

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY

APPLICATION TYPE: NEW PRENEWAL							
SERVICE TYPE: Wheelchair Transport Stretcher Transport	☐ ALS Interfac ✓ ALS Helicop						
TYPE OF ENTITY: Sole Proprietor Parti	nership	Profit Corporation	rporation				
ORGANIZATION NAME:		HOURS OF OPERATION:	☑24-HOUR				
Med-Trans Corporation DBA Bayflite							
ADDRESS 1:		PHONE:	□A.M. / □P.M.				
3001 MLK Jr. Blvd		727-423-4289					
ADDRESS 2:		FAX:					
CITY, STATE, ZIP CODE:							
Tampa, Florida 33607							
OFFICER/DIRECTOR NAME & TITLE:	PHONE NUMBER & E-N	MAIL:					
Rob Hamilton, President	940-591-5810 rol	pert.hamilton@med-trans.net					
VICE OFFICER/DIRECTOR NAME & TITLE:	PHONE NUMBER & E-M	MAIL:					
Kim Montgomery, COO	940-591-5810 kimberly.montgomery@7bar.com						
BUSINESS HOURS POINT-OF-CONTACT:	PHONE NUMBER & E-M	ER & E-MAIL:					
Karen Thurmond		289 karen.thurmond@med-trans.net					
AFTER HOURS POINT-OF-CONTACT:	PHONE NUMBER & E-N						
Karen Thurmond	727-423-4289	9 karen.thurmond@med-trans.net					
REQUIRED ATTACHMENTS: Record Keeping Verincorporation, Certification of Fictitious Name (d.b.a) in provided, and retail rate schedule. Also include any new provided in the schedule.	f applicable, Insura	ance Verification for the hig	hest level of service				
I, the undersigned representative of the above named revoked if at any time the firm fails to meet all of the recommendation.							
SIGNATURE OF APPLICANT.	00	DATE:					
201 Wa 2 XE a XX 5/22/2020							
STATE OF FLORIDA							
COUNTY OF Melly							
Subscribed and sworn to (or affirmed) before me this May 22, 2020 by Leigh Fast, who							
is/are personally known to me or has/have produced the little was identification.							
(SEAL) Scott Suprenant NOTARY PUBLIC STATE OF FLORIDA Comm# GG006004 Expires 7/14/2020 (Name of Notary typed, printed or Form stamped) Form A. Rev. 02/06/2017							

HELICOPTER AIRCRAFT ROSTER



Pinellas County Rules and Regulations, as Amended

Name of Service:	Bayflite	Page	: <u>01</u>	of	01

Provide Unit, Tag and VIN numbers for all vehicles. If more lines are needed, it is acceptable to copy this form. A Company Roster may be attached, as long as all required information is included. Contact EMS & Fire Administration for a Vehicle Inspection appointment.

Unit Number	Florida Vehicle Tag Number	Vehicle Identification Number (VIN)	Client compartment observation mirror	Passenger floor properly maintained	Fire extinguisher 2A:10B:C	Operable interior lights	Free of dent/rust that interferes with safe operation	Equipment in patient compartment safely secured	Doors, latches, and handles working properly	Patient lift platform working properly	Positive means of securing/locking wheelchair/stretcher	Properly designed passenger safety belts and/or straps	Radio/tablet/cell phone for communication with base station	Exterior lights – high, low, turns, brake, tails, backup	Interior clean, sanitary and in good working order
BF 3	N228MT		Text	x	x	Χ	x	x	x		x	x	x	x	x
² .BF 4	N911WA			Х	х	x	x	x	Х		x	x	x	х	х
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12.															

Form C-1 Rev. 02/06/2017

EMS INSPECTOR: _____ Date: _____

Helicopter/ Aircraft Roster

Name of Service: <u>Bayflite</u> Date: <u>5/21/2019</u> Page 1 of 1

Helicopter/ Aircraft TypeModel/ YearFAA license #Base LocationEurocopterEC 135P2 2010N228MTSt. PetersburgBell407 2008N911WABrooksville

Bayflite Staff:

Heather Cady	RN	GF39989 (Maine Compact)						
Kenneth McCurry	RN	RN9470804						
Jessica Dunn	RN	APRN9347511						
James Johnson	RN	RN9336847						
Christopher Howell	EMTP	PMD533200						
Nicholas Fatolitis	EMTP	PMD530868						
Derek Perez	EMTP	PMD534122						
Andrew Harriman	EMTP	PMD523262 PMD512792						
Glenn Hull	EMTP/RT							
Brendon Sanders	RN	RN9505603						
Kelly Andrews	RN	RN9216625						
Jaciel Rodriguez	EMTP	RN9421324						
Justin Andrews	EMTP	PMD516388						
Kenny Sweitzer	EMTP	PMD532259						
Caleb Hudak	EMTP	PMD530171						
Jon Blinkey	EMTP	PMD522723						

Alliant/John F. Throne & Co.

John F. Throne & Co. is a division of Alliant Insurance Services, Inc.

