



Forest Hills Volunteer Ambulance Corps, Inc. Proposed Expansion

DECEMBER 2020

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INTRODUCTION

The Executive Board of the Forest Hills Volunteer Ambulance Corps, Inc. (FHVAC), submits the following comprehensive application for a New York State Department of Health (NYS DOH) Bureau of EMS Expansion of Operating Area.

The FHVAC has reviewed our financial position(s), as well as our operational capabilities, and have determined that we meet or exceed the requirements needed for an expansion of area to support our mission of pre-hospital life support to the communities. After review, we have determined that this expansion will not reduce our effectiveness in our current operational areas of Forest Hills and Rego Park. The expansion will benefit the areas of Kew Gardens, Richmond Hill, and Woodhaven that has been left without a community-based ambulance service since August 2017.

Contained within this document is information about our organization, its current capabilities, and its ability to expand beyond its current borders.

To that end, our interest to expand is solely based on restoring the community-based volunteer EMS services to these communities, who, by no fault of their own, have been left with a void since the Woodhaven-Richmond Hill Volunteer Ambulance Corps had their certificate to operate revoked. We are happy to undertake this initiative and look forward to providing our recognized services to these new communities.

MISSION STATEMENT

The Forest Hills Volunteer Ambulance Corps, Inc. (FHVAC) mission and objective is to provide immediate and temporary care to the injured, wounded, sick, infirmed, and aged persons, in case of emergencies or medically necessary non-emergencies, by rendering Basic Life Support and transportation thereof, to hospitals and other places for medical treatment and care.

VISION STATEMENT

To expand our pre-hospital care and services to the surrounding communities.

I. LIST OF ALL EXISTING SERVICES IN THE PROPOSED AREA

*The following agencies possess a NYS Ambulance Operating Certificate for the five boroughs of New York City

- Ambulanz NY EMS
- ALS Services
- Assist Ambulance
- Citywide Mobile Response
- Chevra Hatzolah Volunteer Ambulance
- Emergency Medical Rescue of New York City (BLS-D FR)
- Fire Department, City of New York – Emergency Medical Services
- Flushing Hospital EMS
- Hunter Ambulance
- Hunter EMS
- InstaCare LLC
- Lifeline Ambulance Service
- Jamaica Hospital EMS
- Maimonides Ambulance
- Mount Sinai Hospital EMS
- Midwood Ambulance
- Medisys EMS
- Midwood Ambulance
- Northwell Health EMS
- NY Presbyterian Queens EMS
- NY Presbyterian EMS
- North Shore Ambulance & Oxygen
- NYU Langone EMS
- NYPD ESU
- Priority One Ambulance

- Primary Care EMS
- RCA Ambulance Service
- Senior Care EMS

*The above agencies possess a NYS Ambulance Operating Certificate for the five boroughs of New York City, and are both BLS & ALS, following NYS DOS Protocols and NYC REMSCO protocols

- Jamaica Estates Volunteer Ambulance Corps – Basic Life Support Services (serving Jamaica Estates, Holliswood, South Bayside)
- Lindenwood Volunteer Ambulance Corps – Basic & Advanced Life Support Services (serving Lindenwood, Ozone Park & South Ozone Park)
- Ridgewood Volunteer Ambulance Corps – Basic Life Support Services (serving Ridgewood, Bushwick, Wyckoff Heights & Maspeth)

**The above agencies provide both BLS & ALS services, following the NYC REMSCO guidelines for staffing

II. CURRENT NYS DOH OPERATING TERRITORY

- Forest Hills, New York – Queens County
- Rego Park, New York – Queens County

III. STAFFING

FHVAC will staff members in the following levels:

- NYS Certified First Responders (CFR)
- NYS Certified Emergency Medical Technicians- Basic (EMT-B)

The FHVAC currently operates two (2) Ambulances and four (4) EASV's for supervision, and QA/QI. If permission is granted for the expansion, we will be adding two (2) additional Ambulances to our fleet. Our current staffing levels are as follows:

- a. 85 Members total

- b. 54 EMT – Basic
- c. 2 EMT – Paramedic

IV. LEVEL OF CARE PROVIDED

The FHVAC operates at the Basic Life Support (BLS) level, which includes BLS care, CPR, Epi Pen, Albuterol-Nebulizers, Oxygen, Nasal Narcan (naloxone) and AED. The FHVAC will stock its Ambulances and EASV's as required as per Article 30 part 800.26 of the Public Health Law.

We are currently staffing each Ambulance with the minimum of one (1) Driver & one (1) NYS Certified EMT, in compliance with the NYS Department of Health, and the NYC REMSCO protocols. The FHVAC will operate 24 hours a day, 7 days a week, 365 days a year. The FHVAC currently has a robust CME program, and encourages our members to further their medical education by attending outside CME's and conferences. Residents, tourists, and visitors can activate the FHVAC Emergency System by simply dialing our direct emergency phone number. We also receive calls through the New York City Fire Department Mutual Aid Radio System (MARS) and other mutual aid radio calls. The FHVAC will be an enhancement to public convenience and help cover the medical needs within our expanded communities. During the COVID-19 pandemic, we were activated by the New York City Fire Department to support their 911 units.

V. CALL VOLUME

Based upon our current operating areas of Rego Park and Forest Hills, we have responded to 440 calls for service in 2019. Our prediction of an expansion will increase our call volume an additional fifty percent (50%), approximately 250 calls. Based upon statistics obtained from the NYC open-source data, the approximate annual call volume for the areas located within the expansion are 16,100 calls. Further breakdowns reveal that there are approximately 44 calls per day on average.

VI. ACTUAL RESPONSE TIME(S)

Based on our statistics for the last 12 months, the FHVAC response time is between two and half minutes (02:30) to four minutes (04:00), which is below the national average of five minutes (05:00). According to the statistics provided by the City of New York, the FDNY EMS average response time for 2019 was seven minutes and forty-seven seconds. (07:47)

VII. MUTUAL AID

The FHVAC is currently a member of the following:

- a. Mutual Aid Radio System (MARS)
- b. Citywide Volunteer Mutual Aid Agreement
- c. New York City REMSCO Mutual Aid Mobilization Plan
- d. Ridgewood Volunteer Ambulance Corps
- e. Corona Volunteer Ambulance Corps
- f. Jamaica Estates Volunteer Ambulance Corps
- g. Emergency Medical Rescue of New York City (BLS-D FR)

At this time the current citywide mutual aid agreement adequately covers our requested area of coverage.

VIII. QUALITY OF SERVICE

Our quality of service is maintained by ongoing CME and skill review, and each call is reviewed by our Quality Assurance/Quality Improvement Committee. The FHVAC has an extensive application process for prospective members. Such process includes the following:

- a. Application
- b. Initial interview
- c. Membership Committee review
- d. References verified
- e. Driver's license abstract
- f. Sex Offender Registry search
- g. Approval or denial
- h. Probationary period in accordance with our By-Laws
- i. Dispatcher training

There are multiple ambulance services that respond to emergency calls within these territories where the average response is 8 minutes. Having a volunteer ambulance service will drastically cut the current response time by over five minutes, affording those in need quicker pre-hospital care response. Thus, making an expanded ambulance service a public convenience.

IX. SKILL RETENTION

FHVAC members will have the chance to complete NYS CME training and skills practice. Members will have the chance to complete the NYS Certified EMT course which has been approved by NYS if the member has been active as a volunteer. The FHVAC is a participant of the NYS DOH CME based refresher program and we have an in-house CIC.

X. ADMINISTRATION AND OPERATION

The FHVAC is an IRS recognized non-profit 501(c)(3) and is recognized by the NYS Attorney General as a charity organization. We have been continuously operating since 1971.

Our corporate structure consists of the President, Vice President, Secretary, Treasurer, Training Officer, and Safety Officer. Our operations structure consists of the Captain, 1st Lieutenant, and 2nd Lieutenant. In addition, our agency maintains an outside Board of Advisors from the communities we serve.

XI. COMMUNICATIONS

The FHVAC has a robust two-way radio communication system, consisting of both a UHF and VHF system. The FHVAC also has a redundant PTT over cellular backup system. In addition, we are able to communicate with our Mutual Aid ambulance services. We are also a participant in the New York City Fire Department Community Based Volunteer Ambulance System, and the NYC REMSCO alert system.

XII. FINANCIAL STABILITY

The FHVAC operates on an average annual operating budget of \$110,000 - \$125,000 per year. Our organization generally maintains a positive revenue year after year and maintains at least one year of operating funds. The ambulance inventory is all late model and regularly maintained. If the expansion is approved, we will be able to purchase two additional ambulances for our fleet. One will be designated for the new expanded area, and one will be a spare to the fleet so we can maintain coverage of all of our operating areas. It is anticipated that additional call volume will result in additional revenue from the communities we will serve. We currently have in excess of \$450,000.00 worth of grant funding that we are able to use within the guidelines provided to us by the grantor(s).

XIII. NEED OF THE EXPANSION IN THE PROPOSED AREA

The expansion areas of Kew Gardens, Woodhaven, and Richmond Hill have 142,677 residents as per current census statistics. This does not include the transient population from JFK Airport, as well as employees and visitors. Since the closure of St. Johns Queens Hospital, The Parkway Hospital, and Mary Immaculate Hospital, there has been a decrease of hospital bed availability in the immediate receiving hospitals, and the need for longer transport times to other facilities. This delays the current NYC 911 EMS providers in returning back to the areas in which we would like to expand. Our expansion would increase the number of ambulance tours available in these areas. The FHVAC has participated in numerous MCI's and large-scale emergencies such as the September 11th, 2001 tragedy, Super Storm Sandy, and multiple plane crashes. More recently, the FHVAC participated in the COVID-19 response, under the auspices of the FDNY Mutual Aid agreement to assist in the overwhelming need for EMS during the pandemic. The additional resources that we can provide will either allow the NYC 911 EMS providers to cover the MCI's while we backfill in these areas or allow us to assist the City of New York with additional resources at these events. In 2018 the average response times for an ambulance in Queens County, NY was 8 minutes and 1 second (8:01). By approving our expansion, we will be able to assist in bringing these numbers down. Our current response time is between 3 to 5 minutes. Certainly, a strong need as in 2018 there were a total of 357,405 EMS calls in Queens County, NY.

XIV. AREA OF EXPANSION

FHVAC expansion boundaries are as follows: (see appendix A – map attached)

1. KEW GARDENS, NY (zip code 11415)
 - a. Jackie Robinson Parkway East to Hillside Avenue
 - b. Van Wyck Expressway South to Park Lane South
 2. WOODHAVEN, NY (zip code 11421)
 - a. Park Lane South to Atlantic Avenue
 - b. 101 Street to Eldert Lane
 3. RICHMOND HILL, NY (zip code 11418)
 - a. 101 Street to Van Wyck Expressway South
 - b. Atlantic Avenue to Hillside Avenue North
- Community Board # 9
 - City Council Districts # 29 & 32
 - 102nd Precinct NYPD
 - 106th Precinct NYPD
 - State Senate Districts # 10, 14 & 15

XV. LIST OF LOCAL RECEIVING HOSPITALS

- Jamaica Hospital
- Northwell Hospital(s) (Forest Hills, Manhasset, New Hyde Park)
- Elmhurst General Hospital
- New York Presbyterian Hospital Queens
- Wyckoff Hospital
- Woodhull Hospital

* Also, we will transport patients to special hospitals according to protocols

XVI. EXPANSION DESCRIPTION

The FHVAC has been in existence since 1971, providing the community of Forest Hills with Basic Life Support services. In 1997 the FHVAC applied for an expansion into the adjoining community of Rego Park was approved. Since that time, the FHVAC has proudly responded to thousands of calls for medical assistance in our areas of operation. The FHVAC's headquarters is located at 92-29 Metropolitan Avenue, Forest Hills, NY 11375. Our headquarters has approximately 1,800 square feet of space which includes an office, lounge, dispatcher office, and training area. In addition, we have a garage which houses two ambulances and a backyard area that can house an additional ambulance. Our headquarters mortgage was paid off, in full, in 2006, and the building is owned by the FHVAC.

As previously stated, our current roster with the NYS DOH has 85 members, of which 54 are EMT-B, 2 are EMT-P, and 65 are Dispatchers with CPR certification. Our youth squad consists of 25 members that train regularly for competitions throughout the New York State, and assist at local events.

XVII. POSITIVE EFFECTS AND BENEFITS THE NEW SERVICE WILL PROVIDE

There are many ways this expansion would benefit not only the overburdened NYC EMS (911) system, but also the residents, guests, and visitors of the proposed expansion areas. In a time when resources are stretched thin, and the ongoing COVID-19 pandemic is upon us, the benefit(s) have having additional EMS resources like the FHVAC, which is self-generating, is paramount. The additional EMS resources that we are able to provide can mean a matter of life and death.

The FHVAC proudly provides Emergency Medical Standby's for events throughout our service areas. We have been part of career days at schools and houses of worship. We have taught countless members of the community CPR and First Aid. We provide an "open house" every May during EMS Week where we demonstrate our skills and have Q & A time with members of the community. Our Youth Squad

members actively train for competitions locally and statewide and have received multiple first and second place medals.

After evaluating the areas and calls that we would respond to, there would be no adverse effects on the existing EMS services. After an evaluation of the existing EMS services operating in our area, and the proposed expansion area, there will be no adverse effects on the EMS system. This includes, Municipal, Private and Hospital based agencies.

XVIII. COST BENEFIT RATIO

The FHVAC has conducted an internal audit and determined that this expansion would not place any financial burden on us or others. We currently have a large stock of additional equipment for additional ambulances and EASV's, as well as an ample amount of communications equipment. The additional vehicle maintenance and fuel costs would be offset by the financial recoupment from our third-party billing from commercial insurers, as all agencies do. Additionally, the benefit to the communities of which we are seeking the expansion will have a community-based EMS agency for them. This would come to them at a "zero cost".

XIX. REALLOCATION OF RESOURCES

Should the FHVAC be granted the expansion it desires, we will implement a plan to strategically place our resources throughout the communities for a more centralized response. A deployment matrix would allow the FHVAC to respond to calls for service while maintaining our average response time in a safe and efficient manner. Currently, we see no other viable alternative to the deficit left when the previous agency dissolved.

XX. GOVERNMENT SUPPORT

The FHVAC Administration has had many conversations with elected officials throughout the areas we seek the expansion. In all of the conversations, we have

received 100% support for both the need and desire to have our services available to them and their constituents. These elected officials have pledged their support and will do so in writing.

