

NORTH CAROLINA ASSOCIATION OF RESCUE & EMERGENCY MEDICAL SERVICES, INC.

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CERTIFICATE OF ELIGIBILITY

WATER RESCUE - OPENWATER (STILLWATER) RESCUE

*** PLEASE PRINT OR TYPE

NAME OF UNIT _____ DATE _____

MAILING ADDRESS _____ ST. ADDRESS _____

CITY _____ STATE _____ ZIP _____ COUNTY _____

UNIT EMAIL ADDRESS _____

EMERGENCY PHONE #() _____ SOCIAL PHONE #() _____ E-MAIL _____

DATE ORGANIZED _____ NON-PROFIT ORGANIZATION { } YES { } NO # OF MEMBERS _____

BUSINESS MEETING NIGHT _____ TRAINING NIGHTS _____

CAPTAIN/CHIEF _____ EMAIL ADDRESS _____

BUSINESS PHONE () _____ HOME PHONE () _____

SECRETARY _____ EMAIL ADDRESS _____

BUSINESS PHONE (_____ HOME PHONE (_____) _____

DOES YOUR SQUAD PROVIDE?

RESCUE ONLY _____ EMS ONLY _____ EMS/FIRE _____ EMS/RESCUE _____ EMS/FIRE/RESCUE _____ FIRE/RESCUE _____

COPY OF STATE CHARTER & CONTRACT

WITH CITY / COUNTY, INDICATING DISTRICT OF AUTHORITY,

MUST ACCOMPANY THIS CERTIFICATE OF ELIGIBILITY

NCAR&EMS, INC., REPRESENTATIVE _____

APPROVED: _____ YES _____ NO

TO BE SIGNED BY COUNTY OR CITY OFFICIAL

THIS IS TO CERTIFY THAT THE ABOVE NAMED RESCUE PROVIDER IS AN ACTIVE OPERATING SERVICE, OPERATING IN:

_____ CITY OR COUNTY

_____ SIGNED

COUNTY OR CITY OFFICIAL

_____ TITLE

(NOTARY SEAL)

COUNTY OF _____ STATE OF _____

ON THE _____ DAY OF _____ 20_____, APPEARED BEFORE ME THE SAID INDIVIDUAL DESCRIBED HEREIN AND WHO EXECUTED THE FOREGOING INSTRUMENT, AND HE (OR SHE) DULY ACKNOWLEDGED TO ME THAT HE (OR SHE) EXECUTED SAME AND THAT THE STATEMENT THEREIN CONTAINED WERE TRUE TO THE BEST OF HIS (OR HER) KNOWLEDGE AND BELIEF.

MY COMMISSION EXPIRES: _____ NOTARY PUBLIC

TO BE SIGNED & NOTARIZED BY DEPARTMENT OFFICIAL

THIS IS TO CERTIFY THAT THE ABOVE NAMED RESCUE PROVIDER IS AN ACTIVE OPERATING SERVICE:

_____ SIGNATURE, SQUAD OFFICIAL

_____ TITLE

(NOTARY SEAL)

BOTH SIGNATURES ARE REQUIRED

COUNTY OF _____ STATE OF _____

ON THE _____ DAY OF _____ 20_____, APPEARED BEFORE ME THE SAID INDIVIDUAL DESCRIBED HEREIN AND WHO EXECUTED THE FOREGOING INSTRUMENT, AND HE (OR SHE) DULY ACKNOWLEDGED TO ME THAT HE (OR SHE) EXECUTED THE SAME AND THAT THE STATEMENTS THEREIN CONTAINED WERE TRUE TO THE BEST OF HIS (OR HER) KNOWLEDGE AND BELIEF.

MY COMMISSION EXPIRES: _____ NOTARY PUBLIC

MINIMUM STANDARD REQUIREMENTS - NCAR&EMS

WATER RESCUE – OPENWATER (STILLWATER) RESCUE

WATER RESCUE – OPENWATER (STILLWATER) RESCUE IS DEFINED AS WATER RECOVERY EFFORTS AS AN INITIAL RESPONDER USING VARIOUS MEANS OF RECOVERY EQUIPMENT TO INCLUDE; BUT NOT LIMITED TO DRAGS, GRAPPLING HOOKS, etc.

1. MINIMUM PERSONNEL / ORGANIZATION REQUIREMENTS:

NUMBER OF PERSONNEL WITH CERTIFICATION

(ENTER NUMBER OF PERSONNEL WITH EACH CERTIFICATION)

MEDICAL RESPONDER - # _____ EMT - # _____ EMT-D - # _____

EMT-I - # _____ EMT-P - # _____ RT - # _____ MICN - # _____ NO CERTIFICATION - # _____

A MINIMUM OF EIGHT (8) CERTIFIED AS FIRST RESPONDERS BY THE AHJ OR HIGHER TO INCLUDE THE NUMBER OF PERSONAL CERTIFICATIONS AS REQUIRED BY THE AHJ TO PERFORM THIS SERVICE.

2. TYPE OF RESCUE TO PERFORM AS SPECIFIED IN THE CONTRACT WITH THE AHJ:

INCLUDED BUT NOT LIMITED TO AND BASED ON LOCAL NEED OF AHJ: WATER RESCUE- OPENWATER (STILLWATER) RESCUE OR BODY RECOVERY EFFORTS AS REQUIRED BY THE LOCAL AHJ.

Organizations providing Openwater (Stillwater) Rescue levels of service shall meet all the requirements of United States Coast Guard, North Carolina Wildlife Resources Commission, Dive Rescue International, or other recognized courses of instruction for boat operations including equipment, trailing, safety, boat operations and handling.

3. VEHICLE:

VEHICLE(S) USED FOR OPENWATER(Stillwater)RESCUE SHALL BE CAPABLE OF TRANSPORTING RESCUE PERSONNEL AND EQUIPMENT TO AN INCIDENT SAFELY AND CANNOT EXCEED THE VEHICLE'S TOTAL GVWR, INCLUDING THE CHASSIS, BODY, AND RESCUE EQUIPMENT AND MEDICAL CARE EQUIPMENT WHEN LOADED. ALL EQUIPMENT SHALL BE LOADED ON APPARATUS AND RESPONSE READY.

4. MINIMUM REQUIRED EQUIPMENT:

ORGANIZATIONS OPERATING AT THE OPENWATER (STILLWATER) OPERATIONS LEVEL OF SERVICE SHALL HAVE ADEQUATE RESCUE EQUIPMENT FOR THE AUTHORITY HAVING JURISDICTION.

YOU MUST HAVE EACH OF THE FOLLOWING ITEMS TO MEET ELIGIBILITY REQUIREMENTS FOR CERTIFICATION.

Openwater (Stillwater)Team Equipment

Organizations operating at the Openwater (Stillwater) Rescue operations level of service shall have adequate rescue equipment for the authority having jurisdiction.

The organization shall have adequate watercraft for the Authority Having Jurisdiction (AHJ) to include all safety equipment for the size and type of watercraft being used. The watercraft shall be licensed or registered as required in accordance with all applicable laws of the North Carolina Wildlife Resources Commission, US Coast Guard or other regulatory agencies governing the AHJ.

___ 2 Throw Bags per Watercraft

___ 1 Each 18 IN. Type IV Throwable Device

___ Body Recovery Equipment which may include Drags, Grappling Hooks, etc. (Please provide a list of this equipment)

___ 1 Set of Incident Command Forms Per AHJ Download These at:
http://www.nimsonline.com/download_center/index.htm#forms