

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

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STATEMENT OF ELIGIBILITY

HEAVY RESCUE

*** PLEASE PRINT OR TYPE

NAME OF DEPARTMENT _____ DATE _____

MAILING ADDRESS _____ ST. ADDRESS _____

CITY _____ STATE _____ ZIP _____ COUNTY _____

DEPARTMENT EMAIL ADDRESS _____

COMM CENTER PHONE #() _____ BUSINESS PHONE #() _____

DEPARTMENT CELL PHONE #() _____ FAX # _____

CAPTAIN/CHIEF _____ EMAIL ADDRESS _____

WORK PHONE #() _____ HOME PHONE #() _____ CELL #() _____

SECRETARY _____ EMAIL ADDRESS _____

WORK PHONE #() _____ HOME PHONE #() _____ CELL #() _____

DOES YOUR SQUAD PROVIDE?

RESCUE ONLY ___ EMS ONLY ___ EMS/FIRE ___ EMS/RESCUE ___ EMS/FIRE/RESCUE ___ FIRE/RESCUE ___

**DOCUMENTS NEEDED TO CERTIFY & MUST ACCOMPANY THIS
STATEMENT OF ELIGIBILITY:**

- 1) COPY OF STATE CHARTER**
- 2) AUTHORITY TO OPERATE WITH CITY/COUNTY**

AUTHORITY TO OPERATE

TO BE SIGNED & NOTARIZED BY CITY OR COUNTY OFFICIAL

THIS IS TO CERTIFY THAT _____
Name of Department

IS AN ACTIVE OPERATING SERVICE, OPERATING IN _____ CITY
OR COUNTY AND IS HEREBY AUTHORIZED TO PROVIDE **HEAVY RESCUE** IN THE ABOVE MENTIONED CITY OR
COUNTY.

COUNTY OR CITY OFFICIAL PRINT NAME _____ SIGNED

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 _____
Name of Department

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AND BELIEF.

MY COMMISSION EXPIRES: _____ NOTARY PUBLIC

BOTH SIGNATURES ARE REQUIRED

MINIMUM STANDARD REQUIREMENTS - NCAR&EMS

HEAVY RESCUE

HEAVY RESCUE IS DEFINED AS ADVANCED LEVELS OF ALL RESCUE, ADVANCED EXTRICATION, AND BASIC LIFE SUPPORT FUNCTIONS AS AN INITIAL RESPONDER WITH MINIMUM ADVANCED EQUIPMENT.

1. MINIMUM PERSONNEL / ORGANIZATION REQUIREMENTS:

PLEASE PROVIDE VERIFICATION OF CERTIFICATION OF THE EIGHT (8) PERSONNEL HOLDING THE RESCUE CERTIFICATIONS LISTED BELOW. VERIFICATION EXAMPLES MAY INCLUDE, BUT ARE NOT LIMITED TO CERTIFICATES, TRANSCRIPTS, ETC.

A MINIMUM OF EIGHT (8) PERSONNEL SHALL HOLD RESCUE CERTIFICATIONS AS ERT, RT-VMR & RT-ROPES, TR-VMR & TR-ROPES, TECHNICAL RESCUER & TR-VEHICLE RESCUE & TR MACHINERY & AGRICULTURE, OR TR ROPES & TR COMMON PASSENGER VEHICLE & TR MACHINERY & AGRICULTURE

2. TYPE OF RESCUE TO PERFORM:

AS SPECIFIED BY THE CONTRACT WITH THE AHJ

3. VEHICLE:

VEHICLE(S) USED FOR HEAVY 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: DEPT. NAME_____

NCAR&EMS, INC.,
REPRESENTATIVE _____ DATE: _____

APPROVED: _____ YES _____ NO INSPECTOR'S SIGNATURE: _____

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

A. COMMUNICATIONS EQUIPMENT

_____ 1 - MOBILE RADIO PER VEHICLE
_____ 8 - PORTABLE RADIOS

ALL COMMUNICATIONS EQUIPMENT SHALL HAVE THE CAPABILITY TO COMMUNICATE BETWEEN EMERGENCY AGENCIES OF THE LOCAL JURISDICTION.

