



AMBULANCE INSPECTION REPORT

Annual Spot

Service URE EMS

Vehicle Plate 2191

Inspection Date 3/4/13

Inspector Rossmer

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

1. 1 Red Light out Immediate 24 hours 2 bus. days 10 bus. days
2. _____ Immediate 24 hours 2 bus. days 10 bus. days
3. _____ Immediate 24 hours 2 bus. days 10 bus. days
4. _____ Immediate 24 hours 2 bus. days 10 bus. days
5. _____ Immediate 24 hours 2 bus. days 10 bus. days
6. _____ Immediate 24 hours 2 bus. days 10 bus. days
7. _____ Immediate 24 hours 2 bus. days 10 bus. days
8. _____ Immediate 24 hours 2 bus. days 10 bus. days
9. _____ Immediate 24 hours 2 bus. days 10 bus. days
10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

<u><i>[Signature]</i></u>	<u>ROBERT T. HART</u>	<u>3/14/13</u>
Service Representative Name	Signature	Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 3/4/13
Inspector Signature Date

[Signature] 3/7/13
Service Representative Signature Date

R2



AMBULANCE INSPECTION REPORT

NEW VEHICLE
ANNUAL

Service Warren Fire Dept Vehicle Plate 131 Inspection Date 8/19/13 Inspector Rosmarie

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

1. 1 light out high position Pt Comp. 9-10-13 Immediate 24 hours 2 bus. days 10 bus. days
2. Pedi wheel out of Date ~~9-2-13~~ Immediate 24 hours 2 bus. days 10 bus. days
3. 10-2-13 Immediate 24 hours 2 bus. days 10 bus. days
4. Immediate 24 hours 2 bus. days 10 bus. days
5. Immediate 24 hours 2 bus. days 10 bus. days
6. Immediate 24 hours 2 bus. days 10 bus. days
7. Immediate 24 hours 2 bus. days 10 bus. days
8. Immediate 24 hours 2 bus. days 10 bus. days
9. Immediate 24 hours 2 bus. days 10 bus. days
10. Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

Warren A. Schell 10-2-13
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

Eric Perreault
Inspector Signature Date

[Signature]
Service Representative Signature Date

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AMBULANCE INSPECTION REPORT

Annual
 NEW VEHICLE

Service Warren Fire Dept Vehicle Plate 314 Inspection Date 8/19/13 Inspector Rossmel

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Lights out x 7 High Pos Pt Comp. 9-10-13 Immediate 24 hours 2 bus. days 10 bus. days
- 2. Pestli wheel OOD ~~9-3-13~~ 10-2-13 Immediate 24 hours 2 bus. days 10 bus. days
- 3. Needs front tires 8-29-13 Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFADAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

Warren [Signature] 10-2-13
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

[Signature] 8/19/13
Inspector Signature (Date)

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service
[Signature] 8/19/13
Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual Spot

Service Prov College EMS Vehicle Plate PC-147 Inspection Date 8/7/14 Inspector Rosner

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Pedi wheel 000 Immediate 24 hours 2 bus. days 10 bus. days
- 2. Epi 1:1000 vial or ampules, Has Epi Pen Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

Gabriella Carotza Gabriella Carotza 8/12/14
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

[Signature] 8/7/14
 Inspector Signature Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service
[Signature] 8/7/14
 Service Representative Signature Date



AMBULANCE INSPECTION REPORT

ANNUAL
 NEW VEHICLE

Service Providence Fire Dept Vehicle Plate 1010 Inspection Date 11/14/13 Inspector Ross Muz

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Taxp Sticker Immediate 24 hours 2 bus. days 10 bus. days
- 2. Versed x bug Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

IMMEDIATE FAILURE(S) The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.

REINSPECTION REQUIRED The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.

CORRECTIBLE FAILURE(S) The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFADAVIT OF CORRECTION: I herby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

<u>James Taylor</u>	<u>[Signature]</u>	<u>12/2/13</u>
Service Representative Name	Signature	Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 11/14/13 [Signature] 11/14/13
 Inspector Signature Date Service Representative Signature Date



AMBULANCE INSPECTION REPORT

NEW VEHICLE

Service Providence Fire Vehicle Plate 7415 Inspection Date 11/15/13 Inspector Rossweis!

