

ARIZONA DEPARTMENT OF HEALTH SERVICES

STATE OF ARIZONA

CERTIFICATE NO. - 24 -

} ss

County of Maricopa

DOCKET NO. EMS 4180

THE ARIZONA DEPARTMENT OF HEALTH SERVICES has found, under the authority of A.R.S. § 36-2232 et seq and Pursuant to Department of Health Services rules, that public necessity requires the operation of

SIERRA VISTA FIRE & MEDICAL SERVICES

as a ground ALS and BLS ambulance service in the State of Arizona for the transportation of individuals who are sick, injured, wounded or otherwise incapacitated or helpless within the following service area, with the following central operations station and response times:

1. Service Area:

Corporate Limits of the City of Sierra Vista (except for Fort Huachuca). Sierra Vista Fire & Medical Services will also provide immediate response (911) transports within the boundaries of the Fry Fire District which is a limited portion of the entire certificated service area of Fry Fire District, CON No. 18.

2. Legal Address: 675 Giulio Cesare, Sierra Vista, AZ.

3. Response Times:

- a. *Five (05) minutes or less on fifty (50) percent of all emergency (911) ambulance calls.*
- b. *Seven (07) minutes or less on seventy-five (75) percent of all emergency (911) ambulance calls.*
- c. *Ten (10) minutes or less on ninety-five (95) percent of all emergency (911) ambulance calls.*
- d. *Twelve (12) minutes or less on hundred (100) percent of all emergency (911) ambulance calls.*

4. Type of Service: Immediate Response Transports, Interfacility and Convalescent Transports.

5. Hours of Operation: 24 hours per day – 7 days per week

Now, therefore, by virtue of the authority vested in the Arizona Department of Health Services, under the constitution and laws of the State of Arizona, does hereby grant this

A M E N D E D

CERTIFICATE OF NECESSITY

authorizing the operation of the aforesaid ambulance service for a period ending November 30, 2018 unless for cause sooner amended, suspended, revoked or terminated subject to the decisions and orders, and rules of the Department.

PROVIDED, that this certificate shall not be assigned nor transferred unless authorized by the Arizona Department of Health Services.



BY THE ORDER OF THE ARIZONA DEPARTMENT OF HEALTH SERVICES, IN WITNESS WHEREOF, I CARA M. CHRIST, MD. the Director of the Arizona Department of Health Services, have hereunto set my hand and caused the official seal of the Arizona Department of Health Services to be affixed at Phoenix, Arizona on 4/23/16

DIRECTOR