B. GENERATOR

_____ 1 GENERATOR, 5KW, MINIMUM, MOBILE
_____ 1 GENERATOR, 8KW, MINIMUM, MOBILE

C. LIGHTING EQUIPMENT

_____ 8 HANDLIGHTS, PORTABLE, BATTERY POWER OR RECHARGEABLE HANDLIGHTS.
_____ ADEQUATE SCENE LIGHTS TO ILLUMINATE THE SCENE PER THE AHJ. MAY BE PORTABLE, TRIPOD
_____ MOUNTED, LIGHT TOWER OR OTHER TYPE LIGHTS. FLASHLIGHTS WILL NOT BE INCLUDED IN
_____ THESE LIGHTS. (THESE LIGHTS MAY BE QUARTZ, FLOURESCENT, LED, ETC.)
_____ 200 FT. TOTAL OF 12/3 EXT. CORDS, MAY BE DIFFERENT LENGTHS
_____ 2 - 12/3 GFCI

D. FIRE PROTECTION EQUIPMENT

_____ 1 EXTINGUISHER, PORTABLE, 10 LB., ABC TYPE
_____ 1 EXTINGUISHER, PORTABLE, 10 LB., CO 2 TYPE

E. PROTECTIVE CLOTHING: MINIMUM OF EIGHT (8) SETS

_____ 8 PAIR GLOVES, LEATHER PALM
_____ 8 PAIR GOGGLES/SAFETY GLASSES
_____ 8 PROTECTIVE COATS, PROTECTIVE COVERALLS FLAME RESIST. IE.EX. 6.0-7.5 NOMEX
_____ 8 PROTECTIVE PANTS, PROTECTIVE COVERALLS FLAME RESIST. IE. EX. 6.0-7.5 NOMEX
_____ 8 PAIR PROTECTIVE FOOTWEAR
_____ 8 SAFETY RATED HELMET
_____ 8 HEARING PROTECTION

F. CRIBBING AND STABILIZATION

_____ 60 BLOCKS, 4"X4"X24" (MINIMUM), PREFERRED SOUTHERN YELLOW PINE OR DOUGLAS FIR
_____ 20 BLOCKS, 2"X4"X24" (MINIMUM), PREFERRED SOUTHERN YELLOW PINE OR DOUGLAS FIR

Heavy Rescue: Inspectors Initials _____

12 BLOCKS, 6"X6"X24" (MINIMUM), PREFERRED SOUTHERN YELLOW PINE OR DOUGLAS FIR
12 PAIR WEDGES, 6"X6"X24" (MINIMUM), PREFERRED SOUTHERN YELLOW PINE OR DOUGLAS FIR
20 PAIR WEDGES, 4"X4"X18" (MINIMUM), PREFERRED SOUTHERN YELLOW PINE OR DOUGLAS FIR
2 PER VEHICLE WHEEL CHOCKS - (Note: Not Required on Department Ambulances)
8 STEP CRIBBING (WOOD OR COMMERCIALY MADE)
16 PICKETS 1"X48" MINIMUM, ROLLED STEEL OR # 8 REBAR EQUIVALENTS
16 EACH PICKETS CAPS/COVERS

G. HIGH LEVEL EQUIPMENT

High level equipment software and hardware must meet NFPA 2500 general use requirements. Life safety rope will be 11mm-16mm in diameter with a minimum breaking strength of 40 kN. All hardware must be sized and rated specifically for the size of rope being used at the department. These updates are not required if you have successfully been inspected previously by NCAREMS.

1,200 FT - GENERAL USE LIFE SAFETY ROPE AS SPECIFIED IN NFPA 2500. THIS MAY BE CUT TO DIFFERENT LENGTHS. (NOTE - AGENCIES WILL BE REQUIRED TO MAINTAIN MANUFACTURER'S DOCUMENTATION TO DEMONSTRATE COMPLIANCE WITH THE ABOVE REQUIREMENTS DURING AN INSPECTION, UNLESS YOU HAVE BEEN SUCCESSFULLY INSPECTED BY A PREVIOUS NCAREMS STANDARD AND RETAINED THE ORIGINAL EQUIPMENT). ACCORDINGLY, THE NFPA GENERAL USE LIFE SAFETY ROPES ARE TO BE 11 mm to 16 mm IN DIAMETER WITH A MBS OF 40 KN.