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Tighten stretcher mounts Immediate 24 hours 2 bus. days 10 bus. days
- 2. Tether for shoulder straps Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

IMMEDIATE FAILURE(S) The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.

REINSPECTION REQUIRED The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.

CORRECTIBLE FAILURE(S) The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

James Rossweis [Signature] 11/15/13
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 11/15/13 [Signature] 11/15/13
 Inspector Signature Date Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual
 NEW VEHICLE

Service Providence Fire Dept Vehicle Plate Z587 Inspection Date 11/15/13 Inspector Rossu 131

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Tether for shoulder straps Immediate 24 hours 2 bus. days 10 bus. days
- 2. Auction gauge broken Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

IMMEDIATE FAILURE(S) The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.

REINSPECTION REQUIRED The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.

CORRECTIBLE FAILURE(S) The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

<u>James Rossu</u> Service Representative Name	<u>[Signature]</u> Signature	<u>11/15/13</u> Date of Correction
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NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature]
Inspector Signature

11/15/13
Date

[Signature]
Service Representative Signature

11/15/13
Date



AMBULANCE INSPECTION REPORT

~~NEW VEHICLE~~

Service Providence Fire Dept Vehicle Plate 1043 Inspection Date 11/15/13 Inspector Rossini

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Tether for shoulder straps straps worn Immediate 24 hours 2 bus. days 10 bus. days
- 2. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

James Taylor
Service Representative Name

[Signature]
Signature

11/27/13
Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature]
Inspector Signature

11/15/13
Date

[Signature]
Service Representative Signature

11/15/13
Date



AMBULANCE INSPECTION REPORT

ANNUAL
 NEW VEHICLE

Service Providence Fire Vehicle Plate 1044 Inspection Date 11/13/13 Inspector Rossmeisl

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Tether for shoulder straps Immediate 24 hours 2 bus. days 10 bus. days
- 2. Force for suction gauge (MS) (R) Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

James Yarla _____ 11/13/13
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

Rossmeisl _____ 11/13/13
 Inspector Signature Date

James Yarla _____ 11/13/13
 Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Approved
 NEW VEHICLE

Service Providence Fire Dept Vehicle Plate 1015 Inspection Date 11/13/13 Inspector Rossmeis 1

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Suspension Striker Immediate 24 hours 2 bus. days 10 bus. days
- 2. Light out lightbox Immediate 24 hours 2 bus. days 10 bus. days
- 3. Rear Red & Amber Flashers out Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

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AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

James Taylor [Signature] 11/14/13
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 11/13/13
Date

[Signature] 11/13/13
Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual
 NEW VEHICLE

Service Providence Fire Dept Vehicle Plate 1013 Inspection Date 11/17/13 Inspector Rossner

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Lights out front grill Immediate 24 hours 2 bus. days 10 bus. days
- 2. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle **MAY NOT** be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle **MUST BE REINSPECTED** before an Ambulance License can be issued. This vehicle **MAY NOT** be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle **MAY** be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

JAMES TAYLOR Jan Taylor 11/18/2013
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

Eric Hamill 11/17/13 [Signature] 11/18/13
 Inspector Signature Date Service Representative Signature Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service
1/2011



AMBULANCE INSPECTION REPORT

ANNUAL
 NEW VEHICLE

Service Providence Fire Dept Vehicle Plate 1004 Inspection Date 11/14/13 Inspector Rossini

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

1. Emergency lights out x 3, Bumper R, Center grill, Lightbar Immediate 24 hours 2 bus. days 10 bus. days
2. _____ Immediate 24 hours 2 bus. days 10 bus. days
3. _____ Immediate 24 hours 2 bus. days 10 bus. days
4. _____ Immediate 24 hours 2 bus. days 10 bus. days
5. _____ Immediate 24 hours 2 bus. days 10 bus. days
6. _____ Immediate 24 hours 2 bus. days 10 bus. days
7. _____ Immediate 24 hours 2 bus. days 10 bus. days
9. _____ Immediate 24 hours 2 bus. days 10 bus. days
9. _____ Immediate 24 hours 2 bus. days 10 bus. days
10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFADAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

James TAYLOR [Signature] 11/14/13
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 11/14/13
 Inspector Signature Date

[Signature] 11/14/13
 Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual
 NEW VEHICLE

Service Providence Fire Dept. Vehicle Plate 1004 Inspection Date 11/08/13 Inspector Rossmeisl

