017	1665843	61030	61026	Misc Repair			0.00	180.00	180.00	4.00	Wmiles	01	13 XX

DATE: 09/26/2017
TIME: 11:55 a.m.

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VEHICLE REPAIR HISTORY REPORT
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STARTING VMRS CODE: 000-000-000					DATE: 02/27/2017			VEHICLE:: FIRST							
ENDING VMRS CODE: 999-999-999					DATE: 09/26/2017			VEHICLE: LAST							

UNIT: 00554		LF MTR: 73973.0		CUR MTR: 73973.0		YR: 16		MAKE: Ford		DEPT: 13575		SIZE: M CLASS: ALS		FUEL: U	
VMRS CODE		DATE	WO NUM	LF-MILS	ODCM	WORK DESCRIPTION		OUT	PARTS	LABOR	TOTAL	HOURS	MECHANIC	CC	RC WA
111-000-000		08152017	1665637	52660	52656	Misc Repair			0.00	0.00	0.00	0.00	Edvino	01	5 XX
111-000-000		03042017	1665467	49900	49901	Misc Repair			0.00	180.00	180.00	4.00	JaimeO	01	5 XX
111		TOTAL >Misc Repair													
									0.00	360.00	360.00				
200 TITLE > Recalls															
200-014-000		08152017	1665637	52660	52656	AEV Light Bar Reinfo			0.00	135.00	135.00	3.00	Edvino	01	5 XX
200		TOTAL >Recalls													
									0.00	135.00	135.00				

DATE: 09/26/2017
TIME: 11:55 a.m.

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VEHICLE REPAIR HISTORY REPORT
FACILITY: 02109

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STARTING VMRS CODE: 000-000-000		DATE: 02/27/2017		VEHICLE:: FIRST	
ENDING VMRS CODE: 999-999-999		DATE: 09/26/2017		VEHICLE: LAST	

UNIT: 05453	LF MTR: 130243.0	CUR MTR: 130243.0	YR: 14	MAKE: Ford	DEPT: 13575
				SIZE: M	CLASS: ALS
					FUEL: U

VMRS CODE	DATE	WO NUM	LF-MILS	ODCM	WORK DESCRIPTION
					OUT
					PARTS
					LABOR
					TOTAL
					HOURS
					MECHANIC
					CC RC WA

001	TITLE > HVAC				
001-000-000	07052017	1666015	117920	117922	HVAC
					14.66
					45.00
					59.66
					1.00 Wmiles
001-022-000	05222017	1665810	115700	115700	Blower Motor
					57.46
					90.00
					147.46
					2.00 Jcesel
					01 13 XX

001-023-000 07052017 1666015 117920 117922 Blower Fan 116.00 90.00 206.00 2.00 WMIles 01 5 XX
 001 TOTAL >HVAC 188.12 225.00 413.12

002 TITLE > Cab
 002-062-000 04072017 0009015 115380 115381 Windshield OUT 116.16 100.00 216.16 0.00 01 13 XX
 002 TOTAL >Cab 116.16 100.00 216.16

013 TITLE > Brakes
 013-002-000 04252017 1665741 111890 111893 Rear Brakes 160.07 90.00 250.07 2.00 JaimeO 01 7 XX
 013 TOTAL >Brakes 160.07 90.00 250.07

015 TITLE > Steering
 015-000-000 08122017 1682253 124060 124058 Steering 202.69 90.00 292.69 2.00 JaimeO 01 5 XX
 015 TOTAL >Steering 202.69 90.00 292.69

016 TITLE > Suspension
 016-002-000 03172017 1665607 105810 105810 Shocks 55.36 67.50 122.86 1.50 EdwinO 01 5 XX
 016 TOTAL >Suspension 55.36 67.50 122.86

017 TITLE > Tires
 017-000-000 08162017 1682265 124060 124063 Tires 443.41 67.50 510.91 1.50 EdwinO 01 13 XX
 017-000-000 03172017 1665607 105810 105810 Tires 384.89 45.00 429.89 1.00 EdwinO 01 5 XX
 017 TOTAL >Tires 828.30 112.50 940.80

045 TITLE > Engine
 045-083-000 04252017 1665741 111890 111893 TENSIONER / IDLERS 65.20 45.00 110.20 1.00 JaimeO 01 7 XX
 045 TOTAL >Engine 65.20 45.00 110.20

066 TITLE > Preventative Mainten
 066-001-000 09182017 1682302 129610 129609 PM A INSPECTION 15.59 135.00 150.59 3.00 JaimeO 01 5 XX
 066-001-000 08122017 1682253 124060 124058 PM A INSPECTION 15.59 135.00 150.59 3.00 JaimeO 01 5 XX
 066-001-000 07262017 1665876 121250 121234 PM A INSPECTION 15.59 135.00 150.59 3.00 WMIles 01 5 XX
 066-001-000 07052017 1666015 117920 117922 PM A INSPECTION 15.59 135.00 150.59 3.00 WMIles 01 5 XX
 066-001-000 05162017 1665706 115380 115381 PM A INSPECTION 22.00 135.00 157.00 3.00 EdwinO 01 5 XX

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 TIME: 11:55 a.m.

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 VEHICLE REPAIR HISTORY REPORT
 FACILITY: 02109

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STARTING VMRS CODE: 000-000-000 DATE: 02/27/2017 VEHICLE: FIRST
 ENDING VMRS CODE: 999-999-999 DATE: 09/26/2017 VEHICLE: LAST

UNIT: 05453 LF MTR: 130243.0 CUR MTR: 130243.0 YR: 14 MAKE: Ford DEPT: 13575 SIZE: M CLASS: ALS FUEL: U

VMRS CODE	DATE	WO NUM	LF-MILS	ODCM	WORK DESCRIPTION	OUT	PARTS	LABOR	TOTAL	HOURS	MECHANIC	CC	RC	WA
066-001-000	04042017	1665578	108090	108088	PM A INSPECTION		15.59	135.00	150.59	3.00	JaimeO	01	5	XX
066-001-000	03172017	1665607	105810	105810	PM A INSPECTION		15.59	135.00	150.59	3.00	EdvinO	01	5	XX
066-002-000	09012017	1682349	127060	127061	PM B INSPECTION		15.59	135.00	150.59	3.00	EdvinO	01	6	XX
066-003-000	05152017	1665741	112240	112243	PM C INSPECTION		162.80	225.00	387.80	5.00	JaimeO	01	7	XX
066	TOTAL >Preventative Mainten						293.93	1305.00	1598.93					
100	TITLE > VEHICLE TOW													
100-001-000	05192017	0009408	115700	115700	VEHICLE TOW	OUT	0.00	127.50	127.50	0.00		01	1	XX
100	TOTAL >VEHICLE TOW						0.00	127.50	127.50					
111	TITLE > Misc Repair													
111-000-000	09202017	1682302	129610	129609	Misc Repair		0.00	22.50	22.50	0.50	JaimeO	01	5	XX
111-000-000	08162017	1682265	124060	124063	Misc Repair		0.00	45.00	45.00	1.00	EdvinO	01	13	XX
111-000-000	08162017	1682265	124060	124063	Misc Repair		0.00	90.00	90.00	2.00	EdvinO	01	13	XX
111-000-000	02282017	1665487	102750	102751	Misc Repair		39.54	45.00	84.54	1.00	JaimeO	01	13	XX
111	TOTAL >Misc Repair						39.54	202.50	242.04					

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 VEHICLE REPAIR HISTORY REPORT
 FACILITY: 02109

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STARTING VMRS CODE: 000-000-000 DATE: 02/27/2017 VEHICLE: FIRST
 ENDING VMRS CODE: 999-999-999 DATE: 09/26/2017 VEHICLE: LAST

UNIT: 06879 LF MTR: 141111.0 CUR MTR: 141111.0 YR: 14 MAKE: Ford DEPT: 13575 SIZE: H CLASS: ALS FUEL: U

VMRS CODE	DATE	WO NUM	LF-MILS	ODCM	WORK DESCRIPTION	OUT	PARTS	LABOR	TOTAL	HOURS	MECHANIC	CC	RC	WA
001	TITLE > HVAC													
001-000-000	07152017	1665489	129110	129111	HVAC		11.99	45.00	56.99	1.00	WMIles	01	6	XX
001-000-000	06212017	1665937	124840	124837	HVAC		11.99	45.00	56.99	1.00	WMIles	01	13	XX
001-022-000	08072017	1682237	132640	132637	Blower Motor		55.27	67.50	122.77	1.50	JaimeO	01	13	XX
001-022-000	07292017	1665874	131250	131254	Blower Motor		0.00	112.50	112.50	2.50	WMIles	01	5	XX
001-022-000	03162017	1665476	108380	108375	Blower Motor		134.18	135.00	269.18	3.00	Jeusel	01	13	XX
001	TOTAL >HVAC						213.43	405.00	618.43					
002	TITLE > Cab													
002-020-000	03132017	1665502	106700	106700	Door Hinge		50.00	90.00	140.00	2.00	JaimeO	01	5	XX
002-039-000	09212017	1682305	140720	140724	Seat		326.90	67.50	394.40	1.50	EdvinO	01	1	XX
002	TOTAL >Cab						376.90	157.50	534.40					
013	TITLE > Brakes													
013-001-000	06122017	1665581	123430	123433	Front Brakes		311.81	67.50	379.31	1.50	JaimeO	01	5	XX
013-002-000	06122017	1665581	123430	123433	Rear Brakes		143.52	90.00	233.52	2.00	JaimeO	01	5	XX
013	TOTAL >Brakes						455.33	157.50	612.83					
015	TITLE > Steering													
015-005-000	03222017	0322001	109220	109217	Alignment	OUT	0.00	80.00	80.00	0.00		01	13	XX
015-012-000	03232017	1665611	109190	109191	Drag Link		279.24	90.00	369.24	2.00	EdvinO	01	5	XX

015 TOTAL >Steering 279.24 170.00 449.24

017 TITLE > Tires

017-000-000	09212017	1682305	140720	140724 Tires	523.52	90.00	613.52	2.00	EdvinO	01 1 XX
017-000-000	09022017	1682318	137700	137703 Tires	523.52	67.50	591.02	1.50	WMiles	01 5 XX
017-000-000	04242017	1665742	114820	114815 Tires	261.82	45.00	306.82	1.00	EdvinO	01 7 XX
017-000-000	04252017	1665738	114820	114815 Tires	261.82	45.00	306.82	1.00	EdvinO	01 7 XX
017-003-000	07012017	1665997	126560	126556 Mount Tires	523.52	45.00	568.52	1.00	WMiles	01 5 XX
017-003-000	04152017	1665528	113440	113439 Mount Tires	130.78	22.50	153.28	0.50	WMiles	01 13 XX
017-009-000	03132017	1665502	106700	106700 Repair Tire	0.00	45.00	45.00	1.00	JaimeO	01 5 XX
017	TOTAL >Tires				2224.98	360.00	2584.98			

032 TITLE > Starting System

032-000-000	09212017	1682305	140720	140724 Starting System	356.04	67.50	423.54	1.50	EdvinO	01 1 XX
032-000-000	08072017	1682237	132640	132637 Starting System	237.36	67.50	304.86	1.50	JaimeO	01 13 XX
032	TOTAL >Starting System				593.40	135.00	728.40			

042 TITLE > Cooling System

042-017-000	09212017	1682305	140720	140724 RADIATOR	417.53	90.00	507.53	2.00	EdvinO	01 1 XX
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VEHICLE REPAIR HISTORY REPORT
FACILITY: 02109

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STARTING VMRS CODE: 000-000-000 DATE: 02/27/2017 VEHICLE: FIRST
ENDING VMRS CODE: 999-999-999 DATE: 09/26/2017 VEHICLE: LAST

UNIT: 06879 LF MTR: 141111.0 CUR MTR: 141111.0 YR: 14 MAKE: Ford DEPT: 13575 SIZE: H CLASS: ALS FUEL: U

VMRS CODE	DATE	WO NUM	LF-MILS	ODCM	WORK DESCRIPTION	OUT	PARTS	LABOR	TOTAL	HOURS	MECHANIC	CC	RC	WA
042	TOTAL >Cooling System						417.53	90.00	507.53					
066	TITLE > Preventative Mainten													
066-001-000	09212017	1682305	140720	140724	PM A INSPECTION		15.59	135.00	150.59	3.00	EdvinO	01 1 XX		
066-001-000	09022017	1682318	137700	137703	PM A INSPECTION		15.59	135.00	150.59	3.00	WMiles	01 5 XX		
066-001-000	08162017	1682264	134260	134257	PM A INSPECTION		15.59	135.00	150.59	3.00	JaimeO	01 5 XX		
066-001-000	07292017	1665874	131250	131254	PM A INSPECTION		15.59	135.00	150.59	3.00	WMiles	01 5 XX		
066-001-000	07012017	1665997	126560	126556	PM A INSPECTION		15.59	135.00	150.59	3.00	WMiles	01 5 XX		
066-001-000	06122017	1665581	123430	123433	PM A INSPECTION		15.59	135.00	150.59	3.00	JaimeO	01 5 XX		
066-001-000	05272017	1665842	120500	120504	PM A INSPECTION		15.59	135.00	150.59	3.00	WMiles	01 5 XX		
066-001-000	05112017	1665780	117630	117634	PM A INSPECTION		15.59	135.00	150.59	3.00	WMiles	01 5 XX		
066-001-000	04052017	1665646	111690	111685	PM A INSPECTION		22.00	135.00	157.00	3.00	WMiles	01 5 XX		
066-001-000	03232017	1665611	109190	109191	PM A INSPECTION		22.00	135.00	157.00	3.00	EdvinO	01 5 XX		
066-001-000	03132017	1665502	106700	106700	PM A INSPECTION		15.59	135.00	150.59	3.00	JaimeO	01 5 XX		
066-002-000	07172017	1665489	129110	129111	PM B INSPECTION		15.59	135.00	150.59	3.00	WMiles	01 6 XX		
066-003-000	04242017	1665742	114820	114815	PM C INSPECTION		89.29	180.00	269.29	4.00	EdvinO	01 7 XX		
066-003-000	04252017	1665738	114820	114815	PM C INSPECTION		89.29	180.00	269.29	4.00	EdvinO	01 7 XX		
066	TOTAL >Preventative Mainten						378.48	1980.00	2358.48					
071	TITLE > Body													
071-022-000	05112017	1665780	117630	117634	Doors		0.00	112.50	112.50	2.50	WMiles	01 5 XX		
071	TOTAL >Body						0.00	112.50	112.50					
111	TITLE > Misc Repair													
111-000-000	06122017	1665581	123430	123433	Misc Repair		0.00	45.00	45.00	1.00	JaimeO	01 5 XX		
111	TOTAL >Misc Repair						0.00	45.00	45.00					