Name	Represented Office
Council Member Robert F. Holden	NYC Council, District 30, Queens
Council Member Karen Koslowitz	NYC Council, District 29, Queens (Chair)
State Senator Toby Ann Stavisky	NYS Senate, District 16, Queens
Assemblyman David I. Weprin	NYS Assembly, District 24, Queens

XXI.COMMUNITY SUPPORT

The FHVAC has spoken with community members in the areas we desire for the expansion. Based upon our conversations with these residents and business owners, the need and want to have a community-based ambulance service is evident. However, due to the COVID-19 pandemic, we have been unable to attend any in person meetings within these communities, as they have been cancelled. The FHVAC will however, provide letters of support from the residents of the communities we seek to service.

Letters of Support
Emergency Medical Rescue of NYC
Jamaica Estates Volunteer Ambulance
SHMIRA- Queens Borough Safety Patrol
Forest Hills Chamber of Commerce
Fire Department City of New York

XXII.DESCRPTION OF THE SYSTEM

The FHVAC has been a member of the Volunteer EMS Community since 1971. We currently are dispatched through a seven-digit phone number for calls in the community. In addition, we participate in the NYC Community Based EMS System (MARS), as well as an active participant in the NYC Mutual Aid system. We work hand in hand with the municipal and hospital-based EMS providers who operate in our area. In our current operating area, we have Northwell Forest Hills Hospital, long term care institutions, and medical facilities. Our

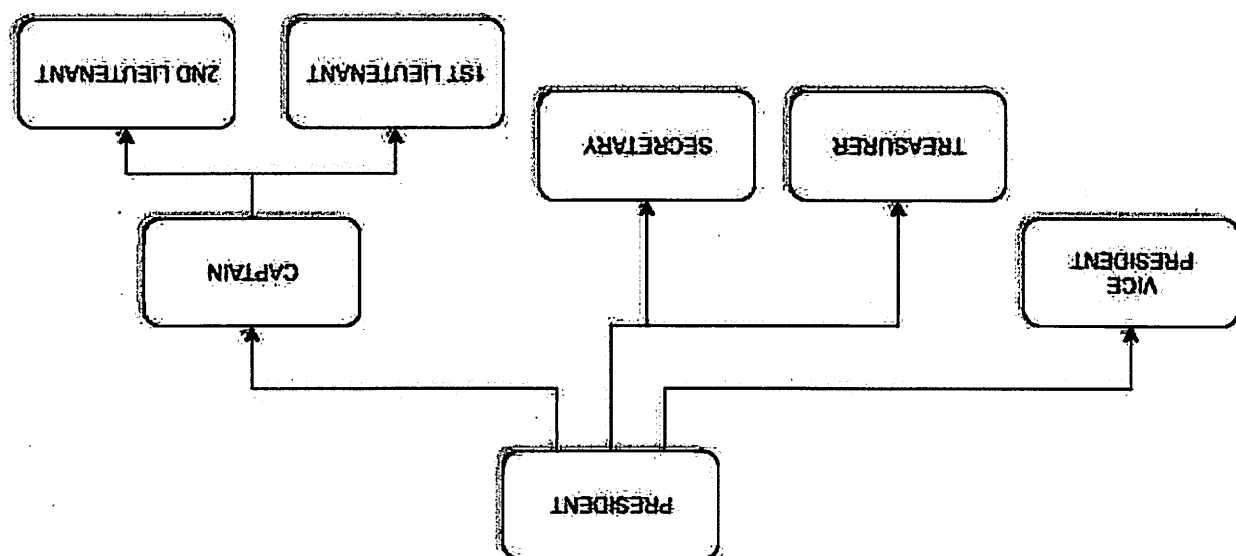
agency regularly provides emergent and non-emergent transports from these facilities. Our on-line Medical Control is conducted through Methodist Hospital and our medical oversight is under the auspices of Dr. Jeffrey Horwitz.

XXIII. POPULATION DEMOGRAPHICS

Woodhaven, Richmond Hill, and Kew Gardens are neighborhoods located in the City of New York, County of Queens. Woodhaven is bounded by Park Lane South to the north, Atlantic Avenue to the south, Eldert Lane on its westside and 101 Street on its east end. Richmond Hill's boundary lines follows Atlantic Avenue to the south, 84th Street on its north end, 101 Street west side and follows the Van Wyck Expressway on the east side. Kew Gardens boundary lines are Northside Grand Central Parkway, south side Jamaica avenue, east boundary is the Van Wyck Expressway and the west side is Park Lane South. The aforementioned locations are located with the NYPD 102nd Police Precinct and NYC Community Board # 9. Based upon the statistics provided by the NYC Department of Planning, the population of the expanded areas are 148,806, which excludes visitors. The combined square miles of all three neighborhoods are a cumulative of 2.8 square miles.

PROPOSED EXPANSION AREA







FOREST HILLS
10628 QUEENS BLVD
FOREST HILLS, NY 11375-9997
(800)275-8777

04:12 PM

01/22/2021

Product	Qty	Unit Price	Price
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First-Class Mail®	1		\$0.55
Letter			

College Point, NY 11356
Weight: 0 lb 0.70 oz
Estimated Delivery Date
Mon 01/25/2021

Certified Mail® \$3.55
Tracking #: \$2.85

70170190000115277954
Return Receipt
Tracking #: \$6.95
9590 9402 5296 9154 5348 34

Total

\$0.55

First-Class Mail®	1		
Letter			

New Hyde Park, NY 11040
Weight: 0 lb 0.60 oz
Estimated Delivery Date
Mon 01/25/2021

Certified Mail® \$3.55
Tracking #: \$4.10

70191640000156046637

Total

\$0.55

First-Class Mail®	1		
Letter			

Manhasset, NY 11030
Weight: 0 lb 0.70 oz
Estimated Delivery Date
Mon 01/25/2021

Certified Mail® \$3.55
Tracking #: \$4.10

70191640000156046620

Total

\$0.55

First-Class Mail®	1		
Letter			

Forest Hills, NY 11375
Weight: 0 lb 0.70 oz
Estimated Delivery Date
Mon 01/25/2021

Certified Mail® \$3.55
Tracking #: \$4.10

70191640000156046613

Total

\$0.55

First-Class Mail®	1		
Letter			

Richmond Hill, NY 11418
Weight: 0 lb 0.60 oz
Estimated Delivery Date
Mon 01/25/2021

Certified Mail® \$3.55
Tracking #: \$4.10

70191640000156046606

Total

\$0.55

First-Class Mail®	1		
Letter			

NY 11355

First-Class Mail® 1 \$0.55

Letter

Jamaica, NY 11432
Weight: 0 lb 0.70 oz
Estimated Delivery Date
Mon 01/25/2021

Certified Mail® \$3.55

Tracking #:

70191640000156046576

Total \$4.10

First-Class Mail® 1 \$0.55

Letter

Elmhurst, NY 11373
Weight: 0 lb 0.60 oz
Estimated Delivery Date
Mon 01/25/2021

Certified Mail® \$3.55

Tracking #:

70191640000156046569

Total \$4.10

First-Class Mail® 1 \$0.55

Letter

Brooklyn, NY 11212
Weight: 0 lb 0.70 oz
Estimated Delivery Date
Mon 01/25/2021

Certified Mail® \$3.55

Tracking #:

70191640000156046552

Total \$4.10

First-Class Mail® 1 \$0.55

Letter

Richmond Hill, NY 11418
Weight: 0 lb 0.70 oz
Estimated Delivery Date
Mon 01/25/2021

Certified Mail® \$3.55

Tracking #:

70191640000156046545

Total \$4.10

First-Class Mail® 1 \$0.55

Letter

Ridgewood, NY 11385
Weight: 0 lb 0.80 oz
Estimated Delivery Date
Mon 01/25/2021

Certified Mail® \$3.55

Tracking #:

70191640000156046538

Return Receipt \$2.85

Tracking #:

9590 9402 5296 9154 5347 59

Total \$6.95

First-Class Mail® 1 \$0.55

Letter

Flushing, NY 11358
Weight: 0 lb 0.80 oz
Estimated Delivery Date
Mon 01/25/2021

Certified Mail® \$3.55

Tracking #:

70191640000156046507

Return Receipt \$2.85

Tracking #:

9590 9402 5296 9154 5347 80

Total \$6.95

First-Class Mail® 1 \$0.55

Letter

Middle Village, NY 11379
Weight: 0 lb 0.80 oz
Estimated Delivery Date
Mon 01/25/2021

Certified Mail® \$3.55

Tracking #:

70191640000156046521

Return Receipt

First-Class Mail®

Letter
 Staten Island, NY 10303
 Weight: 0 lb 0.80 oz
 Estimated Delivery Date
 Mon 01/25/2021
 Certified Mail®
 Tracking #: 70191640000156046484
 Return Receipt
 Tracking #: 9590 9402 5296 9154 5347 97
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 \$2.85
 \$6.95
 Total \$0.55

First-Class Mail® 1
 Letter
 New Hyde Park, NY 11042
 Weight: 0 lb 0.80 oz
 Estimated Delivery Date
 Mon 01/25/2021
 Certified Mail®
 Tracking #: 70191640000156046477
 Return Receipt
 Tracking #: 9590 9402 5296 9154 5348 03
 \$3.55
 \$2.85
 \$6.95
 Total \$0.55

First-Class Mail® 1
 Letter
 Bronx, NY 10461
 Weight: 0 lb 0.80 oz
 Estimated Delivery Date
 Mon 01/25/2021
 Certified Mail®
 Tracking #: 70170190000115277978
 Return Receipt
 Tracking #: 9590 9402 5296 9154 5348 10
 \$3.55
 \$2.85
 \$6.95
 Total \$0.55

First-Class Mail® 1
 Letter
 New York, NY 10019
 Weight: 0 lb 0.80 oz
 Estimated Delivery Date
 Mon 01/25/2021
 Certified Mail®
 Tracking #: 70170190000115277961
 Return Receipt
 Tracking #: 9590 9402 5296 9154 5348 27
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 \$2.85
 \$6.95
 Total \$0.55

First-Class Mail® 1
 Letter
 Brooklyn, NY 11219
 Weight: 0 lb 0.80 oz
 Estimated Delivery Date
 Mon 01/25/2021
 Certified Mail®
 Tracking #: 70170190000115277862
 Return Receipt
 Tracking #: 9590 9402 5296 9154 5342 61
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 \$2.85
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 Total \$0.55

First-Class Mail® 1
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 Brooklyn, NY 11236
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 Estimated Delivery Date
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 Certified Mail®
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 Return Receipt
 Tracking #: 9590 9402 5296 9154 5341 48
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Total
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Bronx, NY 10473
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Estimated Delivery Date
Mon 01/25/2021
Certified Mail®
Tracking #: 70170190000115277824
Return Receipt
Tracking #: 9590 9402 5296 9154 5341 17
\$3.55
\$2.85
\$6.95

Total \$0.55

First-Class Mail® 1
Letter
Bronx, NY 10459
Weight: 0 lb 0.80 oz
Estimated Delivery Date
Mon 01/25/2021
Certified Mail®
Tracking #: 70170190000115277817
Return Receipt
Tracking #: 9590 9402 5296 9154 5341 24
\$3.55
\$2.85
\$6.95

Total \$0.55

First-Class Mail® 1
Letter
Richmond Hill, NY 11418
Weight: 0 lb 0.80 oz
Estimated Delivery Date
Mon 01/25/2021
Certified Mail®
Tracking #: 70170190000115277800
Return Receipt
Tracking #: 9590 9402 5296 9154 5342 47
\$3.55
\$2.85
\$6.95

Total \$0.55

First-Class Mail® 1
Letter
Howard Beach, NY 11414
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Estimated Delivery Date
Mon 01/25/2021
Certified Mail®
Tracking #: 70170190000115277794
Return Receipt
Tracking #: 9590 9402 5296 9154 5342 30
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\$2.85
\$6.95

Total \$0.55

To First-Class Mail® 1
Letter
Bay Shore, NY 11706
Weight: 0 lb 0.80 oz
Estimated Delivery Date
Mon 01/25/2021
Certified Mail®
Tracking #: 70170190000115277787
Return Receipt
Tracking #: 9590 9402 5296 9154 5342 23
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\$2.85
\$6.95

Total \$0.55

First-Class Mail® 1
Letter
Brooklyn, NY 11220
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Estimated Delivery Date
Mon 01/25/2021
Certified Mail®
Tracking #: 70170190000115277770
Return Receipt
Tracking #: 9590 9402 5296 9154 5342 16
\$3.55
\$2.85
\$6.95

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	First-Class Mail® 1	\$0.55
	Letter	
	Brooklyn, NY 11230	
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Fi	Return Receipt	\$2.85
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	Letter	
	Flushing, NY 11355	
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Firs	Return Receipt	\$2.85
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	Mon 01/25/2021	
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Ma	Return Receipt	\$2.85
We	Tracking #:	
Es	9590 9402 5296 9154 5348 41	
Ce	Total	\$6.95
	First-Class Mail® 1	\$0.55
Total	Letter	
	Staten Island, NY 10310	
First-C	Weight: 0 lb 0.80 oz	
Letter	Estimated Delivery Date	
For	Mon 01/25/2021	
Wei	Certified Mail®	\$3.55
Est	Tracking #:	
	70170190000115277930	
Cer	Return Receipt	\$2.85
	Tracking #:	
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Total	Total	\$6.95
	First-Class Mail® 1	\$0.55
First-C	Letter	
Letter	Staten Island, NY 10303	
Rich	Weight: 0 lb 0.80 oz	
Weigh	Estimated Delivery Date	
Esti	Mon 01/25/2021	
/	Certified Mail®	\$3.55
Certi	Tracking #:	
1	70170190000115277923	
Total	Return Receipt	\$2.85
	Tracking #:	
	9590 9402 5296 9154 5348 65	
First-Cla	Total	\$6.95
Letter	First-Class Mail® 1	\$0.55
	Letter	
	Staten Island, NY 10303	
Flush	Weight: 0 lb 0.80 oz	
Weigh	Estimated Delivery Date	
Estime	Mon 01/25/2021	
Mr	Certified Mail®	\$3.55
	Tracking #:	
	70170190000115277923	
	Return Receipt	\$2.85
	Tracking #:	
	9590 9402 5296 9154 5348 65	
	Total	\$6.95
	First-Class Mail® 1	\$0.55
	Letter	

First-Class Mail® 1 \$0.55
Letter
Brooklyn, NY 11223
Weight: 0 lb 0.80 oz
Estimated Delivery Date
Mon 01/25/2021
Certified Mail® \$3.55
Tracking #: 70170190000115277893
Return Receipt \$2.85
Tracking #: 9590 9402 5295 9154 5349 26
Total \$6.95

First-Class Mail® 1 \$0.55
Letter
Ozone Park, NY 11417
Weight: 0 lb 0.80 oz
Estimated Delivery Date
Mon 01/25/2021
Certified Mail® \$3.55
Tracking #: 70170190000115277886
Return Receipt \$2.85
Tracking #: 9590 9402 5296 9154 5349 19
Total \$6.95

First-Class Mail® 1 \$0.55
Letter
Oakland Gardens, NY 11364
Weight: 0 lb 0.80 oz
Estimated Delivery Date
Mon 01/25/2021
Certified Mail® \$3.55
Tracking #: 70170190000115277879
Return Receipt \$2.85
Tracking #: 9590 9402 5296 9154 5349 02
Total \$6.95

Grand Total: \$263.40

Credit Card Remitted \$263.40
Card Name: VISA
Account #: XXXXXXXXXXXX4311
Approval #: 06154G
Transaction #: 885
AID: A0000000031010 Chip
AL: VISA CREDIT
PIN: Not Required

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COVID-19. We appreciate your patience.

