

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

P.O. BOX 1914, GOLDSBORO, N.C. 27533-1914 TELEPHONE: 919/736-0506 FAX: 919/736-7759

E-MAIL: [ncarems@ncarems.org](mailto:ncarems@ncarems.org)

**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

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.

\_\_\_\_\_  
DEPARTMENT 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 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

**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:

NUMBER OF PERSONNEL WITH CERTIFICATION

(ENTER NUMBER OF PERSONNEL WITH EACH CERTIFICATION)

FIRST RESPONDER - \_\_\_\_\_ MEDICAL RESPONDER - \_\_\_\_\_ EMT - \_\_\_\_\_

EMT-I - \_\_\_\_\_ EMT-P - \_\_\_\_\_ RESCUE CERTIFIED - \_\_\_\_\_ RN/MICN - \_\_\_\_\_

**A MINIMUM OF EIGHT (8) PERSONNEL SHALL HOLD RESCUE CERTIFICATIONS AS ERT, RT-VMR & RT-ROPES OR TR-VMR & TR-ROPES OR TECHNICAL RESCUER & TR-VR & 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
- \_\_\_\_\_ 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

- \_\_\_\_\_ 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

Heavy Rescue: Inspectors Initials \_\_\_\_\_

- \_\_\_\_\_ 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 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
- \_\_\_\_\_ 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 CANNALS - 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.