CERTIFICATE OF INSURANCE

CERTIFICATE HOLDER:

FLORIDA DEPARTMENT OF HEALTH

DIVISION OF EMERGENCY PREPAREDNESS AND COMMUNITY SUPPORT

BUREAU OF EMERGENCY MEDICAL OVERSIGHT

EMERGENCY MEDICAL SERVICES SECTION, INVESTIGATIONS UNIT

4052 BALD CYPRESS WAY, BIN #A-22

TALLAHASSEE, FL 32399-1738

NAMED INSURED:

GLOBAL MEDICAL RESPONSE, INC. (FKA AIR MEDICAL GROUP HOLDINGS, INC.), AIR MEDICAL GROUP HOLDINGS, LLC AND AS MORE FULLY ENDORSED, INCLUDING AIR EVAC EMS, INC.; EAGLEMED LLC; MED-TRANS CORPORATION; REACH AIR MEDICAL SERVICES, LLC; AIR ANGELS, LLC; REACH MEDICAL HOLDINGS, LLC; REACH HOLDINGS, INC. DBA REACH AIR MEDICAL SERVICES DBA METHODIST AIR CARE, AIRMED INTERNATIONAL, LLC, SUMMIT AIR AMBULANCE HOLDINGS, LLC; SUMMIT AIR AMBULANCE, LLC; EXPEDITION HELICOPTERS, INC.; CALSTAR AIR MEDICAL SERVICES LLC; JETCENTER, LLC AND AM HANGAR, LLC; AMRG ACQUISITION LLC, AIR MEDICAL RESOURCE GROUP, INC., AIR MEDICAL RESOURCE GROUP LLC, GUARDIAN FLIGHT, INC., GUARDIAN FLIGHT LLC, VALLEY MED FLIGHT, INC. DBA MED FLIGHT LEASING, RENO FLYING SERVICE, INC., AMERICAN MEDFLIGHT, INC., AEROCARE MEDICAL TRANSPORT, INC., ALASKA REGIONAL LIFE FLIGHT CORPORATION, ALASKA REGIONAL TRANSPORT CORP, AMF CORPORATION, EAGLE AIR MED CORPORATION, GALLUP MEDFLIGHT LLC, GUARDIAN EMS, INC., HAWAII LIFE FLIGHT, INC., JJDAC, INC. DBA MED STAR AMBULANCE, MEDFLIGHT LEASING LLC, MOUNTAIN STAR AIRCARE CORPORATION, WIREGRASS LIFE FLIGHT CORPORATION, RENO FLYING SERVICE LLC, AND TRANSPLANT TRANSPORTATION SERVICES, INC., HAWAII LIFE FLIGHT, LLC, AIRMED RESPONSE LLC, MED-TRANS CORPORATION DBA MONOC AIR MEDICAL TRANSPORT, MED-TRANS CORPORATION DBA LIFEGUARD AND EAGLEMED, LLC DBA EAGLEMED AIR MEDICAL

209 STATE HIGHWAY 121 BYPASS, SUITE 21

LEWISVILLE, TX 75067

POLICY PERIOD:

MARCH 1, 2019 to

SEPTEMBER 1, 2020

INSURANCE COMPANY(IES):

STARR INDEMNITY AND LIABILITY COMPANY THROUGH STARR AVIATION AGENCY, INC (LEAD)

AND FOLLOWING MARKETS AS HELD ON FILE

AIR AMBULANCE PROFESSIONAL LIABILITY (CLAIMS MADE COVERAGE) LEAD POLICY NO: SASICOM60035119-09

LIABILITY COVERAGES:

General Aggregate Limit Each Medical Incident Limit

Deductible

LIMITS OF LIABILITY

\$15,000,000 \$5,000,000

\$25,000 Each Medical Incident

OTHER COVERAGES/CONDITIONS/REMARKS:

ANY INSURANCE EVIDENCED HEREIN THAT IS EXTENDED BEYOND COVERAGE PROVIDED TO THE NAMED INSURED SHALL NOT APPLY TO, AND NO PERSON OR ORGANIZATION TO WHOM SUCH EXTENDED COVERAGE APPLIES SHALL BE INSURED FOR BODILY INJURY OR PROPERTY DAMAGE WHICH ARISES FROM THE DESIGN, MANUFACTURE, MODIFICATION, REPAIR, SALE, OR SERVICING OF THE AIRCRAFT, AIRCRAFT PARTS, OR ANY OTHER PRODUCT BY THAT PERSON OR ORGANIZATION. FOR INFORMATIONAL PURPOSES ONLY.

THIS CERTIFICATE DOES NOT CHANGE IN ANY WAY THE ACTUAL COVERAGES PROVIDED BY THE POLICY(IES) SPECIFIED ABOVE.

CERTIFICATE NO.: 74M

DATE: MARCH 1, 2019

BY:

Alliant/John F. Throne & Co.

John F. Throne & Co. is a division of Alliant Insurance Services, Inc.

CERTIFICATE OF INSURANCE

CERTIFICATE HOLDER:

MED-TRANS CORPORATION

209 STATE HIGHWAY 121 BYPASS, SUITE 21

LEWISVILLE, TX 75067

NAMED INSURED:

GLOBAL MEDICAL RESPONSE, INC. (FKA AIR MEDICAL GROUP HOLDINGS, INC.), AIR MEDICAL

GROUP HOLDINGS, INC. AND AS MORE FULLY ENDORSED, INCLUDING

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Deductible

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THIS CERTIFICATE DOES NOT CHANGE IN ANY WAY THE ACTUAL COVERAGES PROVIDED BY THE POLICY(IES) SPECIFIED ABOVE.

CERTIFICATE NO.: 22M

DATE: MARCH 1, 2019

BY:

1420 5th Avenue, Suite 1500 • Seattle, WA 98101 • Tel: (206) 622-3636 • Fax: (206) 623-6286

FORM TX COI 06 (REV 07/2017)