4 HARNESSSES, CLASS II TYPE

4 HARNESSSES, CLASS III TYPE (MAY BE A CLASS II W/CHEST HITCH ATTACHED)

36 CARABINERS, LOCKING GATE, MUST MEET NFPA 2500 GENERAL USE REQUIREMENTS (ALUMINUM UST BE STAMPED). HARDWARE MUST BE SPECIFICALLY SIZED FOR THE SIZE OF ROPE BEING USED. THESE UPDATES ARE NOT REQUIRED IF YOU HAVE BEEN SUCCESSFULLY INSPECTED BY A PREVIOUS NCAREMS STANDARD AND RETAINED THAT EQUIPMENT.

9 DESCENDERS, MAY BE ANY COMBINATION OF APPROVED GENERAL USE DESCENDERS WITH A MINIMUM OF ONE (1) BRAKE BAR RACK. (IF USING 8'S MUST BE WINGED TYPE)

1 RIGGING PLATE

24 - 7mm - 9mm PRUSSIK SLINGS, LENGTHS MAY VARY PER THE AHJ'S NEEDS. (Note: EYE TO EYE OR SOWN SLINGS MAY BE SUBSTITUTED FOR THE ABOVE BUT MUST MEET THE REQUIREMENTS OF NFPA 2500 GENERAL USE AND BE CORRECTLY SIZED FOR THE SIZE OF ROPE BEING USED)

8 25 FT GENERAL USE LIFE SAFETY ROPE

8 25 FT X 1 IN., WEBBING - THIS IS IN ADDITION TO THE NFPA COLORS BELOW TUBULAR IS RECOMMENDED)

6 5 FT X 1 IN. TUBULAR WEBBING - GREEN

6 12 FT X 1 IN. TUBULAR WEBBING - YELLOW

6 15 FT X 1 IN. TUBULAR WEBBING - BLUE

6 20 FT X 1 IN. TUBULAR WEBBING - RED

10 25 FT X 1 IN. TUBULAR WEBBING - BLACK

2 BASKET STRETCHER, STOKES TYPE - WITH ADJUSTABLE BRIDLE (PREMADE OR MFG)

4 DOUBLE SHEAVE PULLEYS, 2 IN. MINIMUM DIAMETER & RATED FOR GENERAL USE OR 2 PERSON LOADS, MAY BE STEEL, ALUMINUM, ETC

8 SINGLE SHEAVE PULLEYS, 2 IN. MINIMUM DIAMETER & RATED FOR GENERAL USE OR 2 PERSON LOADS MAY BE STEEL, ALUMINUM, ETC

2 2 IN. MINIMUM DIAMETER SINGLE SHEAVE PULLEY PRUSSIK MINDING RATED FOR GENERAL USE OR 2 PERSON LOADS

6 EDGE ROLLERS/PADS

1 CINCH COLLAR

H. HANDLED TOOLS

Heavy Rescue: Inspectors Initials _____

5

Revised: 01/01/25 & 10/21/2025

_____ 2 HAMMER, 4 LB., SLEDGE TYPE, 15 IN. HANDLE
 _____ 2 HAMMER, 22 OZ. CLAW - TYPE W/15 IN. HANDLE
 _____ 2 SHOVEL, MILITARY TYPE, FOLDING
 _____ 1 BOLT CUTTERS, 24 IN.
 _____ 1 BOLT CUTTERS, 36 IN.
 _____ 2 FLAT TYPE PRY BAR
 _____ 2 PRY BAR, 15 IN.
 _____ 3 PRY BAR, 51 IN.
 _____ 1 36 IN. CROWBAR
 _____ 1 HALIGAN/HOOLIGAN BAR, 36 IN. HANDLE
 _____ 1 PICKS - POINT & CHISEL 36" HANDLE
 _____ 1 10 FT. PIKE POLE
 _____ 2 HATCHET (Note: A Pry Axe may be substituted for a hatchet)
 _____ 1 6 LB. FLAT HEAD AXE
 _____ 1 6 LB. PICK HEAD AXE
 _____ 2 8 LB. SLEDGEHAMMER
 _____ 2 LONG HANDLE, ROUND POINT SHOVEL
 _____ 2 LONG HANDLE, SQUARE SHOVEL

