



OHIO DEPARTMENT OF PUBLIC SAFETY
DIVISION OF EMERGENCY MEDICAL SERVICES

LICENSE APPLICATION CHECKLIST

Use this checklist to make sure the application is complete before mailing.

Only completed applications will be accepted by the Division of Emergency Medical Services.

<p>INCLUDE A COPY OF A BLANK TRIP / RUN REPORT.</p> <p style="text-align: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><i>Required with initial application or with renewal applications if changes were made to the report.</i></p>
<p>INCLUDE A COLOR PHOTO OF YOUR VEHICLE LOGO OR LETTERING ON THE VEHICLE.</p> <p style="text-align: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><i>Required with initial application or with renewal applications if changes were made to the logo or lettering on the vehicle.</i></p>
<p>INCLUDE A COPY OF A CERTIFICATE OF LIABILITY INSURANCE THAT INCLUDES BOTH:</p> <p style="padding-left: 40px;">GENERAL LIABILTY COVERAGE <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p style="padding-left: 40px;">VEHICLE LIABILITY COVERAGE <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>The name on the certificate of liability insurance must be the same as the name on the application. <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Certificate holder must be: <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p style="padding-left: 40px;">The State Board of Emergency Medical, Fire, and Transportation Services 1970 W. Broad St. P.O. Box 182073 Columbus, OH 43218-2073</p>
<p>INCLUDE A CHECK / MONEY ORDER IN THE CORRECT AMOUNT (SEE FEE CHART BELOW). <input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>CHECK / MONEY ORDER MADE PAYABLE TO: OHIO TREASURER OF STATE. <input type="checkbox"/> YES <input type="checkbox"/> NO</p>

FEE CHART (Fees are non-refundable)

NON-EMERGENCY MEDICAL SERVICE ORGANIZATION	EMERGENCY MEDICAL SERVICE ORGANIZATION
LICENSE FEE \$100.00	LICENSE FEE \$100.00
AMBULETTE PERMIT FEE (PER VEHICLE) \$100.00	AMBULANCE PERMIT FEE (PER VEHICLE) \$200.00
AIR MEDICAL SERVICE ORGANIZATION	MOICU PERMIT FEE (PER VEHICLE) \$200.00
LICENSE FEE \$100.00	NON-TRANSPORT VEHICLE FEE (PER VEHICLE) \$200.00
AIRCRAFT PERMIT FEE (PER AIRCRAFT) \$200.00	