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VEHICLE REPAIR HISTORY REPORT
FACILITY: 02109

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STARTING VMRS CODE: 000-000-000 DATE: 02/27/2017 VEHICLE: FIRST
ENDING VMRS CODE: 999-999-999 DATE: 09/26/2017 VEHICLE: LAST

UNIT: 08543 LF MTR: 261241.0 CUR MTR: 261241.0 YR: 13 MAKE: Ford DEPT: 13575 SIZE: H CLASS: ALS FUEL: U

VMRS CODE	DATE	WO NUM	LF-MILS	ODCM	WORK DESCRIPTION	OUT	PARTS	LABOR	TOTAL	HOURS	MECHANIC	CC	RC	WA
001	TITLE > HVAC													
001-023-000	06212017	1665929	252130	252130	Blower Fan		116.00	67.50	183.50	1.50	EdvinO	01 13 XX		
001	TOTAL >HVAC						116.00	67.50	183.50					
002	TITLE > Cab													
002-020-000	09212017	1682308	261200	261202	Door Hinge		45.00	90.00	135.00	2.00	JaimeO	01 5 XX		
002	TOTAL >Cab						45.00	90.00	135.00					
012	TITLE > Rear Axle													
012-066-000	06212017	1665929	252130	252130	Service Diff		29.43	45.00	74.43	1.00	EdvinO	01 13 XX		
012-066-000	04112017	1665657	250890	250885	Service Diff		29.56	45.00	74.56	1.00	EdvinO	01 6 XX		
012	TOTAL >Rear Axle						58.99	90.00	148.99					
013	TITLE > Brakes													
013-005-000	09012017	1682316	259640	259640	Parking Brake		224.80	90.00	314.80	2.00	WMiles	01 13 XX		
013-005-000	06212017	1665929	252130	252130	Parking Brake		70.00	180.00	250.00	4.00	EdvinO	01 13 XX		
013-005-000	04112017	1665657	250890	250885	Parking Brake		174.98	90.00	264.98	2.00	EdvinO	01 6 XX		
013	TOTAL >Brakes						469.78	360.00	829.78					
015	TITLE > Steering													
015-021-000	04112017	1665657	250890	250885	Steering Pump		160.15	90.00	250.15	2.00	EdvinO	01 6 XX		
015	TOTAL >Steering						160.15	90.00	250.15					
033	TITLE > Ignition System													
033-001-000	08012017	1682212	254890	254888	Spark Plug		0.00	90.00	90.00	2.00	EdvinO	01 5 XX		
033	TOTAL >Ignition System						0.00	90.00	90.00					

Contract #	IP Family	Serial Number	Customer	Start Date	End Date	PM Last Completed	PM Schedule Date	PM Due Date
DS018756	LPCR FAMILY	40595048	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44409453	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP1000	41631886	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44408745	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44407464	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP500	31909782	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP500	13467231	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP500	32370797	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LPCR FAMILY	40595054	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP1000	41631887	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44408408	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44407574	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44408363	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44406367	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44409277	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44408615	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP500	30120120	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017

Contract #	IP Family	Serial Number	Customer	Start Date	End Date	PM Last Completed	PM Schedule Date	PM Due Date
DS018756	LP500	13669221	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44409265	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44407509	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	43474004	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44407361	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44407263	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44407302	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44407765	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44407649	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44407210	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44406833	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP500	13005153	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44408501	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP500	13005174	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44407074	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	40595053	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44406654	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017

Contract #	IP Family	Serial Number	Customer	Start Date	End Date	PM Last Completed	PM Schedule Date	PM Due Date
DS018756	LP500	14309661	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LPCR FAMILY	40595055	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44406688	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44406571	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44409188	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44407670	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44407458	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44407311	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44412757	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LPCR FAMILY	40595051	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP500	32171079	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LPCR FAMILY	40595049	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44408805	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP500	13000041	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LPCR FAMILY	40593395	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44409506	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP500	13673742	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017

Contract #	IP Family	Serial Number	Customer	Start Date	End Date	PM Last Completed	PM Schedule Date	PM Due Date
DS018756	LPCR FAMILY	40595057	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44406218	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44408498	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44407527	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44407273	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44406792	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44406707	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44406862	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44406607	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44406489	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LPCR FAMILY	40595052	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44408484	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44407837	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44407543	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44409248	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LPCR FAMILY	40595046	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44409300	AMR-Riverside (13575)	1/1/2017	12/31/2017			

Contract #	IP Family	Serial Number	Customer	Start Date	End Date	PM Last Completed	PM Schedule Date	PM Due Date
DS018756	LP15	44406686	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44409171	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44406655	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44408529	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP500	32346718	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44406994	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44406771	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44409224	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44408395	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LPCR FAMILY	40593394	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LPCR FAMILY	40595050	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44407127	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44406608	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44408697	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44408649	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP500	13673733	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP500	32401668	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017

Contract #	IP Family	Serial Number	Customer	Start Date	End Date	PM Last Completed	PM Schedule Date	PM Due Date
DS018756	LP500	32187812	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44408683	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44411152	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44409521	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44406981	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP500	32520479	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44409221	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44407403	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44408680	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44409180	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44409447	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LPCR FAMILY	40595056	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44409118	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44408438	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LPCR FAMILY	40595047	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44409390	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44409196	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017

Contract #	IP Family	Serial Number	Customer	Start Date	End Date	PM Last Completed	PM Schedule Date	PM Due Date
DS018756	LP15	44407614	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44407199	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44406708	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP500	13989911	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44408427	AMR-Riverside (13575)	1/1/2017	12/31/2017		10/31/2017	12/1/2017
DS018756	LP15	44407844	AMR-Riverside (13575)	1/1/2017	12/31/2017			
DS018756	LP15	44406631	AMR-Riverside (13575)	1/1/2017	12/31/2017			

DURABLE MEDICAL EQUIPMENT (DME) **PREVENTIVE MAINTENANCE PROGRAM**

All Field Personnel have the primary responsibility for the daily maintenance and security of all assigned DME while the equipment is in their possession. They are responsible for reporting any condition considered outside the normal working parameters for that piece of equipment. Daily checkout procedures will include a confirmation of appropriate baseline functions of all assigned DME. In addition to the daily and routine systems checks of all equipment, the following manufacturers will provide the listed preventive maintenance and repair functions based on their recommendations.

Medtronic-Physio Control Corporation will provide scheduled, semi-annual preventive maintenance and follow on repair service on the following equipment:

- Lifepak 15 defibrillator/monitors
- Lifepak 500 Automatic External Defibrillators
- Battery II Control Systems

Medtronic Physio Control maintains the database schedule for all defibrillator/monitors and battery support systems and coordinates through the Support Services Department to schedule routine preventive maintenance and any service work issues. All PM and minor service calls are completed onsite whenever practicable.

Pacific Bio-Medical will provide scheduled preventive maintenance and follow on repair service on the following equipment:

- LTV 1200 Ventilators
- S-SCOR Portable Suction Devices

Preventive Maintenance will be performed after 10,000 hours of usage. This PM information is programmed into the ventilator and activates when the ventilator approaches the 10,000 hour mark, alerting the operator of the need for a PM Service. All PM's and repair services are conducted at their facility.

McKesson Medical provides PM and repair services on the following equipment:

- IVAC Medication Pumps

McKesson Medical's PM schedule is conducted each time a piece of equipment undergoes repair services. The schedule is a sticker attached to each piece of equipment indicating the date the equipment was repaired and calibrated and when the equipment is to be returned for service again. (See attachment).

Maintenance files are maintained at the AMR Riverside County Operations. These files include information on when equipment went into service, last PM, next scheduled PM and type of PM/service performed. All PM's will be scheduled and performed per manufacturer's recommendations. All PM's will include testing and calibration per manufacturer's recommendations.

AMERICAN MEDICAL RESPONSE
RIVERSIDE COUNTY
LIFEPAK 15 DEFIBRILLATOR/MONITOR

Preventative Maintenance Schedule

The LP 15 Monitor is setup on a bi-annual preventative maintenance schedule established by the manufacturer and the local Medtronic Physic Bio-Medical technician as part of the warranty program. This schedule includes routine preventative maintenance and repair as well as re-calibration. All maintenance and repair records are retained by Medtronic Physic with copies of said work performed distributed to each division

Maintenance

Refer to Operators Checklist and Instructions.

Repair Procedure

Contact Art Santos @ 760-429-5274

LIFEPAK®15 Monitor/Defibrillator Operator's Checklist

**PHYSIO
CONTROL**

This is a recommended checklist to use to inspect and test this monitor/defibrillator. Daily inspection and test is recommended. This form may be reproduced.

Unit Serial No: _____ Location: _____

Instruction	Recommended Corrective Action	Date									
		Initials									

✓ each box after completing

1. Inspect physical condition for:

Foreign substances

Clean the device.

Damage or cracks

Contact a qualified service technician.

2. Inspect power source for:

Broken, loose, or worn battery pins

Contact a qualified service technician.

Damaged or leaking battery

Recycle or discard battery.

Spare battery available

Obtain fully charged spare battery.

Damage to power adapter and cables

Contact a qualified service technician.

3. Inspect ECG cable and cable port for:

Cracking, damage, broken, or bent parts or pins

Replace ECG cable.
If port is damaged, contact qualified service technician.

4. Check ECG electrodes and therapy electrodes for:

Use By date

Replace if date passed.

Spare electrodes available

Obtain spare electrodes.

Damaged, opened package

Discard and replace electrodes.

5. With batteries installed, disconnect from power adapter (if using), press ON and observe for:

Momentary illumination of self-test messages and LEDs, and speaker beep

If absent, contact a qualified service technician.

Two fully charged batteries

Replace low battery or charge installed battery using power adapter.

Service indicator ()

If illuminated, contact a qualified service technician.

6. With batteries installed, reconnect power adapter to device and check for: (If not using a power adapter, go to Step 7.)

Power adapter LED strip is illuminated

If absent, check connections.

Auxiliary power LED on device is illuminated

If problem persists, contact a qualified service technician.

Battery charging LED on device is illuminated or flashing

If absent, check batteries. If problem persists, contact a qualified service technician.

7. Perform QUIK-COMBO® therapy cable check in Manual mode:*(If this cable is not used with the defibrillator, go to Step 8.)

a. Disconnect and examine cable for cracking, damage, broken, or bent parts or pins.

Replace QUIK-COMBO therapy cable.

b. Connect therapy cable to defibrillator and the Test Load.

If CONNECT ELECTRODES, PADDLES LEADS OFF, CONNECT CABLE, or ABNORMAL ENERGY DELIVERY message appears, replace therapy cable and repeat check. If problem continues, remove the defibrillator from use and contact a qualified service technician.

c. Select LEAD, then PADDLES.

d. Select 200 JOULES and press CHARGE.

e. Press (shock) button.

f. Confirm ENERGY DELIVERED message appears.

If message does not appear, replace therapy cable and repeat check.

g. Remove Test Load from cable and verify PADDLES LEADS OFF appears.**

If absent, contact a qualified service technician.

Instruction	Recommended Corrective Action	Date							
		Initials							

8. Perform standard (hard) paddles check in Manual mode.*
(If hard paddles are not used with the defibrillator, go to Step 9.)

- | | |
|--|---|
| a. Disconnect and examine cable for cracking, damage, broken, or bent parts or pins. | Replace paddles. |
| b. Connect paddles to defibrillator. | |
| c. Examine for paddle surface pitting and presence of dried or wet gel. | Replace paddles, or clean paddles. |
| d. Press LEAD. Select PADDLES. | |
| e. On paddles, turn ENERGY SELECT dial to 10 JOULES.*** | If selected energy does not change or charging does not occur, obtain spare paddles and repeat check. If problem continues, remove the defibrillator from use and contact a qualified service technician. |
| f. With paddles in paddle wells, press CHARGE button on paddle. | |
| g. Press only one ⚡ (shock) button and release. Confirm that energy was not discharged. | If energy discharges with one button press, obtain spare paddles and repeat check. |
| h. Press the other ⚡ (shock) button and release. Confirm that energy was not discharged. | |
| i. Press both ⚡ (shock) buttons and confirm ABNORMAL ENERGY DELIVERY message appears. | If message does not appear, obtain spare paddles and repeat check. If problem continues, remove the defibrillator from use and contact a qualified service technician. |
| j. Remove paddles from wells, and confirm artifact on screen. | If task fails, obtain spare paddles and repeat check. If problem continues, remove the defibrillator from use and contact a qualified service technician. |
| k. Place paddle surfaces together, and confirm flat line on screen. | |
| l. Return paddles securely to paddle wells. | |

9. Perform User Test if 3:00 am auto test results not available:

- | | |
|----------------------------------|---|
| a. Press OPTIONS. | If User Test fails, remove the defibrillator from use and contact a qualified service technician. |
| b. Select USER TEST in menu. | |
| c. Confirm test results printed. | |

--	--	--	--	--	--	--	--	--	--

10. Check ECG printer for:

- | | |
|-----------------------|---|
| Adequate paper supply | Add new paper, if necessary. |
| Ability to print | If not working, contact a qualified service technician. |

11. If using wireless data transmission, test transmission method:

- | | |
|--------------------------------------|---|
| a. Establish a Bluetooth connection. | If not working, contact a qualified service technician. |
| b. Send a test transmission. | |

12. Turn off defibrillator.

(Press and hold ON for up to 2 seconds.)

--	--	--	--	--	--	--	--	--	--

13. Confirm that the device is stowed, mounted, or positioned securely.

--	--	--	--	--	--	--	--	--	--

* The defibrillator delivers up to 360 joules of electrical energy. Unless discharged properly, this electrical energy may cause serious personal injury or death. Do not attempt to perform this test unless you are qualified by training and experience.