I. CUTTING TOOLS

_____ 2 RIGID FRAME HACKSAWS
 _____ 12 ASSORTED HACK SAW BLADES
 _____ 1 HANDSAW, CARPENTER TYPE, RIPPING
 _____ 1 BOW SAW - 24 IN.
 _____ 1 CHAIN SAW, GASOLINE OR ELECTRIC, SPARE CHAIN
 _____ 1 PAIR CHAINSAW CHAPS
 _____ 4 RECIPROCATING SAWS @ LEAST ONE MUST BE ELECTRIC (AC CORDED) BATTERY POWERED
 _____ TOOLS MUST HAVE 1 SPARE BATTERY PER TOOL
 _____ 24 ASSORTED RECIPROCATING SAWBLADES
 _____ 1 ROTARY SAW 14", W/SPARE BLADES FOR METAL & MASONARY
 _____ 1 CIRCULAR SAW 7 1/4", W/6 SPARE BLADES
 _____ 2 BOTTLES OF SPRAY LUBRICANT (NON-FLAMMABLE)
 _____ 1 AIR CHISEL - W/ASSORTED BITS, REGULATOR & HOSES
 _____ 1 IMPACT HAMMER, W/1 - BULLPOINT, 1 - CHISEL AND 1 - SPADE, GAUGES, HOSES and
 _____ REGULATORS. (ACCEPTABLE TOOLS MAY INCLUDE EITHER THE PARATECH PAKHAMMER TYPE OR
 _____ AJAX X11 - RK AXESS)

J. TRAFFIC AND CROWD CONTROL AND HAZ-MAT EQUIPMENT

_____ 8 TRAFFIC CONES OR REFLECTIVE TRIANGLES
 _____ 1 BARRIER TAPE, 2000 FT.
 _____ 8 TRAFFIC VEST, REFLECTIVE TYPE (MUST BE DOT COMPLIANT PER AHJ)
 _____ 1 INCIDENT COMMAND VEST KIT
 _____ 2 FLASHLIGHTS, WITH TRAFFIC WAND, RED, YELLOW OR ORANGE
 _____ 1 PAIR OF BINOCULARS PER RESCUE VEHICLE, 7 X 50 mm POWER
 _____ 1 D.O.T. EMERGENCY RESPONSE GUIDEBOOK PER RESCUE VEHICLE - CURRENT EDITION
 _____ (DIGITAL OR HARDCOPY)
 _____ 1 MULTI-GAS METER (TO INCLUDE O2, LEL & CO)

K. PULLING, LIFTING AND TOWING EQUIPMENT

_____ 1 WINCH 8000 LB. CAP, TRUCK MOUNTED
 _____ 2 SINGLE SHEAVE SNATCH BLOCKS FOR WINCH
 _____ 2 HANDWINCH, (COME-A-LONG TYPE), 2 TON AND MAY BE CHAIN OR CABLE. WEBBING TYPE
 _____ NOT ACCEPTED).
 _____ 4 CHAIN, 3/8 X 6 FT., GRADE 70 TRANSPORT CHAIN-W/CLEVIS HOOKS
 _____ 4 CHAIN, 3/8 X 12 FT., GRADE 70 TRANSPORT CHAIN-W/CLEVIS HOOKS
 _____ 1 CHAIN, 3/8 X 20 FT., GRADE 70 TRANSPORT CHAIN-W/CLEVIS HOOKS
 _____ 8 CHAIN SHORTENERS, 3/8 IN., GRADE 70 TRANSPORT CHAIN-W/CLEVIS HOOKS

Heavy Rescue: Inspectors Initials _____

____ 1 PORT-A-POWER, 4 TON, RESCUE KIT
____ 2 48 IN. HIGH LIFT JACKS
____ 2 60 IN. HIGH LIFT JACKS
____ 2 BOTTLE JACK, HYDRAULIC, 10 TON
____ 2 BOTTLE JACK, HYDRAULIC, 20 TON
____ 1 HIGH PRESSURE AIRBAG SET, 200 TON CAPACITY-W/ACCESSORIES-HOSES, REGULATORS & GAUGES

L. HEAVY HYDRAULIC RESCUE TOOLS

____ 1 HYDRAULIC SPREADER
____ 1 HYDRAULIC CUTTER
____ 2 HYDRAULIC RAMS
____ 1 POWER UNIT
____ 1 BACK-UP POWER UNIT

Note: Battery operated hydraulic rescue tools may be used in substitution of other similar type power tools. If using battery operated hydraulic rescue tools you must have 1 Spare Battery Per Tool.

