

# EMS AGENCY CERTIFICATION CHECKLIST

Please verify that you have completed all documents and provided all items listed below. Your application packet will be deemed incomplete if forms are missing or contain fields that are not complete.

\_\_\_ **DOH 206** Application for EMS Operating Certificate (pre-populated copy attached)

<http://www.health.ny.gov/forms/doh-206.pdf>

\_\_\_ **DOH-1881** Affirmation of Compliance

<http://www.health.ny.gov/forms/doh-1881.pdf>

\_\_\_ **DOH 2828** Agency Personnel Roster

<http://www.health.ny.gov/forms/doh-2828.pdf>

If your agency uses personnel contracted from another agency or staffing service, please list all such personnel on a separate DOH-2828 and identify the entity providing the personnel

\_\_\_ **DOH-4362** Medical Director Verification

<http://www.health.ny.gov/forms/doh-4362.pdf>

*Physician Medical Director may only affirm levels of care for which written statements of approval have been issued by the appropriate REMAC*

\_\_\_ **DOH-5131** Funding form

<http://www.health.ny.gov/forms/doh-5131.pdf>

\_\_\_ **DOH-5136 e-PCR** Application (Send to your Regional EMS Program Agency)

<https://www.health.ny.gov/forms/doh-5136.pdf>

\_\_\_ Regional Emergency Medical Advisory Committee (REMAC) approval letter if your agency provides Advanced Life Support (ALS) level of care AND has changed its level of care since the last renewal

\_\_\_ Provide copies of any new assumed name (DBA) filings if it is a corporation and has added a new assumed business name since last filing. List ALL assumed names currently in use by your agency.

\_\_\_ Listing of additional garaging locations of certified vehicles (ambulance or EASV) if more than three locations

\_\_\_ Map of territory

**EMAIL COMPLETED RENEWAL APPLICATION TO THE APPROPRIATE NYS DOH BUREAU OF EMS AND TRUMA SYSTEMS REGIONAL OFFICE REPRESENTATIVE 30 DAYS PRIOR TO THE EXPIRATION DATE**

**Email Applications for Syracuse Regional Office to:**

Maureen Guinta, NYS DOH, Bureau of EMS: [Maureen.Guinta@health.ny.gov](mailto:Maureen.Guinta@health.ny.gov)

Michael E. Bagozzi, Deputy Chief: [Michael.Bagozzi@health.ny.gov](mailto:Michael.Bagozzi@health.ny.gov)

Melissa Lockwood, District Chief: [Melissa.Lockwood@health.ny.gov](mailto:Melissa.Lockwood@health.ny.gov)

**DO NOT EMAIL THE APPLICATION TO THE DOH EMS CENTRAL OFFICE**