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Richmond Hill, NY 11418

Certified Mail Fee \$3.55

\$0.00

0013
40

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$0.00
☐ Return Receipt (electronic) \$0.00
☐ Certified Mail Restricted Delivery \$0.00
☐ Adult Signature Required \$0.00
☐ Adult Signature Restricted Delivery \$0.00

Postmark
Here

Postage \$0.55

01/22/2021

Total Postage and Fees \$4.10

Sent To Jamaica Hospital Medical Center
 Street and Apt. No., or PO Box No. 54-CO Van Wyck Expy.
 City, State, ZIP+4® Jamaica, NY 11418

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Forest Hills, NY 11375

Certified Mail Fee \$3.55

\$0.00

0013
40

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$0.00
☐ Return Receipt (electronic) \$0.00
☐ Certified Mail Restricted Delivery \$0.00
☐ Adult Signature Required \$0.00
☐ Adult Signature Restricted Delivery \$0.00

Postmark
Here

Postage \$0.55

01/22/2021

Total Postage and Fees \$4.10

Sent To Northwell LIJ - Forest Hills Hospital
 Street and Apt. No., or PO Box No. 102-01 66 Road
 City, State, ZIP+4® Forest Hills, NY 11375

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Flushing, NY 11355

Certified Mail Fee \$3.55

\$0.00

0013
40

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$0.00
☐ Return Receipt (electronic) \$0.00
☐ Certified Mail Restricted Delivery \$0.00
☐ Adult Signature Required \$0.00
☐ Adult Signature Restricted Delivery \$0.00

Postmark
Here

Postage \$0.55

01/22/2021

Total Postage and Fees \$4.10

Sent To Flushing Hospital M.C.
 Street and Apt. No., or PO Box No. 45-CO Parsons Blvd
 City, State, ZIP+4® Flushing, NY 11355

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Flushing, NY 11355

Certified Mail Fee \$3.55

\$0.00

0013
40

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$0.00
☐ Return Receipt (electronic) \$0.00
☐ Certified Mail Restricted Delivery \$0.00
☐ Adult Signature Required \$0.00
☐ Adult Signature Restricted Delivery \$0.00

Postmark
Here

Postage \$0.55

01/22/2021

Total Postage and Fees \$4.10

Sent To NYPH Queens
 Street and Apt. No., or PO Box No. 56-45 Main Street
 City, State, ZIP+4® Flushing, NY 11355

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Jamaica, NY 11432

Certified Mail Fee \$3.55

\$0.00

0013
40

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$0.00
☐ Return Receipt (electronic) \$0.00
☐ Certified Mail Restricted Delivery \$0.00
☐ Adult Signature Required \$0.00
☐ Adult Signature Restricted Delivery \$0.00

Postmark
Here

Postage \$0.55

01/22/2021

Total Postage and Fees \$4.10

Sent To NYC J+H Queens General
 Street and Apt. No., or PO Box No. 82-68 164 Street
 City, State, ZIP+4® Jamaica, NY 11432

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Elmhurst, NY 11373

Certified Mail Fee \$3.55

\$0.00

0013
40

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$0.00
☐ Return Receipt (electronic) \$0.00
☐ Certified Mail Restricted Delivery \$0.00
☐ Adult Signature Required \$0.00
☐ Adult Signature Restricted Delivery \$0.00

Postmark
Here

Postage \$0.55

01/22/2021

Total Postage and Fees \$4.10

Sent To NYC J+H Elmhurst General
 Street and Apt. No., or PO Box No. 29-01 Broadway
 City, State, ZIP+4® Elmhurst, NY 11373

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Manhasset, NY 11040

0013 40

Certified Mail Fee \$3.55

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$0.00

☐ Return Receipt (electronic) \$0.00

☐ Certified Mail Restricted Delivery \$0.00

☐ Adult Signature Required \$0.00

☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55

Total Postage and Fees \$4.10

\$

Sent To

North Shore University Hospital

Street and Apt. No., or PO Box No.

300 Community Drive

City, State, ZIP+4®

Manhasset, NY 11040

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Brooklyn, NY 11212

0013 40

Certified Mail Fee \$3.55

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$0.00

☐ Return Receipt (electronic) \$0.00

☐ Certified Mail Restricted Delivery \$0.00

☐ Adult Signature Required \$0.00

☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55

Total Postage and Fees \$4.10

\$

Sent To

Brookdale Hospital Medical Center

Street and Apt. No., or PO Box No.

1 Brookdale Plaza

City, State, ZIP+4®

Brooklyn, NY 11212

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For delivery information, visit our website at www.usps.com

Ridgewood, NY 11385

0013 40

Certified Mail Fee \$3.55

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$2.85

☐ Return Receipt (electronic) \$0.00

☐ Certified Mail Restricted Delivery \$0.00

☐ Adult Signature Required \$0.00

☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55

Total Postage and Fees \$8.95

\$

Sent To

Ridgewood VAC

Street and Apt. No., or PO Box No.

503 Onderdonk Ave

City, State, ZIP+4®

Ridgewood, NY 11385

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New Hyde Park, NY 11040

0013 40

Certified Mail Fee \$3.55

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$2.85

☐ Return Receipt (electronic) \$0.00

☐ Certified Mail Restricted Delivery \$0.00

☐ Adult Signature Required \$0.00

☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55

Total Postage and Fees \$6.95

\$

Sent To

Northwell 135 New Hyde Park Hospital

Street and Apt. No., or PO Box No.

270-05 76 Ave

City, State, ZIP+4®

New Hyde Park, NY 11040

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Richmond Hill, NY 11418

0013 40

Certified Mail Fee \$3.55

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$0.00

☐ Return Receipt (electronic) \$0.00

☐ Certified Mail Restricted Delivery \$0.00

☐ Adult Signature Required \$0.00

☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55

Total Postage and Fees \$4.10

\$

Sent To

Jamaica Hospital Medical Center

Street and Apt. No., or PO Box No.

89-00 Van Wyck Expy

City, State, ZIP+4®

Jamaica, NY 11418

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College Point, NY 11356

0013 40

Certified Mail Fee \$3.55

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$2.85

☐ Return Receipt (electronic) \$0.00

☐ Certified Mail Restricted Delivery \$0.00

☐ Adult Signature Required \$0.00

☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55

Total Postage and Fees \$6.95

\$

Sent To

North Shore Ambulance + Oxygen

Street and Apt. No., or PO Box No.

112-09 14 Ave

City, State, ZIP+4®

College Point, NY 11356

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Bronx, NY 10461

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	01/22/2021
Total Postage and Fees	\$6.95	

Sent To Citywide Mobile Response
 Street and Apt. No., or PO Box No. 1624 Stillwell Avenue
 City, State, ZIP+4® Bronx, NY 10461

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Staten Island, NY 10303

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	01/22/2021
Total Postage and Fees	\$6.95	

Sent To Primary Care EMS
 Street and Apt. No., or PO Box No. 2690 Richmond Terrace
 City, State, ZIP+4® Staten Island, NY 10303

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Flushing, NY 11358

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	01/22/2021
Total Postage and Fees	\$6.95	

Sent To NY Pipefitter Union EMS
 Street and Apt. No., or PO Box No. 163-15 46 Ave
 City, State, ZIP+4® Flushing, NY 11358

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New Hyde Park, NY 11042

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	01/22/2021
Total Postage and Fees	\$6.95	

Sent To Northwell Health EMS
 Street and Apt. No., or PO Box No. 2500 Marcus Avenue
 City, State, ZIP+4® New Hyde Park, NY 11042

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Middle Village, NY 11379

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	01/22/2021
Total Postage and Fees	\$6.95	

Sent To Middle Village VAC
 Street and Apt. No., or PO Box No. 66-76 70 street
 City, State, ZIP+4® Middle Village, NY 11379

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Roosevelt, NY 11385

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	01/22/2021
Total Postage and Fees	\$6.95	

Sent To Glendale VAC
 Street and Apt. No., or PO Box No. 65-11 Myrtle Ave
 City, State, ZIP+4® Glendale, NY 11385

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Brooklyn, NY 10473

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Sent To Senior Care EMS
 Street and Apt. No., or PO Box No. 700 Havenwyck Ave
 City, State, ZIP+4® Brooklyn, NY 10473

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New York, NY 10001

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Sent To Ambulance, NY
 Street and Apt. No., or PO Box No. 35 West 35 Street 5th Flr
 City, State, ZIP+4® New York, NY 10001

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New York, NY 10019

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Sent To MT Sinai Hospital - EMS/Ambulance Dept
 Street and Apt. No., or PO Box No. 1000 Tenth Ave # GF-01
 City, State, ZIP+4® New York, NY 10019

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For delivery information, visit our website at www.usps.com

Brooklyn, NY 11218

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Sent To Insta Care EMS
 Street and Apt. No., or PO Box No. 1416 38 Street
 City, State, ZIP+4® Brooklyn, NY 11218

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Brooklyn, NY 11236

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Sent To Assist Ambulance
 Street and Apt. No., or PO Box No. 933 Remsen Avenue
 City, State, ZIP+4® Brooklyn, NY 11236

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Brooklyn, NY 11219

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
Total Postage and Fees	\$6.95	

Sent To Maimonides Medical Center EMS
 Street and Apt. No., or PO Box No. 4802 Tenth Avenue
 City, State, ZIP+4® Brooklyn, NY 11219

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Brooklyn, NY 11230

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	01/22/2021
Total Postage and Fees	\$6.95	

Sent To AIS Services
 Street and Apt. No., or PO Box No. 1970 McDonald Ave
 City, State, ZIP+4® Brooklyn, NY 11230

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Howard Beach, NY 11414

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	01/22/2021
Total Postage and Fees	\$6.95	

Sent To EMP NYC
 Street and Apt. No., or PO Box No. P.O. Box 116
 City, State, ZIP+4® Howard Beach, NY 11414

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Richmond Hill, NY 11418

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	01/22/2021
Total Postage and Fees	\$6.95	

Sent To JHMC EMS Ambulance Dept
 Street and Apt. No., or PO Box No. 89-00 Van Wyck Expy
 City, State, ZIP+4® Jamaica, NY 11418

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Richmond Hill, NY 11418

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	01/22/2021
Total Postage and Fees	\$6.95	

Sent To Medivs Ambulance
 Street and Apt. No., or PO Box No. 89-00 Van Wyck Expy
 City, State, ZIP+4® Jamaica, NY 11418

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Brooklyn, NY 11220

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	01/22/2021
Total Postage and Fees	\$6.95	

Sent To NIV Langone EMS
 Street and Apt. No., or PO Box No. 150 55 Street
 City, State, ZIP+4® Brooklyn, NY 11220

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

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Bronx, NY 10459

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	01/22/2021
Total Postage and Fees	\$6.95	

Sent To Hunter Ambulance
 Street and Apt. No., or PO Box No. 1028 Freeman Ave
 City, State, ZIP+4® Bronx, NY 10459

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

CERTIFIED MAIL® RECEIPT

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Staten Island, NY 10303

Certified Mail Fee \$3.55
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$2.85
☐ Return Receipt (electronic) \$0.00
☐ Certified Mail Restricted Delivery \$0.00
☐ Adult Signature Required \$0.00
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55
 Total Postage and Fees \$6.95

Sent To *Priority One Ambulance*
 Street and Apt. No., or PO Box No. *191 Granite Ave*
 City, State, ZIP+4® *Staten Island, NY 10303*

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Brooklyn, NY 11234

Certified Mail Fee \$3.55
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$2.85
☐ Return Receipt (electronic) \$0.00
☐ Certified Mail Restricted Delivery \$0.00
☐ Adult Signature Required \$0.00
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55
 Total Postage and Fees \$6.95

Sent To *NYPD - ESU*
 Street and Apt. No., or PO Box No. *Edward Is Hall - Floyd Bennett Field*
 City, State, ZIP+4® *Brooklyn, NY 11234*

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Brooklyn, NY 11230

Certified Mail Fee \$3.55
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$2.85
☐ Return Receipt (electronic) \$0.00
☐ Certified Mail Restricted Delivery \$0.00
☐ Adult Signature Required \$0.00
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55
 Total Postage and Fees \$6.95

Sent To *Cherna Vatzolah VAC*
 Street and Apt. No., or PO Box No. *1010 McDonald Ave*
 City, State, ZIP+4® *Brooklyn, NY 11230*

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

CERTIFIED MAIL® RECEIPT

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Staten Island, NY 10310

Certified Mail Fee \$3.55
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$2.85
☐ Return Receipt (electronic) \$0.00
☐ Certified Mail Restricted Delivery \$0.00
☐ Adult Signature Required \$0.00
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55
 Total Postage and Fees \$6.95

Sent To *RCA Ambulance*
 Street and Apt. No., or PO Box No. *1355 Castleton Ave*
 City, State, ZIP+4® *Staten Island, NY 10310*

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

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Fresh Meadows, NY 11355

Certified Mail Fee \$3.55
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$2.85
☐ Return Receipt (electronic) \$0.00
☐ Certified Mail Restricted Delivery \$0.00
☐ Adult Signature Required \$0.00
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55
 Total Postage and Fees \$6.95

Sent To *FIMC EMS*
 Street and Apt. No., or PO Box No. *45-00 Van Wyck Expy*
 City, State, ZIP+4® *Fresh Meadows, NY 11355*

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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For delivery information, visit our website at www.usps.com®.