** Failure to remove the Test Load may result in delay of therapy during patient use.

*** Discharging > 10 joules in the paddle wells may damage the defibrillator.

**AMERICAN MEDICAL RESPONSE
RIVERSIDE DIVISION**

LTV 1200 VENTILATOR

Preventive Maintenance Schedule

- a. Appendix B of the Operator's Manual lists the recommended maintenance schedules.

Appendix B - SET UP / MAINTENANCE

Recommended Maintenance Schedule

The LTV® Series Ventilator is designed to operate for extended periods of time with minimal routine maintenance. The following periodic maintenance is recommended:

Hours of Service ⁷³	Maintenance Required
Before initial use	<ul style="list-style-type: none"> • Charge the Internal Battery by plugging the ventilator into an AC power source for 24 hours. • Setup the ventilator/accessories per <i>Appendix C - Installation and Checkout</i>.
Before connecting to patient	<ul style="list-style-type: none"> • Check the ventilator for proper operation per <i>Appendix C - Installation and Checkout</i>.
While in storage, every two months	<ul style="list-style-type: none"> • Recharge the Internal Battery by plugging the ventilator into an AC power source for 24 hours⁷⁹.
Daily	<ul style="list-style-type: none"> • Check the Inlet Filter, clean if necessary. • Check the Fan Filter, clean if necessary.
Every 750 hours or once a month	<ul style="list-style-type: none"> • Clean the Fan Filter. • Clean the Exterior Air Inlet Filter. • Check the ventilator for proper operation per <i>Appendix C - Installation and Checkout</i>.
Every 10,000 hours or two years ⁸⁰	<ul style="list-style-type: none"> • Replace the Internal Battery⁸¹ only with Pulmonetic Systems battery P/N 10140⁸². • Calibrate the Transducers. • Replace the Motor Board. • Clean or replace the Interior Air Inlet Filter. • Clean or replace the O₂ Inlet Filter.
Every 30,000 hours or six years, whichever comes first ⁸⁰	<ul style="list-style-type: none"> • Replace the Turbine Manifold Assembly. • Replace the Solenoid Manifold. • Replace the Flow Valve. • Replace the Rotary Knob Assembly. • Replace the O₂ Blender. • Replace the Fan Assembly. • Replace all Silicone Tubing. • Check the Thermo Pads for compression and replace if necessary.

⁷³ To check the number of hours the ventilator has been in service, see *Chapter 10 - Extended Features, Usage Meter*.

⁷⁹ If the battery has been deeply discharged, it may take several charge and discharge cycles before the battery can be charged to its full capacity.

⁸⁰ 10,000 hour, two year and/or 30,000 hour, six year Extended Maintenance and ventilator repair must be performed by a Pulmonetic Systems factory trained service technician.

⁸¹ Replacement at 10,000 hours or 2 years is based on normal use of up to 200 charge cycles. The battery may need to be replaced more frequently if it is being charged more often. The battery should also be replaced any time it fails to reach a full charge, or if the ventilator runs for less than ½ hour on a fully charged battery.

⁸² The LTV® Internal Battery (P/N 10140) is contained in LTV® Internal Battery Replacement Kit, P/N 11636.

AMERICAN MEDICAL RESPONSE, RIVERSIDE COUNTY

S-SCORT PORTABLE SUCTION

PREVENTATIVE MAINTENANCE SCHEDULE

None

Maintenance

- a. If the vacuum line between the pump and canister is moist, it is possible that fluids have reached the vacuum pump. The unit must be opened to check the condition of the pump.
- b. The capacity of the battery should be checked periodically by running the unit on battery power only. Detach from the charging source and run the unit for 15 minutes and look for a blinking yellow light.
- c. If the Internal Dual Mode Charger appears defective, return the unit to the factory for repair. Do not attempt to repair the Internal Dual Mode Charger.
- d. Cleaning: Disconnect from power source prior to cleaning. Use mild detergent. Do not use alcohol, solvents or cleaning solutions. For interior cleaning use dry compressed air.

Repair Procedure

Contact technical assistance at (916)967-3652.



2017 CAAS
Mutual Aid Process
102.01.01

Documents include:

- Copy of AMR Riverside County's Operational process for mutual aid
- Copy of Letter of Understanding (LOU) regarding mutual aid with Idyllwild Fire Protection District
- Copy of Mutual Aid Agreement with AMR San Bernardino County
- Copy of Mutual Aid Agreement with AMR River Medical
- Email with REMSA regarding meeting to discuss establishing a mutual aid agreement with Desert Air Ambulance
- Copy of email with draft language for development of mutual aid Agreement with Desert Air Ambulance
- REMSA Draft Flowchart - mutual aid for Blythe area
- 2017 Mutual Aid Reports



Revised April 26, 2017

Mutual Aid Summary of Operational Process

As per Exhibit 3 of the master agreement between Riverside County and American Medical Response (AMR), it states, "Contractor (AMR) shall comply with provisions of the County Master Ambulance Mutual Aid Policy as adopted and implemented by REMSA." 3.4.2 States, "Contractor shall assist other EOA and non-EOA ambulance providers and provide mutual aid inside and outside the Riverside County Operational Area as required by REMSA."

For mutual aid within Riverside County, for the purposes of ambulance transportation, AMR Riverside County would contact either a surrounding AMR Operation or other non-AMR ALS Ambulance provider for additional resources.

When another AMR Western Riverside County Operation is contacted for mutual aid, the request would first go out to an adjoining operation. Next the request would move out to adjoining counties with San Bernardino AMR Operations next (as their protocols and policies most resemble ours, their acute facilities would be utilized next in a large incident, and they currently have several units "cross permitted" in Riverside County.)

When an Eastern AMR Riverside County Operations requests mutual aid from another AMR Operation outside of Riverside County, that request will most likely go to AMR River Medical out of Arizona for responses into the Blythe area.

In the event mutual aid is requested from a non-AMR ALS Ambulance provider such as occurs in the Desert Cities Operation, the request will be made by AMR's Communication Center to the requested agencies Communication Center once it is deemed necessary and there are no available AMR resources to send. AMR Desert Cities provides and receives mutual aid to and from the following non-AMR Agencies:

- Cal Fire (Indio)
- Cal Fire (Indian Wells)
- Cal Fire (Palm Desert)
- Cal Fire (Rancho Mirage)
- Cathedral City Fire

In the event mutual aid is required by AMR, the following would occur:

- The communications center will make the request for mutual aid immediately following the receipt of a call when there are no other AMR ALS units available to respond. The On duty Communications Supervisor will be notified.



- When mutual aid is needed in the Western portion of the county the communications center will immediately dispatch a unit from the nearest adjoining AMR Operation. The communication and Operations Supervisors will be notified.
- In the event out-of-county mutual aid is needed, the System Status Controller (SSC) will immediately contact the AMR communications center in San Bernardino County or Arizona with the request. The Communications and Operations Supervisors will be contacted by the SSC who will then contact the Communications Managers and Operations Managers from each operation. Should additional resources be needed from other surrounding counties, the General Manager will be notified about the request from the Communications Manager.
- AMR will notify the EMS Agency of out-of-county mutual aid requests from San Bernardino County and all appropriate paperwork will be filed with the county as required.
- Mutual aid in the Eastern portion of Riverside County is often provided between AMR Desert Cities and AMR River Medical or one of the previously listed non-AMR ALS ambulance providers. When mutual aid is needed in the Desert Cities Operation AMR's communications center will contact the appropriate Communication Center with the request and provide all pertinent call information to the call taker.
- The SSC will contact the Communications Supervisor to notify them mutual aid was requested and then will log it into the CAD using the appropriate CAD code/s.
- AMR's SSC is to always request mutual aid should the need arise and there are no available AMR ALS resources available to respond. Should the request be denied the SSC is to log the denial into the CAD notes and dispatch the next available AMR ALS resource that becomes available.

In the event a mutual aid request is made to AMR, by another ALS ambulance provider the following is to occur:

- The SSC is to confirm with the requesting agency that it is a mutual aid request.
- The SSC will dispatch the requested resources as per AMR's Mutual Aid policy and log it into the CAD using the appropriate CAD codes.
- The SSC will notify the on duty Communications Supervisor of the request.
- The SSC is to provide the requesting agency of the location and estimated ETA of the responding unit.

Letter of Understanding

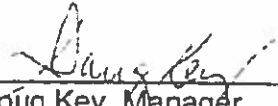
Ambulance Cooperative Aid among the Riverside County Fire Department, Idyllwild Fire Protection District, American Medical Response and the Riverside County Emergency Medical Services Agency

In an effort to better serve the residents of Riverside County and in particular those residents in the Mountain Plateau Emergency Ambulance Non-Exclusive Operating Area and Idyllwild Fire Protection District Zone I Emergency Ambulance Exclusive Operating Area the Letter of Understanding (LOU) executed May 16, 2016 is hereby amended and agreed upon.

1. The Riverside County Fire Department (RCFD), Idyllwild Fire Protection District (IFPD), American Medical Response (AMR) and Riverside County Emergency Medical Services Agency (REMSA) all support the most expedient emergency transport of patients. All parties will work collaboratively for the benefit of the citizens to be served.
2. This LOU is a cooperative aid agreement between RCFD, IFPD, AMR and REMSA and applies to EMS for first responder and ambulance services.
3. This LOU in no way changes the current County Ambulance Transportation Plan and agreements with AMR and IFPD, but acts only as an adjunct agreement to ensure the availability of ambulance transport in a timely manner for the San Jacinto Mountain and Santa Rosa Mountain communities.
4. For the area applicable to this agreement, fire protection and related fire protection services such as, but not limited to, fire suppression, emergency medical, technical rescue and hazmat will remain the responsibility of the home fire jurisdiction. Other than as requested for ambulance transport mutual aid, IFPD will not have fire jurisdiction in the Mountain Plateau emergency ambulance non-exclusive operating area other than that requested by the RCFD.
5. This LOU makes no suggestion to change existing fire jurisdiction responsibility nor does it provide any authority to any party to act on behalf of the other parties unless and until the home jurisdiction arrives and takes jurisdictional command of the incident.
6. This LOU includes by reference all REMSA policy and procedures protocols currently in effect. All Parties hereto agree to follow these policies as are currently approved or as amended by mutual consent during the term of this agreement.


7. Ambulance staffing will be in accordance with applicable REMSA agreements, policy, protocols and procedures.
8. All parties agree that they will only provide additional EMS personnel for transportation purposes when the patient is deemed critical and additional personnel are needed for patient care.
9. All parties agree that transporting ambulances will follow all County ambulance contract provisions for restocking and replacement of supplies.
10. All parties agree that dispatch and full emergency response and move up and cover activities of ambulances under the terms of this agreement must be coordinated by the Riverside County Emergency Command Center.
11. This agreement will be in effect from May 16, 2016 through June 30, 2020 unless otherwise amended or cancelled.

This LOU constitutes the entire agreement and includes: (1) Mountain Plateau Emergency Ambulance Non-Exclusive Operating Area Map, (2) Idyllwild Fire Protection District Zone I Emergency Ambulance Exclusive Operating Area Map, (3) Mountain Plateau Ambulance Backup Process, and (4) IFPD Zone I Ambulance Backup Process. Any other additions or attachments are not represented by this agreement.



Doug Key, Manager
American Medical Response

5-16-16
DATE



Patrick Reitz, Fire Chief
Idyllwild Fire Protection District

05/16/2016
DATE



Greg Everhart, Deputy Chief
Riverside County Fire Department

5-16-16
DATE



Bruce Barton, Director
Riverside County EMS Agency

5-16-16
DATE



Medical Services Mutual Aid Agreement - SAN BERNARDINO

THIS AGREEMENT is made between the American Medical Response company and the provider set out on the signature page of this Agreement. The parties shall mutually be referred to as the "Contracting Agencies" or singularly as "Agency".

WHEREAS, the Contracting Agencies maintain paid and/or volunteer emergency medical services, together with personnel and equipment used to provide such services;

WHEREAS, more than one medical emergency may arise contemporaneously in one or the other of the jurisdictions of the Contracting Agencies resulting in greater demands than the manpower and/or equipment of that Agency can handle or an emergency may arise that is of such intensity that it cannot be handled solely by the equipment and manpower of the Agency in whose jurisdiction the emergency occurs or an emergency may arise which transcends jurisdictional boundaries;

WHEREAS, non-emergency or scheduled requests for medical transportation may arise that cannot be performed with the manpower of the Agency in whose jurisdiction the non-emergency occurs or a non-emergency may arise which transcends jurisdictional boundaries;

NOW, THEREFORE, in consideration of the mutual covenants, performances and agreements hereafter set forth, it is mutually understood and agreed between the Contracting Agencies as follows:

1. **Definitions.** The "Answering Agency" is the Agency that responds to the request for emergency medical services or non-emergency medical services. The "Requesting Agency" is the Agency requesting medical transportation services assistance under this Agreement.
2. **Mutual Assistance and Aid.** Subject to the exceptions stated below, the Contracting Agencies agree to respond when possible to requests for medical transportation services assistance. These requests by the requesting agency may or may not originate within jurisdictional boundaries of the other Contracting Agency. The extent of any response to a request, including the choice of personnel and equipment, shall be entirely within the discretion of the Answering Agency. Included in such Answering Agency's discretion shall be a determination of whether or not such a request for assistance may be answered without jeopardizing the safety and protection of the citizens and property of the Answering Agency. Any decision not to respond to a request for aid shall be promptly communicated to the Requesting Agency.

3. **Requests for Assistance and Aid.** An authorized official representing a Requesting Agency shall make all requests for aid. Each request for aid is subject to approval by an official of the Answering Agency, without charge to the Requesting Agency, and with the understanding that personnel and equipment of the Answering Agency shall be subject only to the liability, workers' compensation, and/or other insurance of that Answering Agency. Any request for assistance hereunder should include a statement of the amount and type of equipment and personnel requested, and shall specify the location to which the equipment and response personnel are to be dispatched. However, an official of the Answering Agency shall determine the type and quantity of equipment and personnel to be furnished. The equipment and personnel of the Answering Agency shall at all times be under the supervision and control of the official(s) of that Answering Agency.