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Front Grill lights out. Immediate 24 hours 2 bus. days 10 bus. days
- 2. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

James Taylor [Signature] 11/12/2013
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 11/8/13
 Inspector Signature Date

[Signature] 11/8/13
 Service Representative Signature Date



AMBULANCE INSPECTION REPORT

NEW VEHICLE

Service Providence Fire Vehicle Plate 1460 Inspection Date 10-22-14 Inspector Rossman

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an Initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Tusp Sticker Immediate 24 hours 2 bus. days 10 bus. days
- 2. Mount Fire Ex Immediate 24 hours 2 bus. days 10 bus. days
- 3. Secure Trash & Sharps Cont Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6883; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFADAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

Steven A. Laroche Steven A. Laroche 10/23/2014
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 10/22/14
Inspector Signature Date

[Signature] 10/23/14
Service Representative Signature Date



AMBULANCE INSPECTION REPORT

★ New

Annual Spot

Service Rouderne Fire Vehicle Plate 1013 Inspection Date 1/28/13 Inspector Rossini

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

1. infant N + NRB Immediate 24 hours 2 bus. days 10 bus. days
2. _____ Immediate 24 hours 2 bus. days 10 bus. days
3. _____ Immediate 24 hours 2 bus. days 10 bus. days
4. _____ Immediate 24 hours 2 bus. days 10 bus. days
5. _____ Immediate 24 hours 2 bus. days 10 bus. days
6. _____ Immediate 24 hours 2 bus. days 10 bus. days
7. _____ Immediate 24 hours 2 bus. days 10 bus. days
8. _____ Immediate 24 hours 2 bus. days 10 bus. days
9. _____ Immediate 24 hours 2 bus. days 10 bus. days
10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFADAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

Capt. Steven A. Laracho [Signature] 1/28/13
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

[Signature] 1/28/13
 Inspector Signature Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 1/28/13
 Service Representative Signature Date



AMBULANCE INSPECTION REPORT

NEW VEHICLE

Service West Gloucester Vehicle Plate 1148 Inspection Date 2/10/14 Inspector Rosmaris

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an Initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Front Hood lettering Immediate 24 hours 2 bus. days 10 bus. days
- 2. Inspection Sticker Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

IMMEDIATE FAILURE(S) The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.

REINSPECTION REQUIRED The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.

CORRECTIBLE FAILURE(S) The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

Angela Taylor Angela Taylor 2-13-14
Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 2/10/14
Inspector Signature Date

[Signature] 2/10/14
Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual
 NEW VEHICLE

Service West Gloucester Vehicle Plate 1148 Inspection Date 8/2/13 Inspector Rossmeis

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Oral Boarding 503 mg Immediate 24 hours 2 bus. days 10 bus. days
- 2. Pedi wheel 2010-2011 Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. Vehicle ok to use pending Corr Immediate 24 hours 2 bus. days 10 bus. days
- 5. Def. Pic Rossmeis Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

Angela Taylor [Signature] 8-10-13
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 8/2/13
Inspector Signature Date

[Signature] 8/2/13
Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual
 NEW VEHICLE

Service West Gloucester Vehicle Plate 1792 Inspection Date 4-8-13 Inspector Rossini

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. 1 light out lightbar Corrected Immediate 24 hours 2 bus. days 10 bus. days
- 2. Abd. Urinals COS Immediate 24 hours 2 bus. days 10 bus. days
- 3. Feltier from SS COS Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

Angela Taylor 4-8-13
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

Rossini 4/8/13
Inspector Signature Date

Angela Taylor _____
Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual Spot

Service W Greenwich Fire Vehicle Plate 29 Inspection Date 11/10/14 Inspector Rossmeizi

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. hidocaine 300 mg Immediate 24 hours 2 bus. days 10 bus. days
- 2. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFADAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

WESTFD MARK CARY [Signature] 11-10-14 1PM
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

[Signature] 11/10/14
Inspector Signature Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service
[Signature] 11-10-14
Service Representative Signature Date



AMBULANCE INSPECTION REPORT

P-2

Annual Spot

Service West Warwick FD Vehicle Plate 2147 Inspection Date 4/23/14 Inspector Rossini

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Pedi Dosing device Immediate 24 hours 2 bus. days 10 bus. days
- 2. Tighten Stretcher mounts Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

Lt. Paul McAllister Lt. Paul McAllister 5-2-14
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