Brooklyn, NY 11201

Certified Mail Fee \$3.55
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$2.85
☐ Return Receipt (electronic) \$0.00
☐ Certified Mail Restricted Delivery \$0.00
☐ Adult Signature Required \$0.00
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55
 Total Postage and Fees \$6.95

Sent To *FDNY EMS*
 Street and Apt. No., or PO Box No. *1 Metro Tech Plaza*
 City, State, ZIP+4® *Brooklyn, NY 11201*

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

CERTIFIED MAIL® RECEIPT

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Bay Shore, NY 11706

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	Postmark Here
Total Postage and Fees	\$6.95	

Sent To Hunter EMS
 Street and Apt. No., or PO Box No. 299 Feldman Court
 City, State, ZIP+4® Bay Shore, NY 11706

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Ozone Park, NY 11417

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	Postmark Here
Total Postage and Fees	\$6.95	

Sent To Lindenwood VAC
 Street and Apt. No., or PO Box No. 94-10 133 Ave
 City, State, ZIP+4® Lindenwood, NY 11417

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Brooklyn, NY 11223

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	Postmark Here
Total Postage and Fees	\$6.95	

Sent To Lifeline Ambulance Service
 Street and Apt. No., or PO Box No. 2593 W. 13 Street
 City, State, ZIP+4® Brooklyn, NY 11223

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

CERTIFIED MAIL® RECEIPT

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Oakland Gardens, NY 11364

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	Postmark Here
Total Postage and Fees	\$6.95	

Sent To Jamaica Estates VAC
 Street and Apt. No., or PO Box No. P.O. Box 64681
 City, State, ZIP+4® Bayside, NY 11364

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Brooklyn, NY 11223

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	Postmark Here
Total Postage and Fees	\$6.95	

Sent To Midwood Ambulance
 Street and Apt. No., or PO Box No. 2593 W. 13 Street
 City, State, ZIP+4® Brooklyn, NY 11223

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

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New York, NY 10065

Certified Mail Fee	\$3.55	0013
Extra Services & Fees (check box, add fee as appropriate)	\$2.85	40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage	\$0.55	Postmark Here
Total Postage and Fees	\$6.95	

Sent To NY Pipsby Terian EMS
 Street and Apt. No., or PO Box No. 525 E. 68 St. #M-101
 City, State, ZIP+4® New York, NY 10065

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



EMERGENCY PHONE: 793-7747
Information Phone: 793-2055

Forest Hills Volunteer Ambulance Corps, Inc.

P.O. Box 750617 • Forest Hills, New York 11375-0617

Northwell LIJ New Hyde Park Hospital
270-05 76th Avenue
New Hyde Park, NY 11040

Re: Amended Letter of Solicitation seeking support for Expansion of CON to Kew Gardens, Richmond Hill, and Woodhaven New York (Queens County)

Dear Concerned Party:

This letter follows mine of December 27, 2020 seeking your support for the application of Forest Hills Volunteer Ambulance Corps, Inc. (hereinafter "FHVAC") seeking expansion of its Certificate of Need (hereinafter "CON") from the New York State Department of Health to allow FHVAC to provide ambulance service within Kew Gardens, Richmond Hill, and Woodhaven New York (Queens County). It has come to my attention that my previous letter omitted the definition of public need and did not fully address FHVAC's equipment and staffing resources. Please allow me to clarify those points as follows: At present FHVAC is a duly certificated provider of BLS ambulance transport services for the Primary Territory of Forrest Hills and Rego Park. FHVAC has served the Forest Hills community continuously since 1971, and in the Rego Park community continuously since 1997. FHVAC currently operates 2 ambulances and 4 EASV's. We have an active roster of 85 members, which consists 2, Paramedics and 54 EMT-Basics. We are a participant in the New York City 911 program and an active participant in the Citywide Volunteer Mutual Aid agreement, and New York City REMSCO Mutual Aid Mobilization Plan. These resources presently give us a response time of three (3) to five (5) minutes, of which we are very proud, and which we anticipate being able to interpose into the proposed expansion territory by acquisition of two (2) additional ambulances and two (2) EASV's to allow strategic placement of these resources within those areas.

As you know, since 2016 the areas of Richmond Hill and Woodhaven have been without a Volunteer Ambulance service as the Woodhaven-Richmond Hill Volunteer Ambulance Corps closed its doors that year. Since that time the void of volunteer ambulance service left by that closure has not been filled, and the approximately 140,000 citizens of these areas have been left without a volunteer ambulance corps to meet their EMS need.

Thus, we are seeking to expand our operating territory under our CON via the application I referenced in my December 27, 2020 correspondence to fill the void left by the loss of the Woodhaven-Richmond Hill Volunteer Ambulance Corps and its CON. Importantly, the grant of this application will not displace any existing volunteer ambulance provider, and we submit that the insertion of our exceptional response times will meet the Public Need created by the loss of the Woodhaven-Richmond Hill Volunteer Ambulance Corps' CON.

NYS Department of Health Bureau of EMS Policy Statement 06-06 (hereinafter "06-06") requires a finding of "Public Need" in connection with the issuance of a new or expanded CON. 06-06 defines Public Need as follows:

The Demonstrated Absence, reduced availability or an inadequate level of care in ambulance or emergency medical service available to a geographical area which is not readily correctable through the reallocation or improvement of existing resources.

Variables in considering "Public Need" according to 06-06 include the following:

- o Geography
- o Population (size, density, projections)
- o Level of care (existing, available)
- o Quality, reliability, and response patterns of existing services
- o Type of service (emergency, non-emergency)
- o Special need (i.e. Air, Industrial or Facility)
- o Service effectiveness, cost, and operation
- o Other local factors

FHVAC asserts that, the loss of Woodhaven-Richmond Hill Volunteer Ambulance Corps and its CON has created a now long-standing public need for a volunteer ambulance corps to serve these communities. Thus, FHVAC is seeking to expand its territory to be able to serve those communities with the same exceptional service it has provided in its primary operating territory for decades.

At this time FHVAC would ask that you send a letter of support for its application for an Expansion CON to: Forest Hills Volunteer Ambulance Corps, Inc., attn: Jacek Mystkowski, President, EMT, at P.O. Box 750617, Forest Hills, New York 11375-0617 no later than February 7th, 2021. Your letter of support should be signed by the President, Chief Executive Officer, or other principal in your agency and should reference your receipt of the definition of public need in addition to your support for our application. For your convenience we have enclosed a sample letter of support. Finally, if you have previously submitted a letter of support, please re-submit the below letter, which explicitly references your receipt of the definition of need.

Thank you for your anticipated support. If you should have any questions regarding this request, please do not hesitate to contact me.

Very truly yours,
Forest Hills Volunteer Ambulance Corps., Inc.



Jacek Mystkowski, President

SAMPLE LETTER

Re: Letter of Support for FHVAC's Application for CON expansion

To whom it may concern:

Please be advised that we have received a Letter from Forest Hills Volunteer Ambulance Corps, Inc. (hereinafter "FHVAC") asking for our support as it applies for an expansion of its existing CON to provide ambulance services to the areas of Kew Gardens, Richmond Hill, and Woodhaven, Queens County, New York. The Letter contained the definition of Public Need utilized by the Department of Health to determine whether or not to issue a CON: *"The Demonstrated Absence, reduced availability or an inadequate level of care in ambulance or emergency medical service available to a geographical area which is not readily correctable through the reallocation or improvement of existing resources."*

Our agency supports FHVAC in the application process. We have worked with this agency and find that they provide a valuable and necessary service. We believe that there is a public need for FHVAC to provide ambulance service to Kew Gardens, Richmond Hill, and Woodhaven. Moreover, FHVAC is uniquely able to provide ambulance services to these areas and to the best of my knowledge, it provides first rate ambulance and pre-hospital EMS service in accordance with all State and Local rules, regulations, and protocols.

We find FHVAC's willingness to support the citizens of these areas, who have been without a Volunteer Ambulance Corps since 2016 to be admirable and desirable within the EMS system and ask that the application of FHVAC for expansion of their CON territory be approved.

Signed:

Dated:

Agency Code Number: 7347

Issued: 2/7/2020

Expires: 2/28/2022

NEW YORK STATE DEPARTMENT OF HEALTH
Ambulance Service Certificate

Forest Hills Volunteer Ambulance Corps, Inc.



*is hereby certified as a New York State ambulance service in
accordance with the provisions of Article 30 of the
Public Health Law*

PRIMARY TERRITORY: In Queens County, Forest Hills and Rego Park

A handwritten signature in black ink, reading "Ryan Greenbaum".

Emergency Medical Services Program

A handwritten signature in black ink, reading "Howard Zucker M.D.".

Commissioner of Health

This certificate may be revoked, suspended, limited or annulled for violation of the Public Health Law

THIS CERTIFICATE IS NOT TRANSFERABLE
Keep conspicuously posted

COMMUNITY OFFICE:
64-69 DRY HARBOR ROAD
MIDDLE VILLAGE, NY 11379
(718) 366-3900
FAX: (718) 326-3549

CITY HALL OFFICE:
250 BROADWAY, SUITE 1774
NEW YORK, NY 10007
(212) 788-7381



THE COUNCIL OF
THE CITY OF NEW YORK
ROBERT HOLDEN
COUNCIL MEMBER, 30TH DISTRICT, QUEENS

CHAIR
TECHNOLOGY

COMMITTEES
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GENERAL WELFARE
TRANSPORTATION
CRIMINAL JUSTICE
PARKS AND RECREATION

IRISH CAUCUS

Jacek Mystkowski
President
Forest Hills Volunteer Ambulance Corps, Inc. (FHVAC)
P.O. Box 750617
Forest Hills, New York 11375-0617

December 29, 2020

Re: Letter of support for Forest Hills Volunteer Ambulance Corps, Inc. (FHVAC) operating area expansion application

Dear Mr. Mystkowski,

I am writing to express support for the Forest Hills Volunteer Ambulance Corps, Inc. (FHVAC) application to the Regional Emergency Medical Services Council of New York City, Inc. for approval to expand its ability to operate into the adjacent communities of Woodhaven (11421), Richmond Hill (11418 & 11419), and Kew Gardens (11415). The proposed expansion includes areas of the New York City Community Board #9 and are within the confines of the New York City Police Department (NYPD) 102nd and 106th Precincts.

The proposed expansion would help restore the type of service of community-based volunteer ambulance services that is currently absent due to the void left by the Woodhaven Richmond Hill Volunteer Ambulance Corps (WRHAVC). Your organization has for years provided vital services to individuals regardless of their ability to pay and will continue to do the same should they be allowed to expand. You are regularly active participants in EMS responses, Non-emergent assistance, as well local events, and community outreach, often providing much needed emergency care and training, which cannot be replicated by other municipal, commercial and hospital systems without considerable resources and expense.

With that said, I endorse the Forest Hills Volunteer Ambulance Corps, Inc. (FHVAC) application and request that they receive the requisite approval to expand their operation as indicated. Please let me know how I can assist in this endeavor.

Sincerely,

Robert F. Holden
Council Member, District 30

DISTRICT OFFICE:

118-35 QUEENS BOULEVARD, 17TH FLOOR
FOREST HILLS, NY 11375
TEL: (718) 544-8800
FAX: (718) 544-4452

CITY HALL OFFICE:

250 BROADWAY, SUITE 1806
NEW YORK, NY 10007
Tel: (212) 786-6981
Fax: (212) 786-7052

Koslowitz@council.nyc.gov



CHAIR
RULES, PRIVILEGES & ELECTIONS

COMMITTEES
CONSUMER AFFAIRS
FINANCE
STANDARDS & ETHICS
STATE & FEDERAL LEGISLATION

THE COUNCIL OF
THE CITY OF NEW YORK
KAREN KOSLOWITZ
COUNCIL MEMBER, 29TH DISTRICT, QUEENS

December 22, 2020

New York City Regional Emergency Medical Services Council
475 Riverside Drive, Suite 1929
New York, New York 10115

Re: Forest Hills Volunteer Ambulance Corps. Areas of Service Expansion

To Whom It May Concern:

I write this letter on behalf of Mr. Jacek Mystkowski, President of the Forest Hills Volunteer Ambulance Corps, Inc. (FHVAC), who is requesting to broaden FHVAC's areas of service. The FHVAC began serving the community in 1971, by providing emergency and non-emergency services to the local area. I am so proud to have FHVAC within my Council District and believe they are a vital entity to the community. In fact, I have allocated expense money to them consistently since 2015 and will continue to do so for as long as I am able to.

I write in full support of FHVAC's application to the New York City Regional Emergency Medical Services Council (REMSCO) to expand their services to additional areas of Queens County. These additional areas include Kew Gardens, Richmond Hill, and Woodhaven. Throughout the COVID-19 pandemic that we are still experiencing and as Chair of the Queens Delegation in the City Council, I find it extremely important to expand all medical services throughout the borough. As a supporter of FHVAC, I truly commend them and their efforts of stepping up in the middle of a pandemic.

I appreciate your attention to this matter. Please let me know if you have any questions or concerns.

Sincerely,

KAREN KOSLOWITZ
Council Member, District 29
Queens Delegation, Chair



DAVID I. WEPRIN
MEMBER OF ASSEMBLY
24TH DISTRICT

THE ASSEMBLY STATE OF
NEW YORK ALBANY

CHAIR
Correction Committee

COMMITTEES
Banks
Codes
Judiciary
Ways and Means

TASK FORCE
Puerto Rican/Hispanic Task Force
Asian Pacific American Task Force

December 8, 2020

New York City Regional Emergency Medical Services Council (REMSCO)
Columbia University
475 Riverside Dr,
New York, NY 10115

Re: Expanding areas of service for the Forest Hills Volunteer Ambulance Corps, Inc.

To whom it may concern,

I recently received a letter from the Forest Hills Volunteer Ambulance Corps, Inc. (FHVAC), regarding their request to expand their areas of service in Queens County. In 1971, FHVAC began serving the community of Forest Hills by providing emergency and non-emergency response to its residents and visitors. Their services eventually expanded to Rego Park in 1997 where they continue to be fully staffed by volunteers.

As a result of FHVAC's success, I am requesting the New York City Regional Emergency Medical Services Council (REMSCO) support the matter of allowing FHVAC in expanding their services to the requested areas. The areas of service expansion that the FHVAC applied for within the county of Queens are Kew Gardens, Richmond Hill, and Woodhaven. While the FHVAC provides pre-hospital Emergency Medical Services, they additionally provide medical standby's at street fairs and other community events, as well as medical training to members of the communities we proudly serve. Expanding these services to the requested areas is a wonderful opportunity.