4. **Emergency Medical Services.** When emergency medical services are requested, the Answering Agency shall have its personnel report to the Incident Commander ("IC") or other scene commander at the location to which the equipment and personnel are dispatched. All activities shall be coordinated with the IC. Though coordination of activities occurs by the IC, the equipment and personnel of the Answering Agency shall be under the ultimate supervision of the designated personnel of the Answering Agency. The personnel of the Answering Agency shall coordinate the Answering Agency's efforts with the IC. At no time shall the Answering Agency be expected to operate contrary to standing orders or protocols of its physician advisor, company policies, operating licenses, or federal or state regulations, except as specifically provided for in writing by local, state or federal authority and/or except when destination policies are otherwise modified as necessary.

If at any time the Answering Agency responds to a mutual aid call for emergency medical services where the Requesting Agency is not at the scene, the Answering Agency will follow the treatment protocols and procedures of its physician advisor or other medical control, pursuant to the applicable Incident Command System. Response personnel shall contact the medical base of their own Agency for further orders and designation sites.

It is agreed that the Answering Agency shall not be responsible for any response time compliance or penalties under this Agreement.



Medical Services Mutual Aid Agreement

5. **Release of Answering Agency.** For emergency medical services, an Answering Agency shall be released from service by the Requesting Agency/Incident Commander when the services of the Answering Agency are no longer required, or when the Answering Agency determines, in its discretion, that its services are needed in another jurisdiction.

For non-emergency medical services, an Answering Agency shall be released from service when the services are complete or the Requesting Agency notifies the Answering Agency that the services are no longer required.

6. **Rights and Privileges Retained.** The personnel of each Agency, while engaged in performing any mutual aid service, activity, or undertaking under provisions of this Agreement, shall have and retain all rights and privileges notwithstanding that mutual aid service is being performed in or for the other Agency. Additionally, the Answering Agency's physician advisor and appropriate medical protocols shall govern the Answering Agency's actions.
7. **Compensation and Billing.** The Answering Agency shall be responsible for all Patient and third party billing, and agrees that the rates to be billed shall comply with applicable laws.
8. **Indemnification.** Each party will indemnify and hold the other party harmless from and against liability claims resulting from or alleged to result from any negligence or willful misconduct of the indemnifying party related to the performance of this Agreement.
9. **Insurance.** Each party represents that it has and will maintain comprehensive automobile insurance, comprehensive general liability insurance, and professional liability insurance all in minimum amounts that are customary and usual within the emergency medical services industry and workers' compensation insurance in the statutory required amounts.
10. **Notices.** Any notice required or permitted by this Agreement shall be in writing and shall be delivered as follows, with notice deemed given as indicated: (a) by personal delivery, when delivered personally; (b) by overnight courier, upon written verification of receipt; (c) by facsimile transmission, upon acknowledgment of receipt of electronic transmission; or (d) by certified or registered mail, return receipt requested, upon verification of receipt. Notice shall be sent to the following addresses:

If to Other Agency:
American Medical Response

879 Marlborough Avenue
Riverside, CA 92507

If to AMR:

General Manager
American Medical Response
7925 Center Avenue
Rancho Cucamonga, CA 91730

With Mandatory Copy to:

Legal Department
American Medical Response, Inc.
6200 South Syracuse Way, Suite 200
Greenwood Village, Colorado 80111

11. **Term.** The initial term of this Agreement shall be one year, commencing on the commencement date hereof, and this Agreement shall automatically renew for subsequent one-year periods thereafter, subject to the termination rights herein. The initial term and all renewal periods shall be cumulatively referred to as the "Term".
12. **Termination.** Each party may terminate this Agreement: (a) at any time without cause and at its sole discretion upon fifteen (15) days written notice to the other party; or (b) immediately upon the material breach of this Agreement by the other party.
13. **Referrals.** It is not the intent of either party that any remuneration, benefit or privilege provided for under this Agreement shall influence or in any way be based on the referral or recommended referral by either party of patients to the other party or its affiliated providers, if any, or the purchasing, leasing or ordering of any services other than the specific services described in this Agreement. Any payments specified herein are consistent with what the parties reasonably believe to be a fair market value for the services provided.
14. **Relationship.** In the performance of this Agreement, each party hereto shall be, as to the other, an independent contractor and neither party shall have the right or authority, express or implied, to bind or otherwise legally obligate the other. Nothing contained in this Agreement shall be construed to constitute either party assuming or undertaking control or direction of the operations, activities or medical care rendered by the other. The parties' administrative staff shall meet on a regular basis to address issues of mutual concern related to the provision of aid and the parties' respective rights and obligations hereunder. It is



Medical Services Mutual Aid Agreement

agreed that the parties shall not be liable for payment of any salary, wages, or other compensation for any of the other Agency's personnel performing services under this Agreement.

15. **Force Majeure.** Neither party shall be responsible for any delay in or failure of performance resulting from acts of God, riot, war, civil unrest, natural disaster, labor dispute or other circumstances not reasonably within its control.
16. **Compliance.** The parties will comply in all material respects with all applicable federal, state and local laws and regulations, including the federal Anti-kickback Statute. Each party's ambulances will conform to applicable state and local regulations for medical equipment for ambulances and be duly licensed for the transportation of patients. All personnel staffing vehicles that provide the Services will be licensed or certified as required by applicable law.
17. **Compliance Program and Code of Conduct.** AMR has made available to the Facility a copy of its Code of Conduct, Anti-kickback policies and other compliance policies, as may be changed from time-to-time, at AMR's web site, located at: www.amr.net, and the Facility acknowledges receipt of such documents. AMR warrants that its personnel shall comply with AMR's compliance policies, including training related to the Anti-kickback Statute.
18. **Non-Exclusion.** Each party represents and certifies that neither it nor any practitioner who orders or provide Services on its behalf hereunder has been convicted of any conduct that constitutes grounds for mandatory exclusion as identified in 42 U.S.C. § 1320a-7(a). Each party further represents and certifies that it is not ineligible to participate in Federal health care programs or in any other state or federal government payment program. Each party agrees that if DHHS/OIG excludes it, or any of its practitioners or employees who order or provide Services, from participation in Federal health care programs, the party must notify the other party within five (5) days of knowledge of such fact, and the other party may immediately terminate this Agreement, unless the excluded party is a practitioner or employee who immediately discontinues ordering or providing Services hereunder.
19. **Miscellaneous.** This Agreement (including the Schedules hereto): (a) constitutes the entire agreement between the parties with respect to the subject matter hereof, superseding all prior oral or written agreements with respect thereto; (b) may be amended only by written instrument executed by both parties; (c) may

not be assigned by either party without the written consent of the other party, such consent not to be unreasonably withheld; (d) shall be binding on and inure to the benefit of the parties hereto and their respective successors and permitted assigns; (e) shall be interpreted and enforced in accordance with the laws of the state where the Services are performed, without regard to the conflict of laws provisions thereof, and the federal laws of the United States applicable therein; (f) may be executed in several counterparts (including by facsimile), each of which shall constitute an original and all of which, when taken together, shall constitute one agreement; and (g) shall not be effective until executed by both parties. In the event of a conflict between this Agreement and any Schedule hereto, the terms of this Agreement shall govern.

[Signature page to follow]



Medical Services Mutual Aid Agreement

IN WITNESS WHEREOF, the parties have hereto
executed this Agreement as of October 01, 2013
("Commencement Date").

American Medical Response of Inland Empire

By: *Renee D.S. Colarossi*
Renee D.S. Colarossi
General Manager

American Medical Response

By: *Doug Key*
Print Name: *DOUG KEY*

Print Title: *General Manager/Riverside*

Schedule A - BLYTHE

This attachment is intended to serve as the process to be used in the event Mutual aid is required by either American Medical Response Blythe Operation located in the City of Blythe California, and/or American Medical Response River Medical located in Lake Havasu Arizona however has stations located in the communities of Quartzite and Parker Arizona.

For the purposes of this agreement, mutual aid may need to be requested by either AMR Operation whenever emergency call volume is greater than the resources that are available for that given response area.

Both AMR Blythe and AMR River Medical provide ALS Paramedic level in the Cities and communities listed above.

Reasons to request mutual aid include but may not be limited to:

- Anytime the 9-1-1 system demand in a given area exceeds the ability of the AMR ALS resources for the geographical areas of Blythe and surrounding communities on the California side OR the community of Ehrenburg, Quartzite and Parker and other surrounding communities on the Arizona side.
- Multi Casualty Incidents (MCI)

This Agreement only covers mutual aid for emergent calls that are generated through the 911 system.

Request for mutual aid are made by the communications center for either AMR Operation by utilizing the following contact numbers:

- **AMR Riverside Communications:** (800) 549-1058 or (760) 327-1313
- **AMR River Medical Communications:** (928) 855-3428

Mutual aid requests for the City of Blythe and surrounding communities

In the event all the ALS Ambulances assigned to the City of Blythe and surrounding communities are assigned to calls, The AMR Riverside County Communications Center will immediately contact AMR River Medical and request that they send an ALS Ambulance from the Arizona side to the State Line to provide coverage for the City of Blythe and surrounding communities should another emergency request for service occur.

In the event AMR River Medical does not have an available ALS unit to send for coverage, the AMR Riverside Communications Center is to contact the next closest mutual aid provider, within the immediate area, for mutual aid coverage. Should another request for emergency service occur while there are no ALS ambulances immediately available and if no other mutual aid providers are available, AMR Riverside Communications Center will immediately respond a unit from the Palm Springs operation.

Mutual aid requests for Ehrenburg and surrounding communities

In the event the ALS Ambulances assigned to the communities of Ehrenburg, Quartzite and/or Parker areas of Arizona are assigned to calls and additional resources from the AMR River Medical Operation are not available to respond or provide coverage for those communities, AMR River Medical's

Schedule A

Communication Center will contact AMR Riverside's Communication Center to request possible system coverage or mutual Aid response as needed.



Medical Services Mutual Aid Agreement

THIS AGREEMENT is made between the American Medical Response company and the provider set out on the signature page of this Agreement. The parties shall mutually be referred to as the "Contracting Agencies" or singularly as "Agency".

WHEREAS, the Contracting Agencies maintain paid and/or volunteer emergency medical services, together with personnel and equipment used to provide such services;

WHEREAS, more than one medical emergency may arise contemporaneously in one or the other of the jurisdictions of the Contracting Agencies resulting in greater demands than the manpower and/or equipment of that Agency can handle or an emergency may arise that is of such intensity that it cannot be handled solely by the equipment and manpower of the Agency in whose jurisdiction the emergency occurs or an emergency may arise which transcends jurisdictional boundaries;

WHEREAS, non-emergency or scheduled requests for medical transportation may arise that cannot be performed with the manpower of the Agency in whose jurisdiction the non-emergency occurs or a non-emergency may arise which transcends jurisdictional boundaries;

NOW, THEREFORE, in consideration of the mutual covenants, performances and agreements hereafter set forth, it is mutually understood and agreed between the Contracting Agencies as follows:

1. **Definitions.** The "Answering Agency" is the Agency that responds to the request for emergency medical services or non-emergency medical services. The "Requesting Agency" is the Agency requesting medical transportation services assistance under this Agreement.
2. **Mutual Assistance and Aid.** Subject to the exceptions stated below, the Contracting Agencies agree to respond when possible to requests for medical transportation services assistance. These requests by the requesting agency may or may not originate within jurisdictional boundaries of the other Contracting Agency. The extent of any response to a request, including the choice of personnel and equipment, shall be entirely within the discretion of the Answering Agency. Included in such Answering Agency's discretion shall be a determination of whether or not such a request for assistance may be answered without jeopardizing the safety and protection of the citizens and property of the Answering Agency. Any decision not to respond to a request for aid shall be promptly communicated to the Requesting Agency.
3. **Requests for Assistance and Aid.** An authorized official representing a Requesting Agency shall make all requests for aid. Each request for aid is subject to approval by an official of the Answering Agency, without charge to the Requesting Agency, and with the understanding that personnel and equipment of the Answering Agency shall be subject only to the liability, workers' compensation, and/or other insurance of that Answering Agency. Any request for assistance hereunder should include a statement of the amount and type of equipment and personnel requested, and shall specify the location to which the equipment and response personnel are to be dispatched. However, an official of the Answering Agency shall determine the type and quantity of equipment and personnel to be furnished. The equipment and personnel of the Answering Agency shall at all times be under the supervision and control of the official(s) of that Answering Agency.
4. **Emergency Medical Services.** When emergency medical services are requested, the Answering Agency shall have its personnel report to the Incident Commander ("IC") or other scene commander at the location to which the equipment and personnel are dispatched. All activities shall be coordinated with the IC. Though coordination of activities occurs by the IC, the equipment and personnel of the Answering Agency shall be under the ultimate supervision of the designated personnel of the Answering Agency. The personnel of the Answering Agency shall coordinate the Answering Agency's efforts with the IC. At no time shall the Answering Agency be expected to operate contrary to standing orders or protocols of its physician advisor, company policies, operating licenses, or federal or state regulations, except as specifically provided for in writing by local, state or federal authority and/or except when destination policies are otherwise modified as necessary.

If at any time the Answering Agency responds to a mutual aid call for emergency medical services where the Requesting Agency is not at the scene, the Answering Agency will follow the treatment protocols and procedures of its physician advisor or other medical control, pursuant to the applicable Incident Command System. Response personnel shall contact the medical base of their own Agency for further orders and designation sites.

It is agreed that the Answering Agency shall not be responsible for any response time compliance or penalties under this Agreement.



Medical Services Mutual Aid Agreement

5. **Release of Answering Agency.** For emergency medical services, an Answering Agency shall be released from service by the Requesting Agency/Incident Commander when the services of the Answering Agency are no longer required, or when the Answering Agency determines, in its discretion, that its services are needed in another jurisdiction.

For non-emergency medical services, an Answering Agency shall be released from service when the services are complete or the Requesting Agency notifies the Answering Agency that the services are no longer required.