[Signature] 4/23/14 Lt. Paul R McAllister 4/23/14
 Inspector Signature Date Service Representative Signature Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service



AMBULANCE INSPECTION REPORT

L1

Annual Spot

Service West Warwick FD Vehicle Plate 2911 Inspection Date 4/23/14 Inspector Rossmust

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

1. Peeli Parts ordered Immediate 24 hours 2 bus. days 10 bus. days
2. Peeli Dosing device Immediate 24 hours 2 bus. days 10 bus. days
3. _____ Immediate 24 hours 2 bus. days 10 bus. days
4. _____ Immediate 24 hours 2 bus. days 10 bus. days
5. _____ Immediate 24 hours 2 bus. days 10 bus. days
6. _____ Immediate 24 hours 2 bus. days 10 bus. days
7. _____ Immediate 24 hours 2 bus. days 10 bus. days
8. _____ Immediate 24 hours 2 bus. days 10 bus. days
9. _____ Immediate 24 hours 2 bus. days 10 bus. days
10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

<u>Lt. Paul McAllister</u>	<u>Lt. Paul McAllister</u>	<u>5-2-14</u>
Service Representative Name	Signature	Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

Eric Rossmust 4/23/14
 Inspector Signature Date

Lt. Paul R. McAllister _____
 Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual Spot

Service West Warwick FD Vehicle Plate 1072 Inspection Date 4/23/14 Inspector Rossman 131

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

1. Redi wheel or Equip. Immediate 24 hours 2 bus. days 10 bus. days
2. _____ Immediate 24 hours 2 bus. days 10 bus. days
3. _____ Immediate 24 hours 2 bus. days 10 bus. days
4. _____ Immediate 24 hours 2 bus. days 10 bus. days
5. _____ Immediate 24 hours 2 bus. days 10 bus. days
6. _____ Immediate 24 hours 2 bus. days 10 bus. days
7. _____ Immediate 24 hours 2 bus. days 10 bus. days
8. _____ Immediate 24 hours 2 bus. days 10 bus. days
9. _____ Immediate 24 hours 2 bus. days 10 bus. days
10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

<u>Lt. Paul McAllister</u>	<u>Lt. Paul McAllister</u>	<u>5-2-14</u>
Service Representative Name	Signature	Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

[Signature]
Inspector Signature

4/23/14
Date

Lt. Paul R. McAllister
Service Representative Signature

4/23/14
Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service



AMBULANCE INSPECTION REPORT

E3

Annual Spot

Service West Warwick FD Vehicle Plate 1E7 Inspection Date 4/23/14 Inspector Rossman 1

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Insufficient BP Cuff Immediate 24 hours 2 bus. days 10 bus. days
- 2. Rede dosing device Immediate 24 hours 2 bus. days 10 bus. days
- 3. Exp. 1000 x 1 mg Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

Lt. Paul McAllister Lt. Paul McAllister 5-2-14
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

Rossman 1 4/23/14 Lt. Paul R. McAllister 4/23/14
 Inspector Signature Date Service Representative Signature Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service



AMBULANCE INSPECTION REPORT

R1

Annual Spot

Service West Warwick Fire Vehicle Plate 1076 Inspection Date 4-23-14 Inspector Rossman

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

1. Tighten stretcher mount Immediate 24 hours 2 bus. days 10 bus. days
2. Stretcher straps not made Recommended ^{Does not meet FRVSS Pull test standards for health-} Immediate 24 hours 2 bus. days 10 bus. days
3. Bunette no cc ordered!! Immediate 24 hours 2 bus. days 10 bus. days
4. Qual Bannister ~~is OK~~ Immediate 24 hours 2 bus. days 10 bus. days
5. Light out Grill (Red Pass side) Immediate 24 hours 2 bus. days 10 bus. days
6. _____ Immediate 24 hours 2 bus. days 10 bus. days
7. _____ Immediate 24 hours 2 bus. days 10 bus. days
8. _____ Immediate 24 hours 2 bus. days 10 bus. days
9. _____ Immediate 24 hours 2 bus. days 10 bus. days
10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

Lt. Paul McAllister Lt. Paul McAllister 5-2-14
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

Rossman 4/23/14
Inspector Signature Date

Lt. Paul R McAllister 4/23/14
Service Representative Signature Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service