Throughout the COVID-19 pandemic, I admire the organizations and individuals such as FHVAC, who support their communities in numerous ways. Once again I fully support in expanding the areas of service for the Forest Hills Volunteer Ambulance Corps (FHVAC). I appreciate your attention to this matter. Thank you.

Sincerely,

DAVID I. WEPRIN
Member of Assembly

DIW/ns

**Forest Hills Chamber
Of Commerce**

P.O. Box 751123 Forest Hills, New York 11375 Telephone/Fax (718) 268-6565

E-mail: fhchamber@aol.com

www.foresthillschamberofcommerce.org

January 13, 2021

Forest Hills Volunteer Ambulance Corps, Inc.
P.O. Box 750617
Forest Hills, New York 11375-0617
Attention: Jacek Mystkowski, President, EMT

Dear Mr. Mystkowski-

The Forest Hills Volunteer Ambulance Corp has always provided exceptional service to the Forest Hills community. The participation of the FHVAC at our street fairs, jazz concerts and community events as well as the medical training to community members is an invaluable service that we depend on especially in these times of Covid-19.

To think that the areas of Richmond Hill and Woodhaven are underserved and do not have a volunteer ambulance service is completely unacceptable.

I urge that the application submitted to the New York City Regional Emergency Medical Services Council to expand the FHVAC services to Kew Gardens, Richmond Hill and Woodhaven, NY be approved so that the residents can have the vital medical services they need.

Regards,
Leslie Brown
Executive Director



ALBANY OFFICE
ROOM 913
LEGISLATIVE OFFICE BUILDING
ALBANY, NY 12247
PHONE 518-455-3461
FAX 518-426-6857

DISTRICT OFFICE
142-29 37th AVENUE
FLUSHING, NY 11354
PHONE 718-445-0004
FAX 518-445-3481

STAVISKY@NYSenate.GOV

THE SENATE
STATE OF NEW YORK
ALBANY, 12247

TOBY ANN STAVISKY
Senator, 16th District

VICE CHAIRWOMAN
MAJORITY CONFERENCE

CHAIRWOMAN
COMMITTEE ON HIGHER
EDUCATION
COMMITTEE MEMBER
EDUCATION
ETHICS & INTERNAL
GOVERNANCE
FINANCE
HEALTH
JUDICIARY
RACING, GAMING,
& WAGERING

December 15, 2020

Marie C. Diglio, BA, EMT
Executive Director Operations
New York City Regional Emergency Medical Services Council
475 Riverside Drive, Suite 1929
New York, New York 10115

Dear Ms. Diglio:

I am writing to you on behalf of Mr. Jacek Mystkowski, President of the Forest Hills Volunteer Ambulance Corps, Inc., whose mailing address is P.O. Box 750617, Forest Hills, New York 11375-0617.

I write in support of their application to expand their service areas in Queens County to include Kew Gardens, Richmond Hill, and Woodhaven. It is my understanding that since 2016 the communities of Richmond Hill and Woodhaven have been without a volunteer ambulance service.

The Forest Hills Volunteer Ambulance Corps began serving the community of Forest Hills in 1971. In 1997 they successfully expanded their service area to include Rego Park. Not only do they provide pre-hospital Emergency Medical Services to these communities, but they also provide medical standbys at street fairs and other community events, as well as, medical training to members of the communities they proudly serve.

Over the years I have provided capital funding to FHVAC for a new ambulance and most recently for the expansion of their headquarters. I truly believe in their amazing work and support their application for the expansion of their service area.

Sincerely,

Toby Ann Stavisky
New York State Senator
16th District



Emergency Medical RESCUE Of New York City

Post Office Box 116

Howard Beach, New York 11414-0116

Phone 718 474 0680 Fax 718 474 0642

www.EMRNYC.com E-mail info@EMRNYC.com

NYC's First Volunteer BLS-D First Response Unit

25TH ANNIVERSARY 1995-2020

December 22, 2020

Forest Hills Volunteer Ambulance Corps, Inc.
Mr. Jacek Mystkowski, President
P.O. Box 750617
Forest Hills, NY 11375-0617

Re: FHVAC Expansion

Dear Mr. Mystkowski,

Please accept this letter of endorsement for the expansion of service of the Forest Hills Volunteer Ambulance Corps, Inc. (FHVAC) into the areas of Kew Gardens, NY, Richmond Hill, NY and Woodhaven, NY.

As you know the Forest Hills Volunteer Ambulance Corps and Emergency Medical Rescue of New York City (EMR NYC) have had a Mutual Aid Agreement since the inception of EMR NYC, which is now 25 years. We have had a great working relationship between the agencies, and have provided countless services to one another.

EMR NYC truly believes that the FHVAC is capable of handling the expanded areas of service, and would be an asset to these communities.

Again, please accept this letter of endorsement to the FHVAC for your expansion.

Best of luck in this endeavor.

Sincerely,

Martin L. Grillo

Martin L. Grillo EMT-P, CIC
Chief / CEO

EMR*NYC is a 501(c)(3) Not For Profit Corporation. All of our funding comes from your generous Donations.



JAMAICA ESTATES - HOLLISWOOD - SOUTH BAYSIDE VOLUNTEER AMBULANCE CORPS, INC.

79-42 208 Street, P.O. Box 640181, Bayside, N.Y. 11364

Emergency Phone: **718-464-0300**

Information Phone: **718-464-0592**

www.JEVAC.org

Serving the communities of Briarwood, Eastwood, Hollis Hills, Holliswood, Jamaica, Jamaica Estates, Jamaica Hills, Queens Village, Oakland Gardens and South Bayside since 1973

Daryl Mazlish, EMT-B,
CIC
President

December 10, 2020

Mr. Jacek Mystkowski
President /CEO
Forest Hills Volunteer Ambulance Corps, Inc.
PO Box 750617
Forest Hills, NY 11375-0617

Re: Letter of support of Forest Hills Volunteer Ambulance Corps EMS operating area expansion application

Dear Mr. Mystkowski:

I am writing to express support for the Forest Hills Volunteer Ambulance Corps. application to the NYC REMSCO and New York State Department of Health for approval to expand its ability to operate a Basic Life Support level volunteer EMS service into the adjacent communities of Woodhaven (11421), Richmond Hill (11418 & 11419), and Kew Gardens (11415) in the borough of Queens, NY. The proposed expansion includes areas of the NYC Community Board #9 and are within the confines of the New York City Police Department (NYPD) 102nd and 106th Precincts.

I do this because there has been no operating volunteer ambulance service in these communities since the shutdown of the Woodhaven-Richmond Hill Volunteer Ambulance Corps several years ago. Volunteer community ambulance services provide more than just emergent responses. These ambulance companies, unlike the municipal 911 service, provide non-emergent transports to doctor's offices, discharge transports, education for the community (such as CPR and first aid classes), as well as loan out wheelchairs, walkers, canes, etc. to the community free of charge.

As a neighbor ambulance service to this area, I can attest that the number of persons who would benefit from this service expansion is significant. Volunteer ambulances provide their services regardless of the patient's legal or insurance status, and welcome participation of the community's youth in providing those services. Youth participation provides the youth members over the age of 15 years with productive activities and education, possibly leading to a rewarding career in the health professions. This is especially true for at-risk-youth who might otherwise get involved in non-productive and nefarious activities.

I therefore welcome the expansion of the Forest Hills Volunteer Ambulance Corps operating territory to the areas adjacent to my operating territory.

Sincerely,

Daryl Mazlish
President



SHMIRA • שמירה
QUEENS BOROUGH SAFETY PATROL

8422-124th Street 2nd FL KEW GARDENS, NY 11415 Fax: 718-871-3344

EMERGENCY HOTLINE: 718-329-4444

EMERGENCY SERVICES * SEARCH & RESCUE * SAFETY PATROL

QUEENS DIVISION



January 6, 2021

Re: Forest Hilla Volunteer Ambulance Corps. Area of Service Expansion

To Whom This May Concern,

I am writing this letter to show our support of this great organization and dedicated members to continue to assist the community and expand to help other communities as well. We fully support FHVAC's application to the New York City Regional Emergency Medical Services Council(REMSCO) to expand their services to the additional areas of Queens County. These additional areas include Kew Gardens, Richmond Hill, and Woodhaven. We are still amid a pandemic that these communities could benefit greatly from their services. We are proud that they are taking the initiative to help these additional areas.

Sincerely,

Jonathan Fricker

Coordinator of Queens Borough Safety Patrol Inc,(QBSP)



FDNY

www.nyc.gov/fdny

January 12, 2021

Mr. Jacek Mystkowski
President
Forest Hills Volunteer Ambulance Corps
P.O. Box 750617
Forest Hills, NY 11375-0617

Dear Mr. Mystkowski:

The Fire Department of the City of New York (FDNY) is in receipt of your correspondence dated November 12, 2020 concerning submission of an application to the Regional Emergency Medical Services Council of New York City and New York State Department of Health for expansion of the Forest Hills VAC operating territory. Volunteer Ambulance Corps continue to play a critical role in the Emergency Medical Services community in New York City.

Our Department was disappointed by the series of misfortunes that led to the closing of the Woodhaven-Richmond Hill Volunteer Ambulance Corps in 2017, after fifty years of dedicated service to the community. We appreciate your organization's willingness to expand volunteer ambulance coverage to the adjacent communities comprised of Queens Community Board #9; including the NYPD 102 and 106 precincts.

We have reviewed the explanation of public need set forth by the New York State Department of Health, Bureau of Emergency Medical Services related to the EMS Operating Certificate Application Process (CON). Volunteer Ambulance Corps receive and respond to medical incidents independently, not at the direction of the FDNY or NYC-911 system. The only exception to the current practice is the FDNY coordination of EMS resources provided under the FDNY/REMSCO Mutual Aid Mobilization Plan.

Fire Department, City of New York

9 MetroTech Center, Brooklyn New York 11201-3857



As you are aware; the FDNY provides a tiered response for medical incidents for all of New York City, including the proposed expansion area. Our response consists of Certified First Responder (CFR), Basic Life Support (BLS), and Advanced Life Support (ALS).

The services provided by the former Woodhaven-Richmond Hill Volunteer Ambulance Corps and the existent Forest Hills Volunteer Ambulance Corps do not impact the FDNY Ambulance Deployment Matrix. Again, we recognize the critical role of the Emergency Medical Services volunteer sector. Therefore, the FDNY is pleased to endorse your proposed application to the Regional EMS Council and NY State Department of Health for expansion of service into the former operating territory of the Woodhaven-Richmond Hill Volunteer Ambulance Corps.

Respectfully,

DVC Martin J. Braun

FDNY EMS Voluntary Hospital Liaison

Cc: Lillian Bonsignore, Chief of EMS, FDNY
Marie Diglio, Director of Operations, NYC REMSCO



January 31, 2021

New York Regional Emergency Medical Services
475 Riverside Drive, Suite 1929
New York, NY 10115

Re: Forest Hills Volunteer Ambulance Corps. - areas of service expansion

To whom it may concern,

I am writing this letter on behalf of Mr. Jacek Mystkowski, President, Forest Hills Volunteer Ambulance Corps, Inc. (FHVAC) as they are seeking to expand FHVAC's areas of service. The FHVAC was formed in 1971, as a community-based ambulance service, staffed entirely by volunteers. FHVAC provides emergency and non-emergency services to our local residents. We are so fortunate to have FHVAC within NY State Assembly District 28, and New York City Council, District 29.

They are an important member and partner in our community. They have partnered with the Forest Hills Asian Association (FHAA) for our annual cultural event, Mooncakes for Mid-Autumn Festival as well as our annual State of Forest Hills Civic where we invite local not for profits to participate to share information about their organization. This is part of their community engagement and outreach efforts.

I am writing to support FHVAC's application to the New York City Regional Emergency Medical Services Council (REMSCO) to expand their services to additional areas of Queens. These areas include Kew Gardens, Richmond Hill and Woodhaven. It is vital that we expand medical service in our area and all areas of Queens. Especially during this Covid-19 pandemic time of critical need. As a partner and supporter of FHVAC, I commend and will continue to support their efforts.

Please let me know if you have any questions.

In Unity,

A handwritten signature of Edwin Wong in black ink.

Edwin Wong
Forest Hills Asian Association, President Emeritus
NYS Democratic Committee - State Committee - Male Member - AD28
Candidate, New York City Council, District 29
72-11 Austin Street, #258, Forest Hills, NY 11375

CURRICULUM VITAE

November, 2020

Jeffrey E. Horwitz, D.O., FACP, FACEP

Professional Address

**ProHealthCare Urgent care
Multiple sites**

Home address

[REDACTED]

[REDACTED]

Education:

Medical School:

1984 D.O. New York College of Osteopathic Medicine

Undergraduate:

1980 B.A S.U.N.Y at Stony Brook

Postdoctoral Training:

1984-1987 Internal Medicine Residency, Maimonides Medical Center

Licensure and Certification:

1984	New York State #160043
1994	American Board of Emergency Medicine
2004/2014	Recertified American Board of Emergency Medicine
1987	American Board of Internal Medicine

November 18, 2020

Forest Hills Volunteer Ambulance Corps, Inc.
Attn: Mr. Jacek Mystkowski, President
PO Box 750617
92-29 Metropolitan Avenue
Forest Hills, NY 11375-0617

Re: FHVAC Expansion Application Proposal


Dear Mr. Mystkowski.

As the Medical Director of the Forest Hills Volunteer Ambulance Corps, Inc. (FHVAC), I acknowledge, and proudly support your application for expansion of your service area. I have been the Medical Director for the FHVAC from 1996, during which time I have provided clinical oversight, quality improvement and continuing education for its prehospital care providers.

As you may know, I have served Chair for NYC REMSCO from 2006 – 2010, and have been the Chair of the Systems & Ambulance Subcommittee from 2005 – 2009. In addition, I have been the Medical Director for the Western Queens Volunteer Ambulance Quality Improvement Committee, of which you are a part of, since 1996 through present.

It is my honor to serve as the Medical Director of the FHVAC, to which I will be fully committed to the QA/QI of the Emergency Medical Service you will provide to the new service area, if approved.