M. HAND TOOLS - MECHANICS TOOLS (MANUAL & POWER)

____ 6 SCREWDRIVERS, STRAIGHT BLADE, ASSORTED SIZES AT LEAST 2 MUST BE 15 IN.
____ 4 SCREWDRIVERS, PHILLIPS BLADE, ASSORTED SIZES
____ 4 CENTERPUNCH, SPRING LOADED
____ 1 WRENCH, CRESCENT TYPE, 10 IN
____ 1 PIPEWRENCH, 18 IN
____ 1 KNIFE, UTILITY TYPE, HOOKED BLADE
____ 1 HAMMER, 2 LB., MACHINIST TYPE
____ 1 PLIERS, VISE GRIP TYPE, 6 IN.
____ 1 PLIERS, VISE GRIP TYPE, 10 IN.
____ 1 PLIERS, SLIP JOINT TYPE, 9 1/2 IN.
____ 1 PLIERS, SLIP JOINT TYPE, 16 IN. - CHANNEL LOCK TYPE
____ 1 COLD CHISEL, 1/2 IN. X 12 IN.
____ 1 COLD CHISEL, 1 IN. X 12 IN.
____ 1 PAIR 8 IN. TIN SNIPS
____ 1 DRILL - HAMMER TYPE 3/4 IN., W/ASSORTED BITS
____ 1 **IMPACT WRENCH 1/2 IN. DRIVE**
____ 1 SOCKET SET, 1/4 IN. DRIVE, STANDARD (3/16 THRU 1/2) AND METRIC (4 THRU 13 MM)
____ 1 SOCKET SET, 3/8 IN. DRIVE, STANDARD (7/16 THRU 13/16) AND METRIC (8 THRU 19 MM)
____ 1 SOCKET SET, 1/2 IN. DRIVE, STANDARD (7/16 THRU 1") AND METRIC (9 THRU 22 MM)
____ 1 IMPACT SOCKET SET 1/2 IN. DRIVE, STANDARD (7/16 THRU 1") AND METRIC (9 THRU 22 MM)
____ 1 SOCKET SET - 3/4 IN. DRIVE, STANDARD, 7/8 IN. THRU 2 3/8 IN.
____ 1 COMBINATION WRENCH SET, STANDARD & METRIC SETS- STANDARD-1/4 IN. THRU 1 5/8 IN., METRIC, 6 mm THRU 32 mm
____ 1 HEX KEY WRENCH SET STANDARD & METRIC 5/64, 3/8 & 1.5 mm THRU 10 mm
____ 1 TORX DRIVERS SET, SOCKET TYPE, SIZES 15 THRU 45
____ 2 ROLL OF ELECTRIC TAPE
____ 2 ROLL OF DUCT TAPE

N. MISCELLANEOUS

- _____ 1 SET OF PRINTED INCIDENT COMMAND FORMS PER AHJ: Download these forms at the following link which: <http://www.ncarems.org/standards.php>
- _____ 1 SET OF DEPARTMENTAL SOG'S - ONSITE
- _____ 1 COUNTY MAP PER VEHICLE
- _____ 1 N.C. STATE MAP PER VEHICLE
- _____ 2 FIRE RETARDANT BLANKETS
- _____ 4 TARPS, 10 FT. X 12 FT. (MINIMUM SIZE)
- _____ 2 TARPS, 18 FT. X 20 FT
- _____ 1 GLOBAL POSITIONING SYSTEM (GPS) (NOTE: GPS MUST BE ABLE TO ACCEPT COORDINATES FOR LANDING ZONES, SEARCHES & MAY NOT BE A VEHICLE TYPE NOR A CELL PHONE)
- _____ 1 SET OF TOPOGRAPHICAL MAPS SET TO COVER LOCAL REGION (ELECTRONIC OR PAPER VERSIONS ACCEPTED)
- _____ 1 OSHA COMPLIANT SAFETY FUEL CAN
- _____ 1 LANDING ZONE LIGHT KIT (CAN BE MANUFACTURED OR CUSTOM MADE BY AHJ. IF YOUR AHJ USES VEHICLES OR OTHER MEANS FOR LZ SETUP, PLEASE SPECIFY YOUR PLAN TO THE INSPECTOR)

