

COUNTY OF CHATHAM

COMMISSIONERS
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P. O. BOX 87
 PITTSBORO, N. C. 27312

ORGANIZED 1770 707 SQUARE MILES

RESOLUTION
VOLUNTEER RESCUE SQUADS EMERGENCY
VEHICLE REPLACEMENTS

WHEREAS, Recognizing the vital role in protecting the lives and health of the citizens of Chatham County that is being played by the volunteer emergency response rescue and ambulance personnel of Chatham County, the Chatham County Board of Commissioners establishes the following policy concerning funding of replacement Emergency Vehicles.

WHEREAS, The Board of Commissioners hereby establishes an Emergency Vehicle Capital Reserve with in the Chatham County Budget.

WHEREAS, On July 1, 1986 the Board of Commissioners appropriated the sum of \$75,000 of unappropriated General Fund balance into the Ambulance Capital Reserve Fund which was to be invested in the highest yielding manner by the County Finance Officer. This resolution will change the name of the fund from Ambulance Capital Reserve Fund to Emergency Vehicle Capital Reserve Fund and include ambulances, crash truck and Haz-Mat Technical Operations Vehicle replacements.

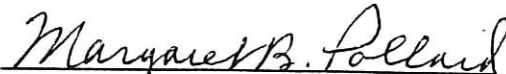
NOW THEREFORE, BE IT RESOLVED A policy is hereby established wherein the Commissioners may authorize payments from the Ambulance Capital Reserve Fund Emergency Vehicle Capital Reserve Fund for acquisition of replacement ambulances and crash trucks and Haz-Mat/Technical Operations Vehicle under the following conditions.

- A. No payment may exceed 75% of the actual cost of the vehicle, not to exceed 75% of the cost of a N.C. State Contract price for a Type II ambulance. If no state contract exists for a Type II ambulance, the maximum participation by Chatham County shall not exceed \$30,000. Prior approval must be obtained from the County before the vehicle is ordered.


- B. The recipient ~~rescue-squad~~ agency must agree to provide service to all residents, and to respond to all dispatches, from the Central Communications without regard to race, age, national origin, physical or mental handicap, sex or nationality of the patient.
- C. Any vehicle purchased with County funds shall be insured for both liability and collision for \$1,000,000.00 naming the County as additional insured and be properly maintained by the ~~rescue-squad~~ agency. ~~Both the vehicle and the squad shall at all times meet the standards set by the State Office of Emergency Medical Services or other appropriate agency.~~
- D. No ~~squad~~ agency receiving assistance under this policy shall be eligible for assistance before the vehicle to be replaced has accumulated 80,000 miles or is five years old.
- E. If any funds are withdrawn from the ~~Ambulance~~ Emergency Vehicle Capital Reserve Fund, the Budget Officer is directed to include in the next annual budget sufficient appropriations to replace any funds withdrawn in the previous year.
- F. This policy applies only to the ~~three~~ four volunteer ~~squads~~ agencies in Chatham County Goldston Rescue, East Chatham Rescue ~~and Chatham Rescue~~, and the Chatham County STAR (Special Tactics and Response) team.
- G. Only one state certified ambulance or one crash truck or one Haz-Mat/Technical Operations Vehicle may be purchased by the same ~~squad~~ agency during any County fiscal year. _____
1. Ambulances- Vehicle certified by the State of North Carolina as an ambulance.
 2. Crash Truck - Vehicle capable and main function is to carry rescue equipment to the scene of an emergency. The County's participation under this policy is limited to only one crash truck per squad.
 3. Haz-Mat/Technical Operations Vehicle - A vehicle that is capable and main function is to carry hazardous material response equipment, (i.e. absorbent materials, trenching equipment, damming supplies, three levels of Haz-Mat response suits) communications equipment, high-angle rescue equipment, Scuba diving equipment and enclosed command post.

- H. Any ~~squad~~ agency requesting money for replacement of ~~ambulance~~ emergency vehicle or crash truck must sign an agreement containing item # B and C of this policy.
- I. This policy shall apply to any ambulance, crash truck, Haz-Mat/Technical Operations Vehicle or replacement chassis requested after the adoption date of this policy. This policy shall rescind all prior policies and contracts dealing with Chatham County's participation in replacement cost of ambulances to volunteer rescue squads.

Adopted this, the 13th day of ~~August, 1995~~ July, 1998


Margaret Bryant Pollard, Chair

ATTEST


Sandra B. Lee, Clerk to the Board
Chatham County Board of Commissioners

**North Carolina
Chatham County**

THIS AGREEMENT, made and entered into as of the _____ day of _____, by and between the _____, a Volunteer Emergency Response Agency, party of the first part, and the Chatham County, party of the second part.

WITNESSETH:

WHEREAS, the said parties desire to confirm certain obligations and to set forth the terms of these obligations.

NOW, THEREFORE, for in consideration of these premises and the mutual covenants, promises and consideration the parties do hereby stipulate, agree and covenants one with the other as follows:

PROVISIONS

The parties hereto acknowledge that the party of the first part is to adhere to the following provision set forth due to the participation of the County for the Volunteer Emergency Response Agency:

1. The recipient emergency response agency must agree to provide service to all residents, and to respond to all dispatches from Central Communications without regard to race, age, national origin, physical or mental handicap, sex or nationality of the patient.
2. Any vehicle purchased with County funds shall be insured for both liability and collision for \$1,000,000.00 naming the County as additional insured and be properly maintained by the emergency response agency. Both the vehicle and the squad shall at all times meet the standards set by the State Office of Emergency Medical Services or other appropriate agency.

**NORTH CAROLINA
CHATHAM COUNTY**

I, _____, a Notary Public of said County and State hereby certify that _____ personally appeared before me this date and acknowledged the due execution of the foregoing agreement.

Witness my hand and Notarial Seal of this the _____ day of _____.

Notary Public (SEAL)
My Commission Expires: _____