Respectfully submitted,



Dr. Jeffrey Horwitz, D.O., FACP, FACEP
Medical Director

Academic Appointments:

2009-2014	Assistant Professor, Emergency Medicine, Hofstra University School of Medicine
1997-2010	Assistant Clinical Professor of Emergency Medicine, NYU School of Medicine.
1991-2005	Assistant Clinical Professor, Department of Emergency Medicine, SUNY Health Science Center at Brooklyn
1994-present	Adjunct Clinical Assistant Professor of Emergency Medicine, New York College of Osteopathic Medicine
1989-1997	Instructor, Department of Medicine, SUNY Health Science Center at Brooklyn

Hospital Appointments:

1996-2019	Attending, Department of Emergency Medicine, Forest Hills Hospital
2010-2019	Attending, Department of Emergency Medicine, Long Island Jewish Hospital
2010-2019	Attending, Department of Emergency Medicine, North Shore University Hospital
2013-2019	Attending, Department of Emergency Medicine, Franklin Hospital
1996-2010	Director, Department of Emergency Medicine, North Shore University Hospital at Forest Hills, New York
1996-1999	President, Board of Directors, Forest Hills PHO
1995-1996	Clinical Director, Department of Emergency Medicine, Maimonides Medical Center, Brooklyn, New York
1991-1995	Acting Chairman/Director, Department of Emergency Medicine, Maimonides Medical Center, Brooklyn, New York
1991-1995	Medical Director, Maimonides Ambulance Department
1988-1991	Assistant Director, Division of Emergency Medicine, Maimonides Medical Center, Brooklyn, New York
1987-1988	Attending, Division of Emergency Medicine, Maimonides Medical Center

Other Professional Positions and Major Visiting Appointments:

1990-present	Physician Consultant, Island Peer Review Organization
1991-1996	President, Emergency Medical Services of Boro Park P.C.
1990-1991	Treasurer, Emergency Medical Services of Boro Park, P.C.

Awards and Honors:

Fellow, ACP
Fellow, ACEP
Lawrence Scherr, M.D. Award of Excellence, April 2003
NY State Volunteer Ambulance & Rescue Association,
Medical Director of the Year, October 2004
Regional EMS Council of NYC, EMS Physician of Excellence 2004

Major Committee Assignments:

National and Regional

2008-present	Treasurer, member of the board, NYC REMSCO Inc.
2006-2010	Chair, Regional Emergency Medicine Services Council, New York City
2005-2009	Chair, Systems/Ambulance Subcommittee, NYC REMSCO
2001-2006	1st Vice Chair Regional Emergency Medicine Services Council, New York City
1993-2012	Regional Emergency Medicine Advisory Committee, New York City
1993-2010	Regional Emergency Medicine Services Council, New York City
1999-2012	QA/QI Committee REMAC/REMSCO
1999-2001	2 nd Vice Chair Regional Emergency Medicine Services Council, New York City
1993-1999	Chair, Matrix Subcommittee of the NYC 911 Ambulance Destination Advisory Comm.
1991-1999	N.Y.C. 911 Ambulance Destination Advisory Committee

Hospital

2005-2006	President, Medical Staff / Medical Board, Forest Hills Hospital
2004-2005	Vice President, Medical Staff, North Shore University Hospital at Forest Hills
2003-2004	Secretary, Medical Staff, North Shore University Hospital at Forest Hills
1996-2010	Medical Board, North Shore University Hospital at Forest Hills
1996-2010	Chiefs' Committee, North Shore University Hospital at Forest Hills
1996-2010	Pharmacy and Therapeutics, North Shore University Hospital at Forest Hills
1996-2010	PICG Committee, North Shore University Hospital at Forest Hills

Memberships, Offices and Committee Assignments in Professional Societies:

	Fellow, American College of Emergency Physicians
	Fellow, American College of Physicians
2005-2016	NY Institute of Technology, School of Health Professions, Behavioral and Life Sciences Advisory Board
2002-2014	NY ACEP Governmental Affairs Committee
1996-present	Medical Director, Forest Hills Volunteer Ambulance Corps.
1996-2019	Medical Director, Glendale Volunteer Ambulance Corps.
1996-present	Medical Director, Western Queens Volunteer Ambulance Quality Improvement Committee
2000-present	Medical Director, Western Queens Emergency Medical Training Institute
2014-present	Medical Director, Jamaica Estates Volunteer Ambulance Corps

Major Research Interests:

1. Septal Rupture: Effects of Oxygen Administration. *Clinical Cardiology*. Vol 11 No. 12 (1988). Hollander, G., Horwitz, J., Greengart, A., Shani, J., Lichstein, E.
2. The Effect of Satisfaction on Future Emergency Room Utilization. *Health Care Management Review*. Vol. 20 No. 2 (1995). Mack, J., File, K., Horwitz, J., Prince, R.
3. Factors Associated with Emergency Room Choice Among Medicare Patients. *Journal of Ambulatory Care Marketing*. Vol. 6 No. 1 (1995). Mack J., File, K., Horwitz, J., Prince R.
4. Ventricular Fibrillation Following Blunt Trauma from a Baseball. *Pediatric Emergency Care*. Vol 13(2) (1997). pg 107-110. Van Amerongen, R., Rosen, M., Winnik, G., Horwitz, J.

Book Chapters:

Horwitz, J., Baldwin, J. Chapter: Lumbar (intervertebral) disk disorders in EMEDICINE ONLINE TEXTBOOK OF EMERGENCY MEDICINE. Slabinski, M., Editors.

Teaching Experience:

Grand Rounds and Lectures:

Sexually Transmitted Diseases
Supraventricular Tachyarrhythmias
Legal Issues in Emergency Medicine
Sickle Cell Disease
Emergency Airway Management
The Unconscious Patient
Multiple ATLS and ACLS Topics
Multiple Basic Emergency Nursing Topics
Multiple EMT, EMT-P classes
Taught Intro Emergency medicine class for 1st- and 2nd-year students at SUNY, Health Science, Brooklyn, N.Y.

Affirmation of Fitness and Competency

By completing this form, you are aware that the NYS Department of Health will be conducting a detailed background review in order to determine fitness and competency in accordance with Article 30 of the NYS Public Health Law.

FOREST HILLS VOLUNTEER AMBULANCE CORPS, INC.

7347

Name of EMS Agency

NYS EMS Agency Code

FOREST HILLS VOLUNTEER AMBULANCE CORPS, INC.

Full Name of Corporate Entity requiring F&C review as a new owner/operator

JACEK MYSTKOWSKI

PRESIDENT/ CEO

Full Name of Individual

Title

92-29 METROPOLITAN AVENUE

Address of the Individual or Corporate Entity requiring F&C review as a new owner/operator

Social Security Number (this is not releasable under the provisions of FOIL)

Date of Birth

As the proposed new owner/operator of an EMS agency, I hereby certify that I am or have been a director, sponsor, principal, stock holder, operator or operations manager of one or more of the following in the past 10 years (Article 30 §3005[5]):

YES NO

- ☒ ☐ Emergency Medical Service certified by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Hospital, long term care facility or other Article 28 facility licensed by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Invalid coach (Ambulette) Service authorized by the NYS Department of Transportation or equivalent in any other state.
- ☐ ☒ Home or residence licensed by NYS or equivalent in any other state.
- ☐ ☒ Halfway house, hostel or residential facility or institution licensed by, or subject to the rules of the NYS Office of Mental Health (OMH) or Office of Mental Retardation and Developmental Disabilities (OMRDD), or equivalent in any other state.

→ If NO has been marked for all of the above, it indicates that there is no history of operating an entity identified in NYS Public Health Law; signing this affirmation is informational only and a testimony to the accuracy of the information provided.

→ If YES has been marked for any of the above, on an attached page, please provide the following information for each:

- Name of agency or facility
- Mailing address of facility or agency
- Name of Certifying or Licensing authority
- If applicable, a copy of license, certificate or identification number
- Individual position(s) held with start and end dates

REQUIRED ATTACHMENTS TO THIS AFFIRMATION

- Current resume or curriculum vitae
- Copies of any related licenses and certifications
- Listing of address of residence, or if less than 2 years, addresses of prior residences

Certification of Competency

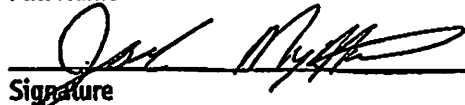
By completing and signing this affirmation, I certify that I have operated all of the agencies indicated, in compliance with all applicable statutes, rules, regulations and policies, specifically 10 NYCRR800.

Further, I certify that there have been no administrative orders issued by any Federal, State or local agency for matters that are or were recurrent or uncorrected, or dealt with patient harm or neglect in accordance with NYS Public Health Law during my tenure as a director, sponsor, principal, stock holder, operator or operations manager.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of competency.

JACEK MYSTKOWSKI

Full Name



Signature

11/12/2020
Date

Certification of Fitness

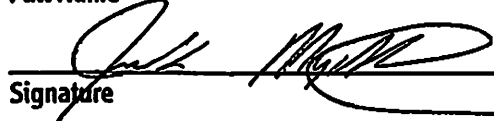
By completing and signing this affirmation, I certify that I have not been convicted of any crime at anytime, involving murder, manslaughter, assault, sexual abuse, theft, robbery, drug abuse, or sale of drugs, nor have I pleaded nolo contendere to a felony charge relating to any of these offenses.

Further, I certify that, I am not, or was not subject to a state or federal administrative order relating to fraud, embezzlement or patient harm, including, but not limited to actions involving Medicare and or Medicaid.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of fitness.

JACEK MYSTKOWSKI

Full Name

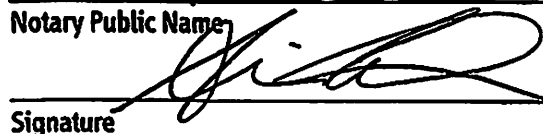


Signature

11/12/2020
Date

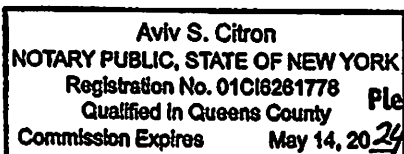
Notary Public Affirmation and Acknowledgement

AVIV CITRON
Notary Public Name



Signature

11/12/2020
Date



Please affix Notary Public Stamp or equivalent.

Jacek Mystkowski

Email: Jacek.Mystkowski@yahoo.com
Queens, New York

Operations Manager

Team Leader
Employee Training & Development
Human Resources
Revenue Cycle Monitoring

Strategic Planning
Vendor Relations & Negotiations
Inventory Planning & Control
Organizational & Staff Development

Process Improvement
Solution Driven
Accident Prevention & Investigation
Safety Goal Oriented

Professional Experience

Senior Care Emergency Medical Services – Bronx, New York

September 2010-Present

Operations Manager
Field Supervisor
Field Employee

January 2013-Present
June 2011-April 2011
September 2010-June 2011

Responsible for providing management, leadership, direction and administration to all aspects of daily operations for SeniorCare EMS. Participates in the selection, employment and management of all field employees. Provided, coaching, evaluates performance, recommends merit raises, promotions and disciplinary actions up to and including termination. Ensures that all staff is fully informed and have reasonable access to all SCEMS protocols, policy and procedure, and other information pertinent to perform their assigned job duties

Forest Hills Volunteer Ambulance Service – Queens, New York

July 2009-Present

President
Chief Operating Officer

July 2018-Present
July 2015-2018

Safety Officer
Sargent At Arms
Dispatcher & Field Personal

July 2011- July 2015
July 2010-July 2011
July 2009- July 2010

Responsible to oversee, supervise, manage and direct the administration and operation of Forest Hills Vol Ambulance. Responsible for staff operations, business planning and budget development. Ensures emergency medical services are in compliance with professional standards, state and federal regulatory requirements.

New York City Department of Parks & Recreation – Queens, New York

May 2000-September 2007

Operations Supervisor
Field Employee

May 2003- September 2007
May 2000-May 2003

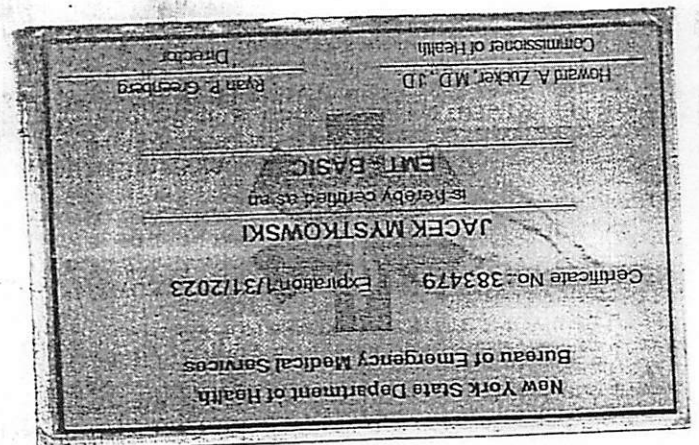
Responsible for the training, control, and direct supervision of Lifeguards, maintenance of bathing area, and for the safety of persons swimming or otherwise using the recreational facilities of Rockaway Beach. Exercised sound judgment in emergencies and life threatening situations. Responsible for management of daily operations, which includes ensuring appropriate resource allocation. Provided constant review of all operational processes and provides recommended changes and solution. Provided written reports on all accidents/ incidents.

Education

Professional Certifications:

Organizational Development: Baruch College, City
University of New York - 2008
Emergency Medical Technician: NY Hospital Queens
Training Institute, Flushing, NY - 2010

Incident Command: FEMA Emergency Management
Institute, Emmitsburg, MD - 2010
Ambulance Operations Management: Fitch and
Associates, Kansas City, MO – 2013



**New York State Department of Health
EMT Certification - Search Results Screen
EMT Detail Information Screen
EMT: MYSTKOWSKI, JACEK**

[Print Page](#)[RETURN](#)

EMT Number		
Last Name	First Name	Middle Initial
City	State	Zip
County		
Status Description	Certification Expiration Date	Exam Level
383479		
MYSTKOWSKI	JACEK	
HOWARD BEACH	NY	11414
QUEENS		
Status OK	01/31/2024	Emergency Medical Technician (EMT)
383479		
Status OK	12/31/2020	Emergency Medical Technician (EMT)

[RETURN](#)

Affirmation of Fitness and Competency

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FOREST HILLS VOLUNTEER AMBULANCE CORPS, INC.

7347

Name of EMS Agency

NYS EMS Agency Code

FOREST HILLS VOLUNTEER AMBULANCE CORPS, INC.

Full Name of Corporate Entity requiring F&C review as a new owner/operator

ALAN WOLFE

VICE PRESIDENT

Full Name of Individual

Title

92-29 METROPOLITAN AVENUE

Address of the Individual or Corporate Entity requiring F&C review as a new owner/operator

Social Security Number (this is not releasable under the provisions of FOIL)

Date of Birth

As the proposed new owner/operator of an EMS agency, I hereby certify that I am or have been a director, sponsor, principal, stock holder, operator, or operations manager of one or more of the following in the past 10 years (Article 30 §3005(5)):

YES NO

- ☒ ☐ Emergency Medical Service certified by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Hospital, long term care facility or other Article 28 facility licensed by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Invalid coach (Ambulette) Service authorized by the NYS Department of Transportation or equivalent in any other state.
- ☐ ☒ Home or residence licensed by NYS or equivalent in any other state.
- ☐ ☒ Halfway house, hostel or residential facility or institution licensed by, or subject to the rules of the NYS Office of Mental Health (OMH) or Office of Mental Retardation and Developmental Disabilities (OMRDD), or equivalent in any other state.