6. **Rights and Privileges Retained.** The personnel of each Agency, while engaged in performing any mutual aid service, activity, or undertaking under provisions of this Agreement, shall have and retain all rights and privileges notwithstanding that mutual aid service is being performed in or for the other Agency. Additionally, the Answering Agency's physician advisor and appropriate medical protocols shall govern the Answering Agency's actions.
7. **Compensation and Billing.** The Answering Agency shall be responsible for all Patient and third party billing, and agrees that the rates to be billed shall comply with applicable laws.
8. **Indemnification.** Each party will indemnify and hold the other party harmless from and against liability claims resulting from or alleged to result from any negligence or willful misconduct of the indemnifying party related to the performance of this Agreement.
9. **Insurance.** Each party represents that it has and will maintain comprehensive automobile insurance, comprehensive general liability insurance, and professional liability insurance all in minimum amounts that are customary and usual within the emergency medical services industry and workers' compensation insurance in the statutory required amounts.
10. **Notices.** Any notice required or permitted by this Agreement shall be in writing and shall be delivered as follows, with notice deemed given as indicated: (a) by personal delivery, when delivered personally; (b) by overnight courier, upon written verification of receipt; (c) by facsimile transmission, upon acknowledgment of receipt of electronic transmission; or (d) by certified or registered mail, return receipt requested, upon verification of receipt. Notice shall be sent to the following addresses:

If to Other Agency:
River Medical Inc.

415 El Camino Way
Lake Havasu City, Arizona 86403

If to AMR:

Douglas Key
American Medical Response-Blythe
879 Marlborough Ave. Riverside, CA 92507

With Mandatory Copy to:

Legal Department
American Medical Response, Inc.
6200 South Syracuse Way, Suite 200
Greenwood Village, Colorado 80111

11. **Term.** The initial term of this Agreement shall be one year, commencing on the commencement date hereof, and this Agreement shall automatically renew for subsequent one-year periods thereafter, subject to the termination rights herein. The initial term and all renewal periods shall be cumulatively referred to as the "Term".
12. **Termination.** Each party may terminate this Agreement: (a) at any time without cause and at its sole discretion upon fifteen (15) days written notice to the other party; or (b) immediately upon the material breach of this Agreement by the other party.
13. **Referrals.** It is not the intent of either party that any remuneration, benefit or privilege provided for under this Agreement shall influence or in any way be based on the referral or recommended referral by either party of patients to the other party or its affiliated providers, if any, or the purchasing, leasing or ordering of any services other than the specific services described in this Agreement. Any payments specified herein are consistent with what the parties reasonably believe to be a fair market value for the services provided.
14. **Relationship.** In the performance of this Agreement, each party hereto shall be, as to the other, an independent contractor and neither party shall have the right or authority, express or implied, to bind or otherwise legally obligate the other. Nothing contained in this Agreement shall be construed to constitute either party assuming or undertaking control or direction of the operations, activities or medical care rendered by the other. The parties' administrative staff shall meet on a regular basis to address issues of mutual concern related to the provision of aid and the parties' respective rights and obligations hereunder. It is agreed that the parties shall not be liable for payment of



Medical Services Mutual Aid Agreement

any salary, wages, or other compensation for any of the other Agency's personnel performing services under this Agreement.

15. **Force Majeure.** Neither party shall be responsible for any delay in or failure of performance resulting from acts of God, riot, war, civil unrest, natural disaster, labor dispute or other circumstances not reasonably within its control.
16. **Compliance.** The parties will comply in all material respects with all applicable federal, state and local laws and regulations, including the federal Anti-kickback Statute. Each party's ambulances will conform to applicable state and local regulations for medical equipment for ambulances and be duly licensed for the transportation of patients. All personnel staffing vehicles that provide the Services will be licensed or certified as required by applicable law.
17. **Compliance Program and Code of Conduct.** AMR has made available to the Facility a copy of its Code of Conduct, Anti-kickback policies and other compliance policies, as may be changed from time-to-time, at AMR's web site, located at: www.amr.net, and the Facility acknowledges receipt of such documents. AMR warrants that its personnel shall comply with AMR's compliance policies, including training related to the Anti-kickback Statute.
18. **Non-Exclusion.** Each party represents and certifies that neither it nor any practitioner who orders or provide Services on its behalf hereunder has been convicted of any conduct that constitutes grounds for mandatory exclusion as identified in 42 U.S.C. § 1320a-7(a). Each party further represents and certifies that it is not ineligible to participate in Federal health care programs or in any other state or federal government payment program. Each party agrees that if DHHS/OIG excludes it, or any of its practitioners or employees who order or provide Services, from participation in Federal health care programs, the party must notify the other party within five (5) days of knowledge of such fact, and the other party may immediately terminate this Agreement, unless the excluded party is a practitioner or employee who immediately discontinues ordering or providing Services hereunder.
19. **Miscellaneous.** This Agreement (including the Schedules hereto): (a) constitutes the entire agreement between the parties with respect to the subject matter hereof, superseding all prior oral or written agreements with respect thereto; (b) may be amended only by written instrument executed by both parties; (c) may

not be assigned by either party without the written consent of the other party, such consent not to be unreasonably withheld; (d) shall be binding on and inure to the benefit of the parties hereto and their respective successors and permitted assigns; (e) shall be interpreted and enforced in accordance with the laws of the state where the Services are performed, without regard to the conflict of laws provisions thereof, and the federal laws of the United States applicable therein; (f) may be executed in several counterparts (including by facsimile), each of which shall constitute an original and all of which, when taken together, shall constitute one agreement; and (g) shall not be effective until executed by both parties. In the event of a conflict between this Agreement and any Schedule hereto, the terms of this Agreement shall govern.


[Signature page to follow]



Medical Services Mutual Aid Agreement

IN WITNESS WHEREOF, the parties have hereto
executed this Agreement as of February 8, 2017
("Commencement Date").

Blythe Ambulance Service DBA: American Medical
Response

By: 
Wayne Ennis, Operations Manager AMR Eastern Riverside
County

River Medical Inc.

By: 
John Valentino

Print Name: JOHN VALENTINO

Print Title: Regional Director

Ennis, Wayne

From: Ennis, Wayne
Sent: Tuesday, February 21, 2017 3:47 PM
To: 'Lee, James'
Subject: RE: Mutual Aid

Good afternoon Mr. Lee,

By chance did you ever get a confirmation from Trina or Shellee on a date for this meeting?

Thank you sir,

Wayne

From: Lee, James [mailto:JHLee@RIVCO.ORG]
Sent: Wednesday, February 15, 2017 4:15 PM
To: Trina Sartin (trina@desertairambulance.com); Shellee Fetters (shellee.fetters@desertairambulance.com); Ennis, Wayne
Subject: Mutual Aid

Hello Trina, Shellee and Wayne,

In light of the EMS resources in the Palo Verde Zone, I understand that both AMR and Desert CCT is in the beginning stages of discussing a mutual aid agreement. The Riverside County EMS Agency would like to help facilitate this process. In doing so, I would like to solicit some dates for a possible meeting between AMR, Desert CCT and REMSA. The purpose of this meeting is to answer any questions that might arise regarding this process. So, please look over your calendar over the next few weeks regarding your availability. I would like to suggest the following dates: 2/28, 3/1 or 3/2. I'm open to meeting anywhere (Blythe, Palm Springs or REMSA office). Please let me know of your availability.

Thank you.

James Lee, BA, EMT-P
EMS Specialist
Riv. Co. Emergency Management Department (EMD)
Riverside County EMS Agency (REMSA) Division
951-358-5029 Main
951-358-5164 Desk
951-358-5160 Fax
www.rivcoems.org

Confidentiality Disclaimer

This email is confidential and intended solely for the use of the individual(s) to whom it is addressed. The information contained in this message may be privileged and confidential and protected from disclosure. If you are not the author's intended recipient, be advised that you have received this email in error and that any use, dissemination, forwarding, printing, or

Ennis, Wayne

From: Ennis, Wayne
Sent: Thursday, January 05, 2017 12:51 PM
To: 'Trina Sartin'; Shellee
Subject: RE: AMR/Desert Air Agreement

Good afternoon,

I was just reaching out to see if you have had an opportunity to review this and find out if you had any concerns or questions. As I mentioned, the agreement is pretty standard, the specific details about how the mutual aid process would work would be in the attachment. That was simply a draft I put together and we of course can add or delete language to insure it works for both our agencies.

Thanks again you two, and I hope you both had a great holiday.

Wayne Ennis
Operations Manager, Eastern Riverside County
W: 760.883.5010 ext. 5010 | www.amr.net



The information in this e-mail transmission, or the documents accompanying this e-mail transmission, may contain confidential health information that is legally protected by state and federal law, including, but not limited to the Health Insurance Portability and Accounting Act of 1996 and related regulations. This information is intended only for the use of the individual or entity to whom this e-mail transmission is addressed. If you are not the intended recipient of this information, or if you are not properly authorized to receive this information, you are hereby notified that any disclosure, copying, distribution or action taken in reliance on the contents of this e-mail or the attached documents is strictly prohibited. If you have received this information in error, please notify the sender immediately by sending a reply e-mail indicating that you have arranged for the deletion of this e-mail and a destruction of this e-mail and any attached documents.

From: Trina Sartin [mailto:flyenrn@aol.com]
Sent: Wednesday, December 14, 2016 4:23 PM
To: Ennis, Wayne
Cc: Shellee
Subject: Re: AMR/Desert Air Agreement

Thank you!

CONFIDENTIALITY NOTICE: The information in this e-mail transmission, or any documents accompanying this email transmission, may contain confidential health and or Business information that is legally protected by state and federal law, including, but not limited to the Health Insurance Portability and Accountability Act of 1996 and related regulations. This e-mail message (and any attachments) is intended only for the personal and confidential use of the designated recipient(s) named above. If the reader of this message is not the intended recipient or any agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error, and that any review, dissemination, distribution or copying of this message is strictly prohibited.

On Dec 14, 2016, at 4:09 PM, Ennis, Wayne <Wayne.Ennis@amr.net> wrote:

Trina,

Attached is a standard boiler plate Mutual Aid Agreement template used by AMR. I have also drafted a more specific Attachment that we could include with the agreement. Beings the attachment is merely a quick draft, it will most likely require some tweaking from legal, REMSA etc. Please look it over and let me know what modifications you feel need to be made.

Thanks again Trina and have a great couple of days away and we'll chat soon.

Wayne

From: Trina Sartin [mailto:flyenrn@aol.com]
Sent: Wednesday, December 14, 2016 11:25 AM
To: Ennis, Wayne
Cc: Shellee
Subject: Re: AMR/Desert Air Agreement

Hi Wayne,
How are you?
I'm happy to work with you
On a mutual Aid agreement.
Let me know your thoughts
On how you would like to
Proceed.
I'm going to be out the week
Of Dec. 26-30.

Thank you for reaching out
To us. I've always had the upmost respect for you.
I'm willing to do what we can
To find solutions.

Hope you are enjoying the holiday season.

Kind regards,
Trina

CONFIDENTIALITY NOTICE: The information in this e-mail transmission, or any documents accompanying this email transmission, may contain confidential health and or Business information that is legally protected by state and federal law, including, but not limited to the Health Insurance Portability and Accountability Act of 1996 and related regulations. This e-mail message (and any attachments) is intended only for the personal and confidential use of the designated recipient(s) named above. If the reader of this message is not the intended recipient or any agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error, and that any review, dissemination, distribution or copying of this message is strictly prohibited.

On Dec 13, 2016, at 3:24 PM, Ennis, Wayne <Wayne.Ennis@amr.net> wrote:

Hello Miss Trina, I hope all is well with you.

As you are probably pretty well aware, we had the extended ETA to a call there in Blythe where PD had requested your services but was denied based on what appeared to just

be some confusion. I wanted to see if we could get together to discuss a mutual aid agreement plan so when this issue surfaces again, there is a clean process for requesting mutual aid and hopes of eliminating the confusion.

This in no way would obligate you if your units were not available. Let me know if this is something you would have an interest in. Thanks Trina, and I apologize for any issues this incident may have caused. I know Shellee seemed to be pulling her hair out over it.

Wayne Ennis
Operations Manager, Eastern Riverside County
W: 760.883.5010 ext. 5010 | www.amr.net

<image001.png>

The information in this e-mail transmission, or the documents accompanying this e-mail transmission, may contain confidential health information that is legally protected by state and federal law, including, but not limited to the Health Insurance Portability and Accounting Act of 1996 and related regulations. This information is intended only for the use of the individual or entity to whom this e-mail transmission is addressed. If you are not the intended recipient of this information, or if you are not properly authorized to receive this information, you are hereby notified that any disclosure, copying, distribution or action taken in reliance on the contents of this e-mail or the attached documents is strictly prohibited. If you have received this information in error, please notify the sender immediately by sending a reply e-mail indicating that you have arranged for the deletion of this e-mail and a destruction of this e-mail and any attached documents.

<Mutual Aid Agreement.doc>

<Attachment A Desert Air Ambulance Mutual Aid Agreement - DRAFT.docx>

<3102.pdf>

Attachment A: Draft

In the event American Medical Response (AMR), otherwise known as the Requesting Agency, request mutual aid from Desert Air Ambulance, otherwise known as the Answering Agency, the request will be made by AMR's Communication Center directly to Desert Air Ambulance's Call Center by phone at (760) 702-1310.

Desert Air Ambulance Ground Service Level:

Basic Life Support (BLS) and Critical Care Transport (CCT) in the City of Blythe and surrounding communities.

Reasons for AMR to request mutual aid from Desert Air Ambulance include:

- Anytime the 9-1-1 system demand exceeds the ability of the AMR ALS resources for the geographical area of Blythe and/or the surrounding communities and mutual aid from another AMR ALS Operation is not available or is extended.
- Anytime the Incident Command (IC) on scene of a call in Blythe and the surrounding communities decides to request a BLS ambulance based on REMSA Protocol 3102 "Use of Alternative Ambulance".
- Multi Casualty Incidents (MCI)

Mutual Aid requests within the City limits of Blythe

For any 9-1-1 or other emergent ambulance requests within the City of Blythe and an AMR Desert Cities ALS Ambulance is delayed or not available, AND, a request has also been made to AMR River Medical for mutual aid and they too are not available or will be delayed, the following should occur:

1. AMR's Communication Center MUST immediately notify Blythe PD and advise their dispatcher of any delayed response or if the ambulance is not available due to other 9-1-1 responses. The AMR Dispatcher should then request that Blythe Volunteer Fire Respond to the emergency call regardless of call reason.
2. Once Blythe PD and/or Blythe Fire arrive at the scene and it is determined that the patient may require immediate ALS intervention, the Blythe PD Dispatcher should request Riverside County Fire to respond to the call to administer immediate ALS care.
3. Should the on-scene Incident Command determine that the patient meets the criteria under REMSA Protocol 3102 for an alternative ambulance, then the IC should make the request to their communications center who in turn will contact AMR's Communications Center.
4. The AMR dispatcher should start an available BLS ambulance code-3 that is located in the general area of the call. If AMR does not have a BLS Ambulance in the general area of the call location then the AMR Dispatcher must contact Desert Air Ambulance and obtain their ETA for a mutual aid request. If the ETA of the Desert Air Ambulance is shorter than that of an AMR ALS ambulance or AMR BLS Ambulance, then the call information should immediately be provided to the Desert Air Ambulance Dispatcher who in turn will dispatch the call to their unit.

