ARIZONA DEPARTMENT OF HEALTH SERVICES

STATE OF ARIZONA
} ss
County Of Maricopa

CERTIFICATE NO. -99-

DOCKET NO. EMS 2697

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

LAKE MOHAVE RANCHOS FIRE DISTRICT

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: Beginning on Highway 93 at Hoover Dam, extending easterly following the contours of the southwestern shoreline of Lake Mead and Grand Canyon to a point where the Hualapai and Havasupai Indian Reservation meet; then south along the eastern border of the Hualapai Indian Reservation to a point where the reservation angles to the west; then southwest to the southeast corner of Sec. 31 of T-27-N R-14-W; then west to the southeast corner of Sec. 36 of T-27-N R-17-W; then west to the southeast corner of Sec. 36 of T-26-N R-17-W; then west to and across Highway 93 at or about mile marker 50; then extending further west to the Colorado River and Lake Mohave; then extending further north following the contours of the eastern most shoreline of Lake Mohave and Colorado River to the Hoover Dam. This description shall exclude the authority to operate on Federal and/or Indian land.**

2. **Central Operations Station: Dolan Springs, Arizona (Pierce Ferry Road and Ironwood Drive).**

3. **Response Times:**
   a. **Ten (10) minutes on fifty (50) percent of all ambulance calls.**
   b. **Twenty (20) minutes on seventy (70) percent of all ambulance calls.**
   c. **Thirty (30) minutes on eighty-five (85) percent of all ambulance calls.**
   d. **Sixty (60) minutes on one hundred (100) percent of all ambulance calls.**

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

RENEWAL

CERTIFICATE OF NECESSITY

authorizing the operation of the aforesaid ambulance service for a period ending **July 31, 2006** 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 **CATHERINE R. EDEN** 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 May 29, 2003

Judi Crane
DIRECTOR

TO BE FRAMED AND DISPLAYED IN A CONSPICUOUS PLACE