→ If NO has been marked for all of the above, it indicates that there is no history of operating an entity identified in NYS Public Health Law; signing this affirmation is informational only and a testimony to the accuracy of the information provided.

→ If YES has been marked for any of the above, on an attached page, please provide the following information for each:

- Name of agency or facility
- Mailing address of facility or agency
- Name of Certifying or Licensing authority
- If applicable, a copy of license, certificate or identification number
- Individual position(s) held with start and end dates

REQUIRED ATTACHMENTS TO THIS AFFIRMATION

- Current resume or curriculum vitae
- Copies of any related licenses and certifications
- Listing of address of residence, or if less than 2 years, addresses of prior residences

Certification of Competency

By completing and signing this affirmation, I certify that I have operated all of the agencies indicated, in compliance with all applicable statutes, rules, regulations and policies, specifically 10 NYCRR800.

Further, I certify that there have been no administrative orders issued by any Federal, State or local agency for matters that are or were recurrent or uncorrected, or dealt with patient harm or neglect in accordance with NYS Public Health Law during my tenure as a director, sponsor, principal, stock holder, operator or operations manager.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of competency.

ALAN WOLFE

Full Name

Signature

Date

Certification of Fitness

By completing and signing this affirmation, I certify that I have not been convicted of any crime at anytime, involving murder, manslaughter, assault, sexual abuse, theft, robbery, drug abuse, or sale of drugs, nor have I pleaded nolo contendere to a felony charge relating to any of these offenses.

Further, I certify that, I am not, or was not subject to a state or federal administrative order relating to fraud, embezzlement or patient harm, including, but not limited to actions involving Medicare and or Medicaid.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of fitness.

ALAN WOLFE

Full Name

Signature

Date

Notary Public Affirmation and Acknowledgement

Notary Public Name

Signature

Date

Aviv S. Citron
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01C16261778
Qualified in Queens County
Commission Expires May 14, 2024

Please affix Notary Public Stamp or equivalent.

Alan Louis Wolfe
[REDACTED]

Cell: (646) 302-3349

Email: [REDACTED]

Experience:

Supervisory CBP Officer (First Line)

06/2019 to Present

Anti-Terrorism Contraband Enforcement Team (A-TCET)
[REDACTED]

U.S. Customs and Border Protection, JFK Airport, New York

Supervisor: Chance Youngs, Deputy Chief, (718) 487-5150

As a first line supervisor on the Anti-Terrorism Contraband Enforcement Team (A-TCET), I am responsible for supervising and coordinating various enforcement activities for both the Outbound and Inbound environments. Specifically, I supervise teams of officers who work in uniform and plainclothes and conduct enforcement of currency reporting requirements and bulk cash smuggling, enforcement of state and federal warrants, inbound and outbound cargo inspection and enforcement operations, aircraft search activities and a wide range of other enforcement activities. I coordinate joint operations with outside law enforcement agencies such as Homeland Security Investigations (HSI), Federal Bureau of Investigations (FBI), US Secret Service (USSS), New York City Police Department (NYPD), Port Authority Police Department (PAPD), and many other federal, state and local departments.

Some specific responsibilities that I was tasked with include the following:

- Developed the A-TCET Active Shooter Response Plan. This plan outlines how A-TCET officers will respond to an active shooter situation in the safest and most tactical way possible.
- Organized A-TCET Officer Safety / Car Stop Training. This training was designed to teach A-TCET officers how to safely conduct vehicle and truck stops. This training helped officers understand the dangers of vehicle stops and how to effectively mitigate the dangers involved in this activity.
- Organized forklift training. This training was designed to teach employees how to utilize the CBP owned forklift and pallet jacks. The course culminated with each employee earning a certification in the operation of said equipment.
- Designed special operations to improve enforcement activities.
- Organized and coordinated enforcement activities at the outer Airports for General Aviation. Developed targeting methods to track inbound and outbound general aviation.
- Supervised seizure processing of currency, narcotics and other contraband.
- Prepared Situation Room Reports and distributed to appropriate managers.
- Manage logistics for the Team including vehicles, tactical radio communications, information dissemination and office space reallocation for the new joint targeting unit.
- Coordinated and conducted various employee morale activities.

Supervisory CBP Officer (First Line)
[REDACTED]

06/2010 to 06/2019

U.S. Customs and Border Protection, JFK Airport, New York

Supervisor: [REDACTED]

As a first line supervisor in Passenger Operations, I am responsible for directing, coordinating, assigning, organizing and evaluating work activities, such as inspection, intelligence analysis, examination, and layered law enforcement activities including apprehension, detention and arrest relating to arrival and departure of persons, conveyances and merchandise at ports of entry for the United States. I am also responsible for interpreting laws and regulations of a broad range of Federal, state and local agencies relating to the admissibility of people, cargo, and conveyances; international mail compliance; arrival and departure of vessels and aircraft. Key accomplishments include the following:

- Developed the JFK CBP Terminal Response Plan for an active shooter situation. Created a plan to respond to the threat of an active shooter or other incident where CBP personnel need to respond to protect the public. Developed and conducted a training session for all JFK CBP Managers on the implementation of and procedures for the Terminal Response Plan. Created assignment boards and installed them in each of the terminal RCC's.
- As the JFK Security Liaison for Passenger Operation and in a proactive measure to thwart an active shooter incident inside a JFK terminal, I developed a procedure to prevent international passengers from obtaining their firearms from their checked-in luggage in the CBP baggage carousel area. A CBP Port Director's Pipeline (No. 16-025-JFK), was issued requiring all firearms checked-in by a passenger remain in the custody of the airline and brought directly to the CBP Ships Office.
- On Thursday, September 7, 2017, I led "Operation Be Prepared", an Active Shooter Table Top Exercise (TTX) at JFK Airport. The purpose of this exercise was to discuss the JFK Passenger Operations *Terminal Response Plan for an Active Shooter Situation* and to determine if the plan would work in a real life incident. Various CBP personnel participated in this exercise including, Fixed Terminal Officers, Supervisors, Deputy Chiefs and a Watch Commander. CBP special units such as SRT, TTRT, A-TCET and RCC were also present. In addition to the many CBP units present were representatives from PAPD, NYPD, NYS Police, N.Y. National Guard, ICE, HSI, FBI, TSA, Terminal One and Terminal Seven Management.
- In 2017, JFK rolled out Modified Egress. I was tasked with creating and developing a video for all JFK CBP Officers to announce the change in processing procedures. In such, I recruited officers who were skilled in video production, built a studio, procured necessary equipment at no cost to CBP and directed the video production and editing.
- I am responsible for creating "Studio 4701" which is a team of officers who are skilled in video production. With "Studio 4701" we have been responsible for over fifteen (15) Port Director's Monthly Videos. This is an excellent communication tool for the Port Director to show all of JFK's CBP employee's significant actions or special teams that we have at JFK. This communications tool allows the Port Director to send a monthly message via video to every employee at JFK Airport.
- As the JFK Emergency Medical Services (EMS) supervisor, I am responsible for the development and creation of the JFK EMS Response Plan SOP, which was written within the guidelines of the CBP National EMS Program Guide. This is a fairly new national CBP program and when given the responsibility, I recruited EMT personnel, trained or coordinated training for hundreds of employees in CPR/AED, First Aid and Narcan administration. This program has been responsible for many lifesaving situations and has had a positive impact on the reputation of CBP. It continues to grow under my supervision. I am also responsible for the CBP Medical Counter Measures Program at JFK.

- In 2017, JFK CBP signed on with the Port Authority's Emergency Operation Center (EOC) at Building 111. I was the first CBP supervisor assigned with responsibility to recruit and train a staff of CBP officers to work at the EOC. I developed training, worked with partner agencies and stakeholders and moved CBP in a positive direction with this new endeavor.
- In 2012, I was assigned as a collateral duty the responsibility of developing the Rover Command Center (RCC) at Terminal 4. Under the direction of DAPD Galantino and DC Youngs, I developed a three stage strategy of securing the FIS at Terminal 4. With this strategy, we recruited and trained CBP officers to monitor CCTV and respond to breaches of the FIS, sometimes resulting in the issuance of CHASE violations. This strategy also included working with stakeholders to train their employees on CBP security procedures in order to prevent violations of the CBP CHASE rules. This program was a success and reduced security breaches by 95%, allowing CBP personnel to focus on more pressing security concerns.
- Since 2010 I have been the CBP radio system supervisor for Passenger Operations. With this responsibility I am tasked with maintaining an inventory of over 500 portable radios including the issuance of radios to officers and fixed pool radio locations. I am also responsible for training employees in the use of the radio system. Currently, CBP radio use has multiplied exponentially due to my persistence with this program.
- As a supervisor at Terminal 7, in addition to my regular daily tour duties, I am responsible for the logistics of the terminal. Specifically I upgraded the key system so that all CBP doors would be on a master locking system. This allows for maintaining control of FIS doors. I also coordinate the maintenance of the FIS area by working with terminal 7 management to ensure that CBP has appropriate facilities to conduct business. I was responsible for moving the supervisor's office from inside PPC Secondary to the RCC. This allows for better supervision of all aspects of the CBP operation such as Baggage, Primary, Agriculture and PPC Secondary. I also created a conference room so that CBP can conduct meetings with employees and stakeholders or conduct necessary training for officers.

CBP Officer

12/2001 to 6/2010

U.S. Customs and Border Protection, JFK Airport, New York

Supervisor: [REDACTED]

Responsible for the interdiction of illegal contraband and persons entering the United States. Protecting the nation's borders and ensuring the safety of the American people. Responsible for the carrying and maintenance of a firearm, making arrests, preparing detailed reports, and safeguarding evidence. Assignments included working in the International Mail Facility (USPS) where I made numerous seizures of narcotics and other contraband being shipped into the United States, working in the Passenger Analytical Unit where duties include pre-arrival targeting of suspected terrorists and narcotics smugglers, working on the A-TCET Outbound Currency Interdiction Team where I was responsible for inspecting departing passengers for unreported bulk cash, Immigration violations and other contraband being smuggled out of the United States. I also served as a union steward for the National Treasury Employees Union where I was responsible for participating in labor-management negotiation, preparing defenses for employees charged with discipline and organizing activities to promote a good working relationship between labor and CBP management.

Teacher

9/2001 – 6/2004

New York City Board of Education – Richmond Hill High School

Supervisor: [REDACTED]

Instructed students in high school level curriculum. Other responsibilities include: administering state-wide examinations to the entire student body, administering the school photo identification security program, and assisting the administrative assistant principal when needed.

Paraprofessional

12/1996 – 9/2001

New York City Board of Education – Richmond Hill High School

Supervisor: [REDACTED]

Assisted classroom teachers in the education of children in the area of Social Studies. Additional responsibilities include: computer work, organizing curriculum, and tutoring children.

Education:

Boricua College, Brooklyn, New York

Bachelor of Science – Business Administration, December, 2000

GPA of 3.70

Richmond Hill High School, Queens, New York

Regents Endorsed Diploma, June, 1991

Federal Law Enforcement Training Center

United States Customs Academy – Integrated Police Course – January – March, 2002

Certifications:

National Emergency Training Center - Federal Emergency Management Agency

Master Exercise Practitioner – September, 2017

Emergency Management Institute - Federal Emergency Management Agency

Master Exercise Practitioner Capstone – September, 2017

Emergency Management Institute - Federal Emergency Management Agency

Operations-Based Exercise Design & Evaluation – August, 2017

Emergency Management Institute - Federal Emergency Management Agency

IS-00120.a – An Introduction to Exercise – July, 2017

Emergency Management Institute - Federal Emergency Management Agency

Homeland Security Exercise Evaluation Program – July, 2017

Emergency Management Institute - Federal Emergency Management Agency

Incident Command System (ICS) 100, 120.a, 130, 230.d, 235.c, 300, 400, 700, 775, 800

U.S. Customs and Border Protection – Advanced Training Center

Collateral Duty Safety Officer (CDSO) – May, 2019

New York State Department of Health

Emergency Medical Technician, 2012 – Present

Awards and Recognition:

Boy Scouts of America: Eagle Scout Award - September, 1991
CBP Cash Awards, Day Off Awards and Outstanding Performance Ratings - 2001 to present
Fifteen Years of Service to U.S. Government – December, 2016
Forest Hills Volunteer Ambulance Corps: Multiple Awards and Recognition – 1993 to present

Other:

New York State Notary Public
New York City Marriage Officiant
Secret Security Clearance
Forest Hills Volunteer Ambulance Corps, President & Vice-President: 2010-Present
New York City Police Department, Auxiliary Police Officer, Sergeant, Lieutenant: 1991-2008

References:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

**New York State Department of Health
EMT Certification - Search Results Screen
EMT Detail Information Screen
EMT: WOLFE, ALAN**

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EMT Number		
Last Name	First Name	Middle Initial
City	State	Zip
County		
Status Description	Certification Expiration Date	Exam Level
357972		
WOLFE	ALAN	
HOWARD BEACH	NY	11414
QUEENS		
Status OK	06/30/2024	Emergency Medical Technician (EMT)
357972		
Status OK	06/30/2021	Emergency Medical Technician (EMT)

RETURN

Affirmation of Fitness and Competency

By completing this form, you are aware that the NYS Department of Health will be conducting a detailed background review in order to determine fitness and competency in accordance with Article 30 of the NYS Public Health Law.

FOREST HILLS VOLUNTEER AMBULANCE CORPS, INC.

7347

Name of EMS Agency

NYS EMS Agency Code

FOREST HILLS VOLUNTEER AMBULANCE CORPS, INC.

Full Name of Corporate Entity requiring F&C review as a new owner/operator

ROY RENNA

CAPTAIN / COO

Full Name of Individual

Title

92-29 METROPOLITAN AVENUE

Address of the Individual or Corporate Entity requiring F&C review as a new owner/operator

Social Security Number (this is not releasable under the provisions of FOIL)

Date of Birth

As the proposed new owner/operator of an EMS agency, I hereby certify that I am or have been a director, sponsor, principal stock holder, operator or operations manager of one or more of the following in the past 10 years (Article 30 §3005(5)).