5. Upon arrival of the BLS Ambulance to the scene, the ambulance staff will make contact with the IC for direction and will transport to the closest most appropriate hospital while patient care is being performed by the Riverside County Fire Department Paramedic.
6. AMR's Communications Center will make notification to REMSA of the use of an Alternative Ambulance.

Mutual Aid requests outside of the City limits of Blythe

For any 9-1-1 or other emergent ambulance response located in the communities immediately surrounding the City of Blythe, and an AMR Desert Cities ALS Ambulance is delayed or not available, **AND**, a request has also been made to AMR River Medical for mutual aid and they too are not available or will be delayed, the following should occur:

1. AMR's Communication Center MUST immediately notify Riverside County Fire or other appropriate PSAP and advise their dispatcher of any delayed response or if an ambulance is currently not available due to other 9-1-1 responses.
2. After arrival of fire to the scene and a patient assessment has been completed, the Incident Command on scene can determine if the patient meets the criteria under REMSA Protocol 3102 for an alternative ambulance. If so then the IC should request the alternative ambulance through their communications center who in turn will contact AMR's Communications Center.
3. The AMR dispatcher should start the closest available BLS ambulance code-3 that is located in the general area of the call. If AMR does not have a BLS Ambulance in the general area of the call location then the AMR Dispatcher must contact Desert Air Ambulance and obtain their ETA for a mutual aid request. If the ETA of the Desert Air Ambulance is shorter than that of an AMR ALS ambulance or AMR BLS Ambulance, then the call information should immediately be provided to the Desert Air Ambulance Dispatcher who in turn will dispatch the call to their unit.
4. Upon arrival of the Alternative Ambulance to the scene, the ambulance staff will make contact with the IC for direction and will transport to the closest most appropriate hospital while patient care is being performed by the Riverside County Fire Department Paramedic.
5. AMR's Communications Center will make notification to REMSA of the use of an Alternative Ambulance.



Palo Verde Zone EMS 9-1-1 System Meeting

Agenda

3/30/2017

Time: 11am

**Location: Roy Wilson Community Center, 13341 Mesa Verde, Blythe,
92225**

- 1. Round table introduction**
- 2. Overview of Palo Verde EMS Zone EOA – Bruce Barton**
- 3. AMR 9-1-1 Mutual Aid Flowchart Concept – Nick Ritchey**
- 4. REMSA Policy 3102 – James Lee**
- 5. Open discussion**
- 6. Next Meeting**





Palo Verde Zone Ambulance Mutual Aid

Purpose:

To establish a process for requesting ambulance mutual aid resources in the Palo Verde Zone in the event that AMR has no available resources to respond.

Development and Maintenance:

This document and associated flow chart have been developed to clarify the processes to be utilized by partner agencies when 9-1-1 emergency ambulance mutual aid is needed in the Palo Verde Zone.

The procedures outlined will be implemented by the partner agencies listed below. This document will be continuously reviewed and updated as needed.

American Medical Response- Riverside County
Desert Critical Care Transport
City of Blythe Police Department
City of Blythe Fire Department
Cal Fire/Riverside County Fire

Responsibilities:

American Medical Response- Riverside County (AMR) - Implement a procedure for mutual aid when the Palo Verde Zone is "Level 1 and Level 0."

Desert Critical Care Transport (Desert CCT) - Establish a process for responding to a mutual aid request in the Palo Verde Zone.

City of Blythe Police Department Public Safety Answering Point (PSAP) - Responsible for coordinating ALS first response mutual aid.

Cal Fire/Riverside County Fire (Cal Fire) - Establish a process for responding to a mutual aid request in the Palo Verde Zone.



Procedure:

1.0 LEVEL 1 – PALO VERDE ZONE

- 1.1 AMR Riverside County contacts River Medical's Communications center to request ALS ambulance coverage for the Palo Verde Zone.
- 1.2 Step 1.1 should be repeated for all subsequent calls until AMR is able to cover or respond.
- 1.3 If River Medical is has more than a 30 minutes ETA to Palo Verde Zone initiate ALS ambulance move up from AMR Riverside County, and move to Step 2.0

Same steps apply during a Level 0 event

2.0 LEVEL 0 – NO RIVER MEDICAL RESOURCES AVAILABLE.

- 2.1 AMR will contact Desert CCT and request mutual aid for ambulance coverage or response if AMR or River Medical have an ETA greater than 30 minutes.
 - AMR will provide full details including address, map grid if applicable, and the nature of call.
 - AMR will provide Desert CCT an ETA of the approximate time they are needed for mutual aid coverage and will immediately notify them once they are no longer needed.
- 2.2 Desert CCT will immediately notify AMR of their ability to respond at time of the mutual aid request.
 - If yes, they will delay taking any scheduled transfers until the mutual aid request is cancelled or fulfilled.
 - If there is no ambulances available or staff (more than 1 EMT) available for immediate dispatch to a call then you must advise AMR "Unable to Respond" on the mutual aid request.
- 2.3 AMR will advise the Blythe PSAP that Desert CCT is providing coverage or responding to a 9-1-1 call.
- 2.4 The Blythe PSAP will request ALS first response mutual aid from Cal Fire within the Blythe jurisdictional boundaries.
- 2.5 The ALS first responder's paramedic will be required to attend the patient during transport with the BLS ambulance provider.

**If Desert CCT advises "Unable to Respond" on the mutual aid request
go to Step 3.0**



3.0 RIVER MEDICAL/DESERT CCT UNABLE TO RESPOND OR COVER

- 3.1 AMR Riverside County will advise Blythe PSAP that no mutual aid resources are available within the Palo Verde Zone. AMR will dispatch the closest and most appropriate resource, and provide an ETA.

4.0 NOTIFY REMSA FOR OPERATIONAL AND CLINICAL COI REVIEW IF EVENT IS NOT RESOLVED AFTER STEP 2.4 IS COMPLETED

Other Considerations:

- Desert CCT must complete applicable notification of Code 3 driving when it occurs.
- Every effort will be made to return the First Responder(s) back to their originating jurisdiction by the transport provider. If the transport provider is unable to return the First Responder(s), AMR will be contacted to return them to their station.
- Follow up meetings will be coordinated by REMSA as needed to ensure effective implementation and use of EMS mutual aid processes.

Definitions:

CCT- Critical Care transport, a level of service provided by ambulance providers for inter-facility transports only.

ETA- Estimated time of arrival.

PSAP- Public Safety Access point, a receiving center for all 911 calls within a jurisdictional area.

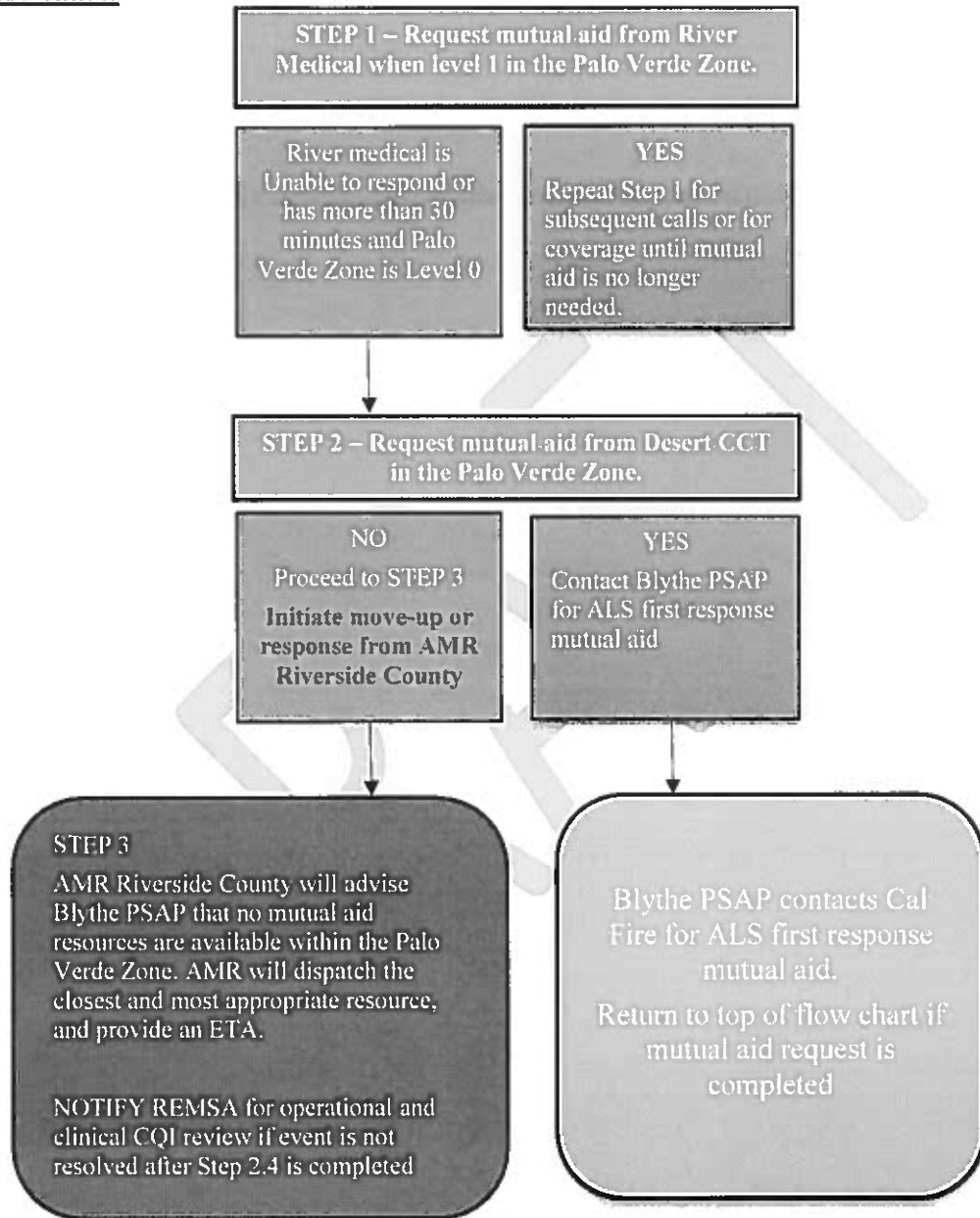
First Responder- A provider of emergency medical services with no transport capability, a common example is a fire engine.

EOA- Exclusive operating area, a specific geographical area defined in the EMS Plan where REMSA has restricted 9-1-1 emergency ambulance response to a single provider pursuant to the California Health and Safety Code, Section 1797.224.

REMSA- Riverside Emergency Medical Service Agency, the local authority that regulates the Paramedic system and ambulance services within the Riverside County area.



Flowchart:





Blythe Flowchart Written Comment Form

Effective

May 2, 2017

Expires

June 2, 2017

Blythe Flowchart Written Comment Form

Please submit your written comments concerning the proposed flowchart to REMSA, you can email me an attachment to: nritchey@rivco.org. You may fax your comments in, if needed to 951-538-5160.