AMBULANCE INSPECTION REPORT *E1*

Annual Spot

Service West Warwick Fire Vehicle Plate 596 Inspection Date 4/23/14 Inspector Rossmeis

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

1. Pedi Pds ORDERED! Immediate 24 hours 2 bus. days 10 bus. days
2. _____ Immediate 24 hours 2 bus. days 10 bus. days
3. _____ Immediate 24 hours 2 bus. days 10 bus. days
4. _____ Immediate 24 hours 2 bus. days 10 bus. days
5. _____ Immediate 24 hours 2 bus. days 10 bus. days
6. _____ Immediate 24 hours 2 bus. days 10 bus. days
7. _____ Immediate 24 hours 2 bus. days 10 bus. days
9. _____ Immediate 24 hours 2 bus. days 10 bus. days
9. _____ Immediate 24 hours 2 bus. days 10 bus. days
10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFADAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

<u>Lt. Paul McAllister</u>	<u>Lt. Paul McAllister</u>	<u>5-2-14</u>
Service Representative Name	Signature	Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

Epic Rossmeis
Inspector Signature

4/23/14
Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service
Lt. Paul R. McAllister 4/23/14
Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual Spot

Service Woonsocket Fire Dept. Vehicle Plate 139 Inspection Date 12/15/14 Inspector Rossini

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Insp sticker Immediate 24 hours 2 bus. days 10 bus. days
- 2. Check Shoulder Straps install Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFADAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

LT. STEVEN C. ENCARNATION [Signature] 12/16/14
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4-1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 12/15/14
 Inspector Signature Date

[Signature] 12/15/14
 Service Representative Signature Date



AMBULANCE INSPECTION REPORT

NEW VEHICLE

Service Woonsocket Fire Vehicle Plate 1562 Inspection Date 6/17/14 Inspector Rosemuis

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Narrow 6 way Immediate 24 hours 2 bus. days 10 bus. days
- 2. SA Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. Vehicle OK to use pending receipt Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle **MAY NOT** be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle **MUST BE REINSPECTED** before an Ambulance License can be issued. This vehicle **MAY NOT** be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle **MAY** be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-8883; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

Steve Encarnacion [Signature] 7/16/14
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 6/17/14
 Inspector Signature Date

[Signature] 6/17/14
 Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual
 NEW VEHICLE

Service: Bourneville Fire Dept Vehicle Plate 133 Inspection Date 12/3/13 Inspector Rossmeisl

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an Initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Rear Pass Side Outer tire Immediate 24 hours 2 bus. days 10 bus. days
- 2. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an Initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

Steven Encarnacion [Signature] 1/24/14
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 12/3/13
Inspector Signature Date

[Signature] 12/3/13
Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual
 NEW VEHICLE

Service Woonsocket Fire Vehicle Plate 2924 Inspection Date 12/3/13 Inspector Rossini

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Light out high position Pt Comp Immediate 24 hours 2 bus. days 10 bus. days
- 2. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

G. Steven Encarnacion [Signature] 12/5/13
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 12/3/13
Inspector Signature Date

[Signature] 12/3/13
Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual
 NEW VEHICLE

Service Wanssuket Fire Vehicle Plate 138 Inspection Date 12/4/13 Inspector Rossini

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an Initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Primary light out Pass side Immediate 24 hours 2 bus. days 10 bus. days
- 2. Lights out Pt Comp x 3 Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

Steven Encarnacion [Signature] 1/24/14
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 12/4/13
Inspector Signature Date

[Signature] 12/4/13
Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual
 NEW VEHICLE

Service Woonsocket Fire Vehicle Plate 146 Inspection Date 12-4-13 Inspector Rossmeis

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an Initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Rear outer DS Tire Immediate 24 hours 2 bus. days 10 bus. days
- 2. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

IMMEDIATE FAILURE(S) The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.

REINSPECTION REQUIRED The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.