O. LADDERS

- _____ 1 LADDER, EXTENSION TYPE, 24 FT. LENGTH, NFPA FIRE SERVICE RATED
- _____ 2 LADDERS, 12 FT. NFPA FIRE SERVICE RATED
- _____ 1 LADDER, ATTIC TYPE, 10 FT. LENGTH MINIMUM, NFPA FIRE SERVICE RATED

P. WATER RESCUE EQUIPMENT:

- _____ 8 PFD, TYPE III/V, VEST TYPE, U.S. COAST GUARD APPROVED - (NOTE: THE STANDARDS COMMITTEE RECOMMENDS THAT IF AN ORGANIZATION IS PLANNING TO BECOME CERTIFIED AT THE SWIFTWATER LEVEL THE ORGANIZATION PURCHASE THE TYPE V, RATHER THAN THE TYPE III VESTS TO REDUCE EXPENSE LATER)
- _____ 8 WATER RESCUE HELMETS
- _____ 6 WATER RESCUE THROW BAGS (A FLOATING ROPE AS DEFINED BY NFPA 1006, 2021 EDITION AND IS OF SUFFICIENT DIAMETER TO BE GRIPPED BY BARE WET HANDS), 3/8 IN. X 70 FT
- _____ 300 FT OF WATER RESCUE ROPE W/STORAGE BAG, (A FLOATING ROPE AS DEFINED BY NFPA 1006, 2021 EDITION AND IS OF SUFFICIENT DIAMETER TO BE GRIPPED BY BARE WET HANDS)
- _____ 1 18 IN. TYPE IV THROWABLE DEVICE

Q. SCBA UNITS

- _____ 4 SELF CONTAINED BREATHING APPARATUS MINIMUM 30 MINUTE DURATION EACH WITH A P.A.S.S. (Personal Alert Safety System) Device ALARM
- _____ 4 SPARE AIR CYLINDERS (COMPATIBLE TO FIT ABOVE MENTIONED SCBA)

R. MEDICAL CARE - ALL MEDICAL EQUIPMENT TO BE N.C.O.E.M.S. APPROVED

- _____ 1 LONG SPINE BOARD, WITH STRAPS PER AHJ
- _____ 1 EXTRICATION DEVICE (K.E.D. TYPE)
- _____ 3 EXTRICATION COLLARS, 2 ADULT & 1 PEDIATRIC
- _____ 2 OXYGEN CYLINDERS
- _____ 1 OXYGEN REGULATORS, 0-15 LPM
- _____ 1 NON REBREATHING MASKS, INFANT, CHILD AND ADULT
- _____ 2 NASAL CANNULAS - ADULT, CHILD AND INFANT
- _____ 1 BAG-VALVE MASK, WITH HIGH CONCENTRATION KIT FOR ADULT, CHILD & INFANT
- _____ 1 SUCTION DEVICE, PORTABLE SUCTION UNIT W/RIGID TIP OR SOFT TIP SUCTION CATHETER
- _____ 1 BLANKET
- _____ 1 UPPER/LOWER EXTRIMITY IMMOBILIZATION DEVICES

_____ 1 TRAUMA KIT - PER MEDICAL RESPONDER STANDARDS CRITERIA
_____ 1 BODY/EXPOSURE BAG

NOTE: IF AGENCY HAS A NCOEMS PERMITTED AMBULANCE, THE ABOVE MEDICAL CARE EQUIPMENT WILL BE AUTOMATICALLY CREDITED DURING THE INSPECTION.