Name: Enter your name . . .		Date: Enter the date . . .
Page	Line	Comment
REMSA Response:		
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DOS	Priority Number	SUBZONE	Recpt#	Caller Type	Address	Final City	Grid	Cancel Reason	ZONE
5-Jan-17	28 Pass		2055203	*County Fire	1042 5TH ST	Calimesa	115MT9462	REFERRED TO AMR - RANCHO	Pass
9-Jan-17	28 Palm Springs/DHS		2058095	*County Fire	64550 PIERSON BLVD	Desert Hot Springs	115MT4257	REFERRED TO CAT CITY FIRE	Desert
21-Jan-17	28 Palm Springs/DHS		2067815	*PS FIRE	435 N Palm Canyon Dr	Palm Springs	115MT4143	REFERRED TO CAT CITY FIRE	Desert
22-Jan-17	28 Pass		2068555	*County Fire	10320 CALIMESA BLVD	Calimesa	115MT9659	REFERRED TO AMR - RANCHO	Pass
23-Jan-17	28 Pass		2069780	*County Fire	763 W AVENUE L	Calimesa	115MT9362	REFERRED TO AMR - RANCHO	Pass
25-Jan-17	28 Nor Unincorp North		2071324	*County Fire	3261 TOLUCA PL	Riverside	115MT6864	REFERRED TO AMR - RANCHO	Northwest
31-Jan-17	28 Pass		2075966	*County Fire	193 SUMMIT VIEW DR	Calimesa	115MT9561	REFERRED TO AMR - RANCHO	Pass
4-Feb-17	28 Nor Unincorp North		2079409	*County Fire	8628 RUNNING GAIT LN	Jurupa Valley	115MT5660	REFERRED TO AMR - RANCHO	Northwest
5-Feb-17	28 Palm Springs/DHS		2080361	*PS FIRE	2334 N Via Mirabele	Palm Springs	115MT4245	REFERRED TO CAT CITY FIRE	Desert
9-Feb-17	28 Nor Unincorp North		2083428	*County Fire	5650 CLAUBART CT	Jurupa Valley	115MT5560	REFERRED TO AMR - RANCHO	Northwest
9-Feb-17	28 Riverside		2083448	*RIV CITY FIRE	4110 HOWARD AVE	Riverside	115MT6559	REFERRED TO AMR - RANCHO	Northwest
12-Feb-17	28 Pass		2083624	*County Fire	CALIMESA BLVD / SANDALWOOD DR	Calimesa	115MT9461	REFERRED TO AMR - RANCHO	Pass
12-Feb-17	28 Palm Springs/DHS		2085986	*PS FIRE	2809 Los Felices Cir E	Palm Springs	115MT4146	REFERRED TO CAT CITY FIRE	Desert
13-Feb-17	28 Pass		2086517	*County Fire	1248 2ND PL	Calimesa	115MT9561	REFERRED TO AMR - RANCHO	Pass
20-Feb-17	28 Desert Unincorp		2092794	*County Fire	0 LOOP RD	Desert Center	115MT7862	REFERRED TO OUTSIDE AGENCY	Desert
22-Feb-17	28 Pass		2094198	*County Fire	924 4TH ST	Calimesa	115MT9562	REFERRED TO AMR - RANCHO	Pass
26-Feb-17	28 Palo Verde		2097366	*BLTYHE FIRE	W Barnard St / N Main St	Blythe	115QT2221	REFERRED TO AMR RIVER MEDICAL	Palo Verde
3-Mar-17	28 Palm Springs/DHS		2101510	*County Fire	65850 PIERSON BLVD	Desert Hot Springs	115MT4457	REFERRED TO CAT CITY FIRE	Desert
6-Mar-17	28 Palm Springs/DHS		2103962	*PS FIRE	1695 N Sunrise Way	Palm Springs	115MT4345	REFERRED TO CAT CITY FIRE	Desert
11-Mar-17	28 Nor Unincorp North		2108331	*County Fire	10250 COUNTRY CLUB DR	Jurupa Valley	115MT5364	REFERRED TO AMR - RANCHO	Northwest
13-Mar-17	28 Pass		2110066	*County Fire	35080 CHANDLER AVE	Calimesa	115MT9560	REFERRED TO AMR - RANCHO	Pass
13-Mar-17	28 Desert Unincorp		2109997	*County Fire	78629 BOUGAINVILLEA DR	Palm Desert	115MT6537	REFERRED TO AMR - RANCHO	Desert
13-Mar-17	28		2110028	*COUNTY FIRE	Holly St / Aqua Mansa Rd	Colton	645G4	REFERRED TO INDO FIRE	Desert
16-Mar-17	28 Palo Verde		2112631	*County Fire	110 W / WILEYS WELL RD OFRP	Blythe	115PT9520	REFERRED TO AMR RIVER MEDICAL	Palo Verde
17-Mar-17	28 Palo Verde		2113697	*BLTYHE FIRE	19005 Wileys Well Rd	Desert Center	115PT9419	REFERRED TO AMR RIVER MEDICAL	Palo Verde
19-Mar-17	28 Palm Springs/DHS		2115552	*PS FIRE	N Scotia Ln / E Vista Chino	Palm Springs	115MT4445	REFERRED TO CAT CITY FIRE	Desert
22-Mar-17	28 Nor Unincorp North		2118165	*County Fire	3580 EYE CIR	Jurupa Valley	115MT5264	REFERRED TO AMR - RANCHO	Northwest
23-Mar-17	28 Riverside		2118677	*RIV CITY FIRE	3429 CANYON CREST DR	Riverside	115MT6959	REFERRED TO AMR - RANCHO	Northwest
30-Mar-17	28 Palm Springs/DHS		2120817	*PS FIRE	3400 E Tahquitz Canyon Way	Palm Springs	115MT4542	REFERRED TO CAT CITY FIRE	Desert
30-Mar-17	28 Riverside		2124509	*RIV CITY FIRE	1215 S / COLUMBIA AV OFRP	Riverside	115MT6762	REFERRED TO AMR - RANCHO	Northwest
1-Apr-17	28 Palm Springs/DHS		2126020	*PS FIRE	1 Tramway Rd	Palm Springs	115MT4046	REFERRED TO CAT CITY FIRE	Desert
1-Apr-17	28 Palm Springs/DHS		2126008	*PS FIRE	222 S Palm Canyon Dr	Palm Springs	115MT4142	REFERRED TO CAT CITY FIRE	Desert
16-Apr-17	28 Palm Springs/DHS		2138612	*County Fire	16363 VIA MONTANA	Desert Hot Springs	115MT4654	REFERRED TO CAT CITY FIRE	Desert
16-Apr-17	28 Desert Unincorp		2138151	*County Fire	HWY 177 / HWY 62	Desert Center	115PT6468	REFERRED TO OUTSIDE AGENCY	Desert
17-Apr-17	28 Palo Verde		2139104	*BLTYHE FIRE	E Rte St / S Broadway	Blythe	115QT2221	REFERRED TO AMR RIVER MEDICAL	Palo Verde
18-Apr-17	28 Palm Springs/DHS		2139812	*County Fire	14280 PALM DR	Desert Hot Springs	115MT4656	REFERRED TO CAT CITY FIRE	Desert
19-Apr-17	28 Desert Unincorp		2140569	*County Fire	51666 CALLE AVILA	Coachella	115MT7526	REFERRED TO INDO FIRE	Desert
24-Apr-17	28 Palo Verde		2144750	*County Fire	24501 SCHOOL RD	Blythe	115QT1712	REFERRED TO AMR RIVER MEDICAL	Palo Verde
24-Apr-17	28 Palo Verde		2144764	*County Fire	24501 SCHOOL RD	Blythe	115QT1712	REFERRED TO AMR RIVER MEDICAL	Palo Verde
29-Apr-17	28 Nor Unincorp North		2149384	*County Fire	3230 CORNERSTONE DR	Eastvale	115MT4865	REFERRED TO AMR - RANCHO	Northwest

DOS	Priority_Inv Inbr	SUBZONE	ZONE	Resps	Caller Type	Address	FinalCity	MerchCity	GrdCity	Grid	Field Description	Field Data
5-Jan-17	28	Desert Unincorp	Desert	2055050	*CAT FIRE	67676 Garbino Rd	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7484	MUTUAL AID GIVEN	CAT CITY
5-Jan-17	28	Desert Unincorp	Desert	2055069	*CAT FIRE	29635 Santa Rosa St	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7514	MUTUAL AID GIVEN	CAT CITY
5-Jan-17	28	Desert Unincorp	Desert	2055642	*COUNTY	78181 HOLISTER DR	Palm Desert	Palm Desert	Palm Desert	15SW7653	MUTUAL AID REQUEST	CAT FIRE DENIED
9-Jan-17	28	Desert Unincorp	Desert	2058645	*COUNTY	32250 Bob Hope Dr	Rancho Mirage	Rancho Mirage	Rancho Mirage	15SW7544	MUTUAL AID GIVEN	CAT CITY
9-Jan-17	28	Desert Unincorp	Desert	2058518	*CAT FIRE	BUDDO ROGERS AVE / GLENN AVE	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7493	MUTUAL AID GIVEN	CAT CITY
10-Jan-17	28	Mountain	Mountain	2059225	*COUNTY	19751 - 19799 HWY 243	IdRnld	IdRnld	IdRnld	15SW7233	MUTUAL AID GIVEN	IdRnld
14-Jan-17	28	Mountain	Mountain	2062734	*COUNTY	HWY 74 / OLD CONTROL RD	IdRnld	IdRnld	IdRnld	15SW7183	MUTUAL AID GIVEN	IdRnld
14-Jan-17	28	Mountain	Mountain	2062741	*COUNTY	HWY 74 / OLD CONTROL RD	IdRnld	IdRnld	IdRnld	15SW7183	MUTUAL AID GIVEN	IdRnld
14-Jan-17	28	Mountain	Mountain	2062745	*COUNTY	HWY 74 / OLD CONTROL RD	IdRnld	IdRnld	IdRnld	15SW7183	MUTUAL AID GIVEN	IdRnld
14-Jan-17	28	Mountain	Mountain	2062746	*COUNTY	HWY 74 / OLD CONTROL RD	IdRnld	IdRnld	IdRnld	15SW7183	MUTUAL AID GIVEN	IdRnld
15-Jan-17	28	Desert Unincorp	Desert	2063301	*CAT FIRE	68825 HERMOSILLO RD	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7494	MUTUAL AID GIVEN	CAT CITY
16-Jan-17	28	Desert Unincorp	Desert	2064148	*CAT FIRE	68718 Hwy 111	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7494	MUTUAL AID GIVEN	CAT CITY
17-Jan-17	28	Desert Unincorp	Desert	2064505	*CAT FIRE	28555 Landau Blvd	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7484	MUTUAL AID GIVEN	CAT CITY
17-Jan-17	28	Desert Unincorp	Desert	2064749	*CAT FIRE	30855 DATE PALM DR	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7504	MUTUAL AID GIVEN	CAT CITY
17-Jan-17	28	Mountain	Mountain	2065010	*COUNTY	51125 HWY 74	IdRnld	IdRnld	IdRnld	15SW7232	MUTUAL AID GIVEN	IdRnld
18-Jan-17	28	Desert Unincorp	Desert	2065313	*CAT FIRE	68130 Middle Rd	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7494	MUTUAL AID GIVEN	CAT CITY
19-Jan-17	28	Desert Unincorp	Desert	2066507	*CAT FIRE	20820 Susan Dr	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7494	MUTUAL AID GIVEN	CAT CITY
21-Jan-17	28	Desert Unincorp	Desert	2067822	*COUNTY	Vanner Rd / Edson Hill Rd	IdRnld	IdRnld	IdRnld	15SW7232	MUTUAL AID GIVEN	IdRnld
21-Jan-17	28	Desert Unincorp	Desert	2067822	*COUNTY	51820 HWY 74	IdRnld	IdRnld	IdRnld	15SW7232	MUTUAL AID GIVEN	IdRnld
23-Jan-17	28	Desert Unincorp	Desert	2069680	*CAT FIRE	69750 Deah Shore Dr	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7504	MUTUAL AID GIVEN	CAT CITY
23-Jan-17	28	Desert Unincorp	Desert	2069691	*CAT FIRE	31200 Landau Blvd	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7484	MUTUAL AID GIVEN	CAT CITY
26-Jan-17	28	Desert Unincorp	Desert	2071931	*CAT FIRE	67837 N PORTALES DR	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7484	MUTUAL AID GIVEN	CAT CITY
26-Jan-17	28	Desert Unincorp	Desert	2071932	*CAT FIRE	67847 VIA ESTRELLA	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7484	MUTUAL AID GIVEN	CAT CITY
27-Jan-17	28	Desert Unincorp	Desert	2072836	*CAT FIRE	Cathedral Canyon Dr / Dinah Shore Dr	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7494	MUTUAL AID GIVEN	CAT CITY
28-Jan-17	28	Desert Unincorp	Desert	2073730	*CAT FIRE	31600 Landau Blvd	IdRnld	IdRnld	IdRnld	15SW7484	MUTUAL AID GIVEN	CAT CITY
28-Jan-17	28	Mountain	Mountain	2073782	*COUNTY	24200 FERN VALLEY RD	IdRnld	IdRnld	IdRnld	15SW7233	MUTUAL AID GIVEN	IdRnld
29-Jan-17	28	Mountain	Mountain	2074554	*COUNTY	19800 - 20999 HWY 243	IdRnld	IdRnld	IdRnld	15SW7194	MUTUAL AID GIVEN	IdRnld
4-Feb-17	28	Desert Unincorp	Desert	2079730	*CAT FIRE	20875 Avenida Juarez	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7494	MUTUAL AID GIVEN	CAT CITY
4-Feb-17	28	Mountain	Mountain	2079212	*COUNTY	49302 - 51299 HWY 74	IdRnld	IdRnld	IdRnld	15SW7203	MUTUAL AID GIVEN	IdRnld
4-Feb-17	28	Mountain	Mountain	2079269	*COUNTY	49302 - 51299 HWY 74	IdRnld	IdRnld	IdRnld	15SW7222	MUTUAL AID GIVEN	IdRnld
5-Feb-17	28	Desert Unincorp	Desert	2080225	*CAT FIRE	67967 Vista Chino	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7484	MUTUAL AID GIVEN	CAT CITY
6-Feb-17	28	Desert Unincorp	Desert	2080822	*CAT FIRE	33909 Nevada	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7494	MUTUAL AID GIVEN	CAT CITY
6-Feb-17	28	Desert Unincorp	Desert	2081219	*CAT FIRE	34851 DATE PALM DR	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7503	MUTUAL AID GIVEN	CAT CITY
8-Feb-17	28	Desert Unincorp	Desert	2082710	*CAT FIRE	30th Ave / Alexander Dr	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7504	MUTUAL AID GIVEN	CAT CITY
9-Feb-17	28	Desert Unincorp	Desert	2083948	*CAT FIRE	69547 Omarion Ct	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7514	MUTUAL AID GIVEN	CAT CITY
11-Feb-17	28	Desert Unincorp	Desert	2085451	*COUNTY	82423 SARONIA RD	INDIO	INDIO	INDIO	15SW7713	MUTUAL AID GIVEN	INDIO
13-Feb-17	28	Desert Unincorp	Desert	2085991	*COUNTY	JACKSON ST / AVE 44	INDIO	INDIO	INDIO	15SW7723	MUTUAL AID GIVEN	INDIO
14-Feb-17	28	Desert Unincorp	Desert	2087788	*CAT FIRE	68200 31rd Ave	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7494	MUTUAL AID GIVEN	CAT CITY
14-Feb-17	28	Desert Unincorp	Desert	2087501	*COUNTY	WASHINGTON ST / LAS MONTANAS RD	Palm Desert	Palm Desert	Palm Desert	15SW7643	MUTUAL AID REQUEST	DENIED
16-Feb-17	28	Desert Unincorp	Desert	2087615	*CAT FIRE	Mc Callum Way / Date Palm Dr	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7504	MUTUAL AID GIVEN	CAT CITY
16-Feb-17	28	Desert Unincorp	Desert	2089180	*COUNTY	68955 Ramon Rd	INDIO	INDIO	INDIO	15SW7673	MUTUAL AID GIVEN	INDIO
17-Feb-17	28	Desert Unincorp	Desert	2089623	*COUNTY	79855 Alila Ave	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7503	MUTUAL AID GIVEN	CAT CITY
17-Feb-17	28	Desert Unincorp	Desert	2090802	*CAT FIRE	34409 Sunset Dr	INDIO	INDIO	INDIO	15SW7713	MUTUAL AID GIVEN	INDIO
19-Feb-17	28	Desert Unincorp	Desert	2092167	*COUNTY	82503 HWY 111	INDIO	INDIO	INDIO	15SW7713	MUTUAL AID GIVEN	INDIO
19-Feb-17	28	Desert Unincorp	Desert	2092168	*COUNTY	82503 HWY 111	INDIO	INDIO	INDIO	15SW7713	MUTUAL AID GIVEN	INDIO
19-Feb-17	28	Mountain	Mountain	2091965	*COUNTY	MCGOVERN RD / SAN JACINTO RIDGE	IdRnld	IdRnld	IdRnld	15SW7233	MUTUAL AID GIVEN	IdRnld
20-Feb-17	28	Desert Unincorp	Desert	2091858	*CAT FIRE	69100 Mc Callum Way	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7504	MUTUAL AID GIVEN	CAT CITY
22-Feb-17	28	Desert Unincorp	Desert	2091535	*CAT FIRE	31135 San Ysidro Ave	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7504	MUTUAL AID GIVEN	CAT CITY
23-Feb-17	28	Desert Unincorp	Desert	2091958	*CAT FIRE	27700 Landau Blvd	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7484	MUTUAL AID GIVEN	CAT CITY
24-Feb-17	28	Desert Unincorp	Desert	2091882	*COUNTY	19751 HWY 243	IdRnld	IdRnld	IdRnld	15SW7233	MUTUAL AID GIVEN	IdRnld
25-Feb-17	28	Desert Unincorp	Desert	2096728	*CAT FIRE	67150 Austinda Dr	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7474	MUTUAL AID GIVEN	CAT CITY
25-Feb-17	28	Desert Unincorp	Desert	2096856	*COUNTY	138 Hester Dr	INDIO	INDIO	INDIO	15SW7693	MUTUAL AID GIVEN	CAT FIRE
4-Mar-17	28	Desert Unincorp	Desert	2100136	*COUNTY	46096 Mesa Verde	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7504	MUTUAL AID GIVEN	CAT CITY
4-Mar-17	28	Desert Unincorp	Desert	2102802	*CAT FIRE	69228 Cascades Ct	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7504	MUTUAL AID GIVEN	CAT CITY
4-Mar-17	28	Desert Unincorp	Desert	2102812	*CAT FIRE	1215 Via Yolo	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7504	MUTUAL AID GIVEN	CAT CITY
5-Mar-17	28	Desert Unincorp	Desert	2102946	*CAT FIRE	68955 Ramon Rd	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7504	MUTUAL AID GIVEN	CAT CITY
5-Mar-17	28	Desert Unincorp	Desert	2103441	*COUNTY	Avenida Del Mar / Monroe St	INDIO	INDIO	INDIO	15SW7703	MUTUAL AID GIVEN	INDIO
6-Mar-17	28	Mountain	Mountain	2103463	*COUNTY	49302 - 51299 HWY 74	IdRnld	IdRnld	IdRnld	15SW7222	MUTUAL AID GIVEN	IdRnld
7-Mar-17	28	Desert Unincorp	Desert	2105000	*CAT FIRE	69150 Deah Shore Dr	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7504	MUTUAL AID GIVEN	CAT CITY
7-Mar-17	28	Mountain	Mountain	2104854	*COUNTY	49302 - 51299 HWY 74	IdRnld	IdRnld	IdRnld	15SW7222	MUTUAL AID GIVEN	IdRnld
8-Mar-17	28	Mountain	Mountain	2105800	*COUNTY	12485 HWY 243	IdRnld	IdRnld	IdRnld	15SW7233	MUTUAL AID GIVEN	IdRnld
9-Mar-17	28	Desert Unincorp	Desert	2106444	*CAT FIRE	67175 N Chumayo Dr	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7474	MUTUAL AID GIVEN	CAT CITY
9-Mar-17	28	Desert Unincorp	Desert	2107057	*CAT FIRE	68718 Hwy 111	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7493	MUTUAL AID GIVEN	CAT CITY
9-Mar-17	28	Desert Unincorp	Desert	2107059	*CAT FIRE	28301 Avenida La Vista	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7494	MUTUAL AID GIVEN	CAT CITY
10-Mar-17	28	Mountain	Mountain	2107459	*COUNTY	51601 HWY 74	IdRnld	IdRnld	IdRnld	15SW7222	MUTUAL AID GIVEN	IdRnld
11-Mar-17	28	Desert Unincorp	Desert	2108576	*CAT FIRE	67665 Peninsula Rd	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7484	MUTUAL AID GIVEN	CAT CITY
11-Mar-17	28	Desert Unincorp	Desert	2108977	*CAT FIRE	68605 Corral Rd	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	15SW7494	MUTUAL AID GIVEN	CAT CITY
11-Mar-17	28	Desert Unincorp	Desert	2108775	*COUNTY	MESA / COYOTE RD	Rancho Mirage	Rancho Mirage	Palm Desert	15SW7532	MUTUAL AID GIVEN	*COUNTY FIRE
12-Mar-17	28	Desert Unincorp	Desert	2109043	*COUNTY	82033 HWY 111	INDIO	INDIO	INDIO	15SW7713	MUTUAL AID GIVEN	INDIO
12-Mar-17	28	Desert Unincorp	Desert	2109216	*COUNTY	78488 GORHAM LN	Palm Desert	Palm Desert	Palm Desert	15SW7653	MUTUAL AID REQUEST	INDIO
13-Mar-17	28	Desert Unincorp	Desert	2109997	*COUNTY	78679 BOUGAINVILLE DR	Palm Desert	Palm Desert	Palm Desert	15SW7653	MUTUAL AID REQUEST	DENIED