CORRECTIBLE FAILURE(S) The above-listed deficiencies must be corrected before an Initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

STEVEN ENCAINATO
Service Representative Name

[Signature]
Signature

11/29/14
Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 12/4/13
Inspector Signature Date

[Signature] 12/4/13
Service Representative Signature Date



AMBULANCE INSPECTION REPORT

ANNUAL

NEW VEHICLE

Service Woonsocket Fire Dept Vehicle Plate 145 Inspection Date 12/3/13 Inspector Rossini

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Lower Pin near door Immediate 24 hours 2 bus. days 10 bus. days
- 2. Ambulance Seats - Front / Cab Immediate 24 hours 2 bus. days 10 bus. days ^{30 days}
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-3352; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

LT. STEVEN ENCLAMATION [Signature] 4/10/14
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 12/3/13
 Inspector Signature Date

[Signature] 10/3/13
 Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual Spot

Service Westerly Amb Corps Vehicle Plate 1963Z Inspection Date 9-2-14 Inspector Rossman

R3

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

1. Rear Pass Side Stroke Immediate 24 hours 2 bus. days 10 bus. days
2. _____ Immediate 24 hours 2 bus. days 10 bus. days
3. _____ Immediate 24 hours 2 bus. days 10 bus. days
4. _____ Immediate 24 hours 2 bus. days 10 bus. days
5. _____ Immediate 24 hours 2 bus. days 10 bus. days
6. _____ Immediate 24 hours 2 bus. days 10 bus. days
7. _____ Immediate 24 hours 2 bus. days 10 bus. days
8. _____ Immediate 24 hours 2 bus. days 10 bus. days
9. _____ Immediate 24 hours 2 bus. days 10 bus. days
10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

Bethany Gingerella Chief RJM 9-24-14
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

Rossman 9-3-14
 Inspector Signature Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service
RJM 9/3/14
 Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual Spot

Service Westerly Amb Corp Vehicle Plate WA-369 Inspection Date 9-2-14 Inspector Rossini

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. 751

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Exp stickers Immediate 24 hours 2 bus. days 10 bus. days
- 2. Light out Pt Comp Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6883; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the data indicated

Bonny Gigerella Chief [Signature] 9-4-2014
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

[Signature] 9/2/14
 Inspector Signature Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service
[Signature] 9/3/14
 Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual Spot

Service Westerly Amb Corps Vehicle Plate WA-366 Inspection Date 9/3/14 Inspector Rossini

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

752

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

1. Jump Stickers Immediate 24 hours 2 bus. days 10 bus. days
2. _____ Immediate 24 hours 2 bus. days 10 bus. days
3. _____ Immediate 24 hours 2 bus. days 10 bus. days
4. _____ Immediate 24 hours 2 bus. days 10 bus. days
5. _____ Immediate 24 hours 2 bus. days 10 bus. days
6. _____ Immediate 24 hours 2 bus. days 10 bus. days
7. _____ Immediate 24 hours 2 bus. days 10 bus. days
8. _____ Immediate 24 hours 2 bus. days 10 bus. days
9. _____ Immediate 24 hours 2 bus. days 10 bus. days
10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

<u>BGM</u>	<u>Chief Bethany Gingerella</u>	<u>9-4-2014</u>
Service Representative Name	Signature	Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

[Signature] 9/3/14
Inspector Signature Date

[Signature] 9/3/14
Service Representative Signature Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service



AMBULANCE INSPECTION REPORT

Annual Spot

Service Westerly Amb Corps Vehicle Plate 71335 Inspection Date 9/3/14 Inspector ROSSMUIS

RI

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

1. Narcos Immediate 24 hours 2 bus. days 10 bus. days
2. _____ Immediate 24 hours 2 bus. days 10 bus. days
3. _____ Immediate 24 hours 2 bus. days 10 bus. days
4. _____ Immediate 24 hours 2 bus. days 10 bus. days
5. _____ Immediate 24 hours 2 bus. days 10 bus. days
6. _____ Immediate 24 hours 2 bus. days 10 bus. days
7. _____ Immediate 24 hours 2 bus. days 10 bus. days
8. _____ Immediate 24 hours 2 bus. days 10 bus. days
9. _____ Immediate 24 hours 2 bus. days 10 bus. days
10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

Bethany Gingenella Chief [Signature]
Service Representative Name Signature

9-5-14
Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS)

[Signature] 9/3/14
Inspector Signature Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service
[Signature] 9/3/14
Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual Spot

Service Westerly Amb Corps Vehicle Plate W1-364 Inspection Date 9/3/14 Inspector Rozzmeri

753

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. Tire Sticker Immediate 24 hours 2 bus. days 10 bus. days
- 2. Pl Corp lights out ✓ 2 Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 8. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFADAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

Bethany Gingerella Chief Rozzmeri 9-4-14
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

[Signature] 9/3/14
 Inspector Signature Date

[Signature] 9/3/14
 Service Representative Signature Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service



AMBULANCE INSPECTION REPORT

Annual Spot

Service Westerly Amb Corps Vehicle Plate LA-740 Inspection Date 9/3/14 Inspector Rosmaria

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection.

