

EMS FUND ACT
VEHICLE PURCHASE PROJECT APPLICATION GUIDE - FISCAL YEAR 2012

Due Date: **Friday, November 05, 2010** (postmarked or hand delivered)

Your packet must contain a completed application & 2 additional copies. Incomplete applications/packets will not be accepted. Submit applications to:

EMS Bureau – Attention: Ann Martinez
1301 Siler Rd
Santa Fe, NM 87507

You must contact your Regional EMS Office for their assistance and counsel on your application. Applications without a Regional EMS signature will not be accepted.

Regional Contacts:

Region 1 – Jerome Haskie, Director (505) 466-2438; jhaskie@emsregion1.org

Region 2 – Tim Zagorski, Director (505) 524-2167; ziggy@region2ems.com

Region 3 – Jan Elliott, Director (505) 769-2639; jelliott@emsregion3.org

Please provide the following information when completing the application:

DETAILED ANALYSIS AND NEED

1. Clearly identify and justify your request.
2. Describe the current needs of the community. If they are not adequately met at this time, explain why and how this vehicle purchase will improve the community situation.
3. Please provide evidence of your service's ability to deliver the services as they relate to this request.
4. Explain why the current vehicle situation cannot be remedied by cost effective maintenance.
5. Describe the urgency and any potential hazards to personnel and patients this request addresses.

SERVICE AREA DESCRIPTION

1. Describe the type and functions of your agency. Are you part of an integrated system?
2. Describe personnel and licensure levels that will be using the requested equipment.
3. Describe where this vehicle will be stationed.
4. Describe the general population and community this vehicle will serve.
5. Provide run data information and demonstrate how this vehicle affects or supports your response to the call volume.
6. How will this purchase improve the EMS system's response, scene and transport times?

PROJECT IMPACT

1. Provide a clear and detailed description of the impact this vehicle will have on the local EMS System;
2. For requests for replacement, is the vehicle being replaced suitable for donating? Will it be donated?

COST OF PROJECT AND DESCRIPTION

1. Provide an itemized description of the project (specifications)
2. List any and all sources of funding, cash or "in kind", and the source for this project; including the mandatory 25% financial match.
3. List all local, state, and federal entities that have **denied** your request for assistance or funding for this project.

LETTERS OF COLLABORATION / SUPPORT

1. Provide individual letters of support from affected services, the community, city/county administration;

ACCOUNTABILITY OF PREVIOUSLY FUNDED SPECIAL PROJECTS

1. List previous EMS Fund Act Local System Improvement, Vehicle Purchase or Statewide System Improvement Project you have been awarded in the past 5 years and the outcome/status of those projects.