13-Mar-17	28	Desert Unincorp	Mountain	2109909	*COUNTY	49302 - 51299 HWY 74	Idyllwild	Idyllwild	Idyllwild	115HT722	MUTUAL AID GIVEN	Idyllwild
14-Mar-17	28	Desert Unincorp	Desert	2113492	*CAT FIRE	31580 Landau Blvd	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT484	MUTUAL AID GIVEN	CAT CITY
17-Mar-17	28	Desert Unincorp	Desert	2113679	*CAT FIRE	34007 Calle Mara	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT484	MUTUAL AID GIVEN	CAT CITY
17-Mar-17	28	Desert Unincorp	Desert	2114061	*COUNTY	78443 MELODY LN	Palm Desert	Palm Desert	Palm Desert	115HT653	MUTUAL AID REQUEST	*COUNTY - DENIED
18-Mar-17	28	Desert Unincorp	Desert	2115108	*COUNTY	83791 DATE AVE	INDIO	INDIO	INDIO	115HT733	MUTUAL AID GIVEN	INDIO
18-Mar-17	28	Desert Unincorp	Mountain	2114646	*COUNTY	HWY 243 / ROUND ROBIN DR	Idyllwild	Idyllwild	Idyllwild	115HT733	MUTUAL AID GIVEN	Idyllwild
22-Mar-17	28	Desert Unincorp	Desert	2117870	*CAT FIRE	37669 Porter Dr	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT493	MUTUAL AID GIVEN	CAT CITY
23-Mar-17	28	Desert Unincorp	Desert	2119197	*CAT FIRE	27700 Landau Blvd	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT484	MUTUAL AID GIVEN	CAT CITY
24-Mar-17	28	Desert Unincorp	Desert	2119656	*CAT FIRE	27700 Landau Blvd	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT484	MUTUAL AID GIVEN	CAT CITY
25-Mar-17	28	Desert Unincorp	Desert	2120850	*CAT FIRE	67155 ASISTENCIA DR	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT474	MUTUAL AID GIVEN	CAT CITY
28-Mar-17	28	Desert Unincorp	Desert	2122862	*CAT FIRE	68325 Eniditas Rd	Idyllwild	Idyllwild	Idyllwild	115HT494	MUTUAL AID GIVEN	Idyllwild
28-Mar-17	28	Desert Unincorp	Mountain	2122421	*COUNTY	49302 - 51299 HWY 74	Idyllwild	Idyllwild	Idyllwild	115HT722	MUTUAL AID GIVEN	Idyllwild
29-Mar-17	28	Desert Unincorp	Desert	2123716	*CAT FIRE	69854 Pagaya Ln	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT513	MUTUAL AID GIVEN	CAT CITY
30-Mar-17	28	Desert Unincorp	Desert	2124099	*CAT FIRE	Whispering Palms / Alt Callum Way	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT484	MUTUAL AID GIVEN	CAT CITY
2-Apr-17	28	Desert Unincorp	Desert	2126488	*CAT FIRE	37040 Cathedral Canyon Dr	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT493	MUTUAL AID GIVEN	CAT CITY
2-Apr-17	28	Desert Unincorp	Mountain	2126612	*COUNTY	HWY 74 / MCCALL PARK RD	Idyllwild	Idyllwild	Idyllwild	115HT742	MUTUAL AID GIVEN	Idyllwild
5-Apr-17	28	Desert Unincorp	Desert	2129002	*CAT FIRE	31110 AVENIDA MARAVILLA	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT494	MUTUAL AID GIVEN	CAT CITY
7-Apr-17	28	Desert Unincorp	Desert	2129155	*COUNTY	46445 MONROE ST	INDIO	INDIO	INDIO	115HT703	MUTUAL AID GIVEN	INDIO
7-Apr-17	28	Desert Unincorp	Desert	2130877	*CAT FIRE	34257 Ind Ln	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT504	MUTUAL AID GIVEN	CAT CITY
7-Apr-17	28	Desert Unincorp	Mountain	2130859	*COUNTY	49302 - 51299 HWY 74	Idyllwild	Idyllwild	Idyllwild	115HT722	MUTUAL AID GIVEN	Idyllwild
8-Apr-17	28	Desert Unincorp	Desert	2131638	*CAT FIRE	29813 W Trancas Dr	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT484	MUTUAL AID GIVEN	CAT CITY
13-Apr-17	28	Desert Unincorp	Desert	2131639	*CAT FIRE	31700 Landau Blvd	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT484	MUTUAL AID GIVEN	CAT CITY
17-Apr-17	28	Desert Unincorp	Desert	2131677	*CAT FIRE	31635 Avenida La Gaviola	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT484	MUTUAL AID GIVEN	CAT CITY
21-Apr-17	28	Desert Unincorp	Desert	2139245	*CAT FIRE	69175 Ramon Rd	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT504	MUTUAL AID GIVEN	CAT CITY
21-Apr-17	28	Desert Unincorp	Desert	2142318	*CAT FIRE	68480 Dewah Shore Dr	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT494	MUTUAL AID GIVEN	CAT CITY
21-Apr-17	28	Desert Unincorp	Desert	2142230	*COUNTY	45119 DEGLETT MOOR ST	INDIO	INDIO	INDIO	115HT713	MUTUAL AID GIVEN	INDIO
23-Apr-17	28	Desert Unincorp	Desert	2143538	*CAT FIRE	31 Mecca Dr	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT503	MUTUAL AID GIVEN	CAT CITY
25-Apr-17	28	Desert Unincorp	Desert	2145594	*CAT FIRE	30310 Landau Blvd	CATHEDRAL CITY	CATHEDRAL CITY	CATHEDRAL CITY	115HT484	MUTUAL AID GIVEN	CAT CITY
27-Apr-17	28	Desert Unincorp	Mountain	2147018	*COUNTY	24919 MARBOL RIDGE DR	Idyllwild	Idyllwild	Idyllwild	115HT743	MUTUAL AID GIVEN	Idyllwild
30-Apr-17	28	Desert Unincorp	Mountain	2150122	*COUNTY	49302 - 51299 HWY 74	Idyllwild	Idyllwild	Idyllwild	115HT703	MUTUAL AID GIVEN	Idyllwild

Section B, Question 6.

[illegible]

Responses	2017 Lates		
	Apr	May	Jun
< 1 Min	54	71	71
< 2 Min	57	46	59
< 3 Min	39	35	38
< 4 Min	24	12	24
< 5 Min	13	15	19
< 6 Min	11	8	7
< 7 Min	3	8	4
< 8 Min	4	3	1
< 9 Min	3	2	7
< 10 Min	2	3	3
< 15 Min	4	6	3
< 20 Min	0	1	1
< 30 Min	0	1	2
< 60 Min	0	0	0
> 60 Min	0	0	0
Total	214	211	239
MOS	0	0	0

Riverside City Fire Jul 2017 - Mar 2018

Late	2017 Lates					2018 Lates			
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
1	79	67	77	55	76	73	52	66	53
2	45	53	48	62	52	49	27	45	39
3	36	25	28	38	36	35	20	25	40
4	25	17	29	32	26	23	18	21	27
5	26	15	17	17	13	14	17	16	25
6	6	7	14	8	9	9	7	10	13
7	4	10	5	10	11	7	3	10	9
8	1	4	2	9	5	7	2	6	6
9	3	2	5	3	2	6	1	3	5
10	7	6	2	3	3	2	3	2	1
15	5	2	3	6	2	5	2	4	10
20	4	1	3	2	0	0	4	1	1
30	1	0	2	2	0	0	0	1	0
60	0	0	0	1	0	0	0	0	0
MOS	0	0	0	0	0	0	0	0	0
Grand Total	242	209	235	248	235	230	156	210	229

ORIGIN ID: RALA
DARRENA DEVINE
EMSC-AMR-EMCARE
879 MARLBOROUGH AVENUE
RIVERSIDE, CA 92507
UNITED STATES US

(951) 782-5613

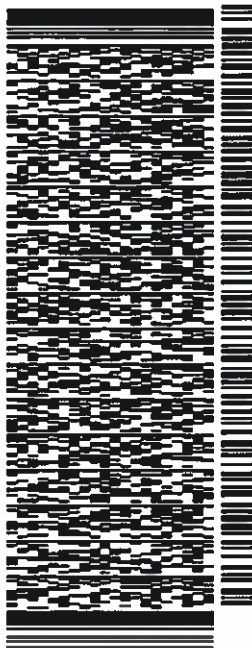
SHIP DATE: 29MAY18
ACTWGT: 0.50 LB
CAD: 101340475MNET3980
BILL SENDER

TO FIRE CHIEF

CITY OF RIVERSIDE FIRE DEPARTMENT
3401 UNIVERSITY AVENUE

RIVERSIDE CA 92501

(951) 826-5321 REF: 1357552070515
INV. DEPT:



J18111001280100

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TRK# 7723 4611 2509
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PRIORITY OVERNIGHT

WM ONTA 92501
CA-US ONT



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