754

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

1. Susp 5-1 check Immediate 24 hours 2 bus. days 10 bus. days
2. _____ Immediate 24 hours 2 bus. days 10 bus. days
3. _____ Immediate 24 hours 2 bus. days 10 bus. days
4. _____ Immediate 24 hours 2 bus. days 10 bus. days
5. _____ Immediate 24 hours 2 bus. days 10 bus. days
6. _____ Immediate 24 hours 2 bus. days 10 bus. days
7. _____ Immediate 24 hours 2 bus. days 10 bus. days
9. _____ Immediate 24 hours 2 bus. days 10 bus. days
9. _____ Immediate 24 hours 2 bus. days 10 bus. days
10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The vehicle's Ambulance License is immediately suspended based on the critical failures listed above and will not be reinstated until all critical deficiencies are corrected and RIDOH is notified in writing thereof.
- CORRECTIBLE FAILURE(S)** The vehicle's Ambulance License will be automatically suspended WITHOUT FURTHER NOTICE should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.
- REINSPECTION REQUIRED** The vehicle must be re-inspected before a Certificate of Inspection can be issued.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFIDAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated

Bethany Gigerella, Chief [Signature] 9-4-2014
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

[Signature] 9/3/14
 Inspector Signature Date

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service
[Signature] 9/2/14
 Service Representative Signature Date



AMBULANCE INSPECTION REPORT

Annual Spot

Service Westerly Amb Corps Vehicle Plate 21335 Inspection Date 12/17/12 Inspector Rosmaris

PASSED Vehicle has met all inspection requirements and will be issued a Certificate of Inspection. The above listed Ambulance Service is hereby authorized to use this vehicle for EMS functions pending issuance of an initial Ambulance License.

NOTICE OF DEFICIENCY Vehicle has been found deficient and will not be issued a Certificate of Inspection until the deficiencies listed herein have been corrected.

- 1. mag stickers Immediate 24 hours 2 bus. days 10 bus. days
- 2. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 3. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 4. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 5. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 6. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 7. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 9. _____ Immediate 24 hours 2 bus. days 10 bus. days
- 10. _____ Immediate 24 hours 2 bus. days 10 bus. days

- IMMEDIATE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until all critical deficiencies are corrected and RIDOH notified in writing thereof.
- REINSPECTION REQUIRED** The above-listed deficiencies must be corrected and the vehicle MUST BE REINSPECTED before an Ambulance License can be issued. This vehicle MAY NOT be used for EMS functions until it has been successfully re-inspected.
- CORRECTIBLE FAILURE(S)** The above-listed deficiencies must be corrected before an initial Ambulance License can be issued. This vehicle MAY be used for EMS functions during the correction period shown. However, this authorization will lapse should any deficiency not be corrected within the correction period shown above and/or should RIDOH not be notified in writing thereof.

INSTRUCTIONS: 1.) Correct all cited deficiencies within the permitted time period; 2.) Sign the Affidavit of Correction below to indicate that deficiencies have been corrected; 3.) Fax this form to the Division of EMS at (401) 222-6683; 4.) If a reinspection is required, contact the Division of EMS at (401) 222-2401 to make an appointment.

AFFADAVIT OF CORRECTION: I hereby certify that all deficiencies cited in this inspection have been corrected as of the date indicated.

Bethany Gingrella [Signature] 12/17/12
 Service Representative Name Signature Date of Correction

NOTE: Once a vehicle's Ambulance License has been suspended, the Ambulance Service may not use the vehicle for EMS functions until correcting all deficiencies, notifying RIDOH in writing of the correction, and receiving a written reinstatement notice from RIDOH. To operate an ambulance on public ways in this state if the ambulance is not licensed by the Department of Health is a violation of Rhode Island General Law § 23-4.1-6 and the Rules and Regulations Relating to Emergency Medical Services (R23-4.1-EMS).

TOP COPY: RIDOH BOTTOM COPY: Ambulance Service

[Signature] 12/17/12
 Inspector Signature Date

[Signature] 12/17/12
 Service Representative Signature Date