YES NO

- ☒ ☐ Emergency Medical Service certified by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Hospital, long term care facility or other Article 28 facility licensed by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Invalid coach (Ambulette) Service authorized by the NYS Department of Transportation or equivalent in any other state.
- ☐ ☒ Home or residence licensed by NYS or equivalent in any other state.
- ☐ ☒ Halfway house, hostel or residential facility or institution licensed by, or subject to the rules of the NYS Office of Mental Health (OMH) or Office of Mental Retardation and Developmental Disabilities (OMRDD), or equivalent in any other state.

→ If NO has been marked for all of the above, it indicates that there is no history of operating an entity identified in NYS Public Health Law; signing this affirmation is informational only and a testimony to the accuracy of the information provided.

→ If YES has been marked for any of the above, on an attached page, please provide the following information for each:

- Name of agency or facility
- Mailing address of facility or agency
- Name of Certifying or Licensing authority
- If applicable, a copy of license, certificate or identification number
- Individual position(s) held with start and end dates

REQUIRED ATTACHMENTS TO THIS AFFIRMATION

- Current resume or curriculum vitae
- Copies of any related licenses and certifications
- Listing of address of residence, or if less than 2 years, addresses of prior residences

Certification of Competency

By completing and signing this affirmation, I certify that I have operated all of the agencies indicated, in compliance with all applicable statutes, rules, regulations and policies, specifically 10 NYCRR800.

Further, I certify that there have been no administrative orders issued by any Federal, State or local agency for matters that are or were recurrent or uncorrected, or dealt with patient harm or neglect in accordance with NYS Public Health Law during my tenure as a director, sponsor, principal, stock holder, operator or operations manager.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of competency.

ROY RENNA

Full Name

ROY RENNA
Signature

12-09-2020
Date

Certification of Fitness

By completing and signing this affirmation, I certify that I have not been convicted of any crime at anytime, involving murder, manslaughter, assault, sexual abuse, theft, robbery, drug abuse, or sale of drugs, nor have I pleaded nolo contendere to a felony charge relating to any of these offenses.

Further, I certify that, I am not, or was not subject to a state or federal administrative order relating to fraud, embezzlement or patient harm, including, but not limited to actions involving Medicare and or Medicaid.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of fitness.

ROY RENNA

Full Name

ROY RENNA
Signature

12-09-2020
Date

Notary Public Affirmation and Acknowledgement

AVIV CITRON

Notary Public Name

Aviv S. Citron
Signature

12/09/2020
Date

Aviv S. Citron
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01C16261778
Qualified in Queens County
Commission Expires May 14, 2024

Please affix Notary Public Stamp or equivalent.

Roy P. Renna, NYS EMT-B 351944, NYC EMT-B 7530

[REDACTED]

OBJECTIVE: To obtain a starting position utilizing my experiences listed below.

WORK HISTORY:

02/20 - Current: Jamaica Hospital Medical Center, 89-00 Van Wyck Expressway, Richmond Hill, NY 11418

- ****Per-Diem Employment****
- New York City 911 Division Emergency Medical Technician
- Provided Pre Hospital care to the sick and injured
- Completed patient care reports utilizing a laptop and other electronic devices
- Operated emergency vehicles in a safe and efficient manner
- Utilized Two-Way Radio equipment to communicate

12/19 - Current: Regional EMS Council of New York City (NYC REMSCO), 475 Riverside Drive, New York, NY 10115

- Site Supervisor
- Health Care Screener, SARS-CoV-2 (covid19)
- Completed time sensitive reports for numerous U.S. Government Agencies (CDC, CWMD, CBP)
- Completed required Personal Protection Training
- Ensured staff members followed rules and regulations implemented by NYC REMSCO

08/18 - Current: Aura Prep (Rescue Training Institute), PO BOX 1842, Garden City, New York 11530

- ****Per-Diem Employment****
- Provided Medical treatment at Junior High School & High School sporting events
- Completed patient care reports
- Emergency Medical Technician
- NYS DOH Practical Skills Administrator Intern

07/17 - Current: AG Security Group, 66-85 73rd Place, Middle Village, New York 11379

- ****Per-Diem Employment****
- Provided crowd control & assisted with medical emergencies
- Conducted searches using a portable Metal Detector at venues
- Provided conflict resolution when disputes aroused
- Uniform, executive, and plainclothes patrol
- Mobile Patrol using a company vehicle

06/13 - Current: New York Presbyterian Hospital, 525 E 68th Street, Manhattan, New York 10065

- ****Full-Time Employment****
- New York City 911 Division Emergency Medical Technician
- Provided Pre Hospital care to the sick and injured
- Completed patient care reports utilizing a laptop and other electronic devices
- Operated emergency vehicles in a safe and efficient manner
- Dignitary medical team for high profile diplomats visiting from abroad
- Utilized Two-Way Radio equipment to communicate

11/06 - Current: Forest Hills Volunteer Ambulance Corps, 92-29 Metropolitan Avenue, Forest Hills, New York

- Captain of Operations / Chief Operating Officer
- ePCR Coordinator (Ensuring the agency is in compliance with NEMSIS version 3.4.0)
- Implemented and successfully started the ePCR system (Stryker Mobile Touch)
- Emergency Medical Technician
- NYS Dept Of Health Liaison
- Quality Assurance / Quality Improvement Officer

04/17 – 12/19: Medcor, 4805 Prime Parkway, McHenry, IL 60050

- Pre Hospital Care to the sick and injured person on numerous construction site.
- Conducted field blood alcohol test with a portable breathalyzer certified by LifeLoc Technologies Inc, on the Phoenix 6.0 device
- Conducted urine analysis with a multiple panel testing device certified by Quest Diagnostics
- Utilized Two-Way Radio equipment to communicate

07/12 - 06/13 New York Downtown Hospital, 170 Williams Street, Manhattan, New York 10038

- New York City 911 Division Emergency Medical Technician
- Provided Pre Hospital care to the sick and injured
- Completed patient care reports utilizing a laptop and other electronic devices
- Operated emergency vehicles in a safe and efficient manner
- Utilized Two-Way Radio equipment to communicate

02/08-06/12 American Medical Response, 930 Flushing Avenue, Brooklyn, New York 11206

- New York City 911 Division Emergency Medical Technician
- Operated emergency vehicles in a safe and efficient manner
- Special Events Division Emergency Medical Technician
- Member of the Disaster Response Team contracted with FEMA
- In-house Emergency Vehicle Operator Instructor
- Field Training Officer for the New York City 911 Division
- Utilized Two-Way Radio equipment to communicate

02/01-02/08 Knight's Collision Experts Inc., 2000 Eastern Parkway, Brooklyn, New York

- Light & Medium duty Tow Specialist within the NYC arterial tow program
- Responded emergently to vehicle accidents and stranded motorist upon being requested
- by the New York City Police Department or Department of Transportation
- Provided customer service and assisted individuals with insurance claims

Education:

Western Queens Emergency Medical Training Institute, Floral Park, New York 11002

- NYS DOH EMT-B Original (08/2007) (78%)
- NYS DOH EMT-B Rectification (03/2010) (83%)
- NYS DOH EMT-B Rectification (05/2013) (National Standards) (86%)

New York Presbyterian Training Center, 525 E68th Street, New York, NY 10065

- NYS DOH EMT-B Rectification (05/2016) (No Score, CME Base)
- NYS DOH EMT-B Rectification (03/2019) (No Score, CME Base)
- American Red Cross CPR / AED for the BLS Provider
- NAEMT, Tactical Combat Casualty Care (TCCC)
- NAEMT, Pre-Hospital Trauma Life Support (PHTLS)
- NAEMT, Advance Medical Life Support (AMLS)
- NAEMT, Geriatric EMS (GEMS)
- NAEMT, Emergency Pediatric Care (EPC)
- NAMET, Emergency Medical Services Safety
- Coaching Emergency Vehicle Operator (CEVO 3)
- Emergency Vehicle Operations Course (EVOC, Texas A&M Engineering Services)
- Incident Response to Terrorist Bombings Awareness Level Training

Benjamin Franklin Private High School, 2715 Tigertail Avenue, Coconut Grove, Florida 33133

- High School Diploma, Accredited by the American Council on Private Schools

FEMA Emergency Management Institute, 16825 S Seton Avenue, Emmitsburg, MD 21727

- FEMA IS-1 Emergency program manager
- FEMA IS-5a Introduction to hazardous materials
- FEMA IS-15b Special events contingency planning for public safety agencies
- FEMA IS-139 Emergency exercise planning
- AWR-160 & Refreshed 10/2019 Weapons of Mass Destruction Awareness
- FEMA ICS-100b & 100c Incident command system
- FEMA ICS-100Le Incident command system for law enforcement
- FEMA ICS 100hcb Incident command system for healthcare facilities
- FEMA ICS-200b & 200c Single resources and initial actions incidents
- FEMA ICS-200HCB Initial action incidents for healthcare facilities
- FEMA ICS-700 & 700b National incident management system
- FEMA ICS-800b & 800c National response framework
- FEMA ICS-801 Emergency support function, Transportation
- FEMA ICS-808 Emergency support function public health & medical service
- FEMA ICS-809 Emergency support function, search & rescue
- FEMA ICS-813 Emergency support function, public safety & security
- FEMA IS-907 Active shooter situation
- FEMA CBRNE Standard Awareness

EMS Additional Training:

- AHA ACLS (Advanced Cardiovascular Life Support)
- AHA Heartsaver CPR / AED
- AHA Basic Life Support CPR / AED
- 2019 NYS Department of Health Protocol update
- NYC S-Lam Stroke update
- NYC Administration of Intramuscular Epinephrine update
- NYS DOH Narcan administration
- NYC Department of Health Opioid Overdose Prevention Administrator
- NYS Mandated Reporter Training
- 2019 NYC Remsco BLS Protocol

Awards and Achievements:

- New York City Police Department Auxiliary Police Officer Basic Course (1997-1999)
- New York City Police Department Auxiliary Police Merit (1997)
- New York State Senate personal legislative resolution for a heroic act (2007-2008 # J02431)
- EMS Courage and Valor
- Pre-Hospital save commendations issued by the New York City Fire Department (Numerous)
- NYC Council Emergency Medical Services Unit citation
- American Ambulance Association Star of Life (2012)

Current Credentials & Licenses:

- NYS Enhanced Class C NON-Commercial Driver's License
- NYS Armed Security Guard License
- NYS Armored Car Guard License
- TWIC (Transportation Workers Identification Card)
- SWAC (Secure Workers Access Consortium)
- NYS Department of Health Emergency Medical Technician Certification
- New York City Department of Consumer Affairs Tow Truck Operators License
- New York City Police Department Rifle / Shotgun permit
- New York City Police Department Residential Pistol permit
- OSHA 30 Hour Construction Safety & Health
- OSHA 10 Hour Construction
- FAA Part 107, Small Unmanned Aircraft Operator
- FCC General Mobile Radio Service License (GMRS)
- New York State Approved, Defensive Drivers Certificate

<https://www.courts.mt.gov/15-1078.html>

[REDACTED]

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[REDACTED]

[REDACTED]

New York State Department of Health
Bureau of Emergency Medical Services

Certificate No. 351344 Expiration: 12/31/2022

ROY P. REINA

Registered by the following:

EMT-BASIC

Howard A. Zucker, M.D., J.D.

Commissioner of Health

Ryan P. Greenberg

Director

**New York State Department of Health
EMT Certification - Search Results Screen
EMT Detail Information Screen
EMT: RENNA , ROY P**

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EMT Number		
Last Name	First Name	Middle Initial
City	State	Zip
County		
Status Description	Certification Expiration Date	Exam Level
351944		
RENNA	ROY	P
MASPETH	NY	11378
QUEENS		
Status OK	12/31/2023	Emergency Medical Technician (EMT)
351944		
Status OK	12/31/2020	Emergency Medical Technician (EMT)

[RETURN](#)

Affirmation of Fitness and Competency

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FOREST HILLS VOLUNTEER AMBULANCE CORPS, INC.

7347

Name of EMS Agency

NYS EMS Agency Code

FOREST HILLS VOLUNTEER AMBULANCE CORPS, INC.

Full Name of Corporate Entity requiring F&C review as a new owner/operator

ANTHONY BU

LIEUTENANT

Full Name of Individual

Title

92-29 METROPOLITAN AVENUE

Address of the Individual or Corporate Entity requiring F&C review as a new owner/operator

Social Security Number (this is not releasable under the provisions of FOIL)

Date of Birth

As the proposed new owner/operator of an EMS agency, I hereby certify that I am or have been a director, sponsor, principal stockholder, operator or operations manager of one or more of the following in the past 10 years (Article 30 §3005(5)).

YES NO

- ☒ ☐ Emergency Medical Service certified by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Hospital, long term care facility or other Article 28 facility licensed by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Invalid coach (Ambulette) Service authorized by the NYS Department of Transportation or equivalent in any other state.
- ☐ ☒ Home or residence licensed by NYS or equivalent in any other state.
- ☐ ☒ Halfway house, hostel or residential facility or institution licensed by, or subject to the rules of the NYS Office of Mental Health (OMH) or Office of Mental Retardation and Developmental Disabilities (OMRDD), or equivalent in any other state.

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- Mailing address of facility or agency
- Name of Certifying or Licensing authority
- If applicable, a copy of license, certificate or identification number
- Individual position(s) held with start and end dates

REQUIRED ATTACHMENTS TO THIS AFFIRMATION

- Current resume or curriculum vitae
- Copies of any related licenses and certifications
- Listing of address of residence, or if less than 2 years, addresses of prior residences.

Certification of Competency

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Further, I certify that there have been no administrative orders issued by any Federal, State or local agency for matters that are or were recurrent or uncorrected, or dealt with patient harm or neglect in accordance with NYS Public Health Law during my tenure as a director, sponsor, principal, stock holder, operator or operations manager.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of competency.

ANTHONY BU

Full Name

Signature

Date

Certification of Fitness

By completing and signing this affirmation, I certify that I have not been convicted of any crime at anytime, involving murder, manslaughter, assault, sexual abuse, theft, robbery, drug abuse, or sale of drugs, nor have I pleaded nolo contendere to a felony charge relating to any of these offenses.

Further, I certify that, I am not, or was not subject to a state or federal administrative order relating to fraud, embezzlement or patient harm, including, but not limited to actions involving Medicare and or Medicaid.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of fitness.

ANTHONY BU

Full Name

Signature

Date

Notary Public Affirmation and Acknowledgement

Notary Public Name

Signature

Date

Aviv S. Citron
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01C18261778
Qualified in Queens County
Commission Expires May 14, 2024

Please affix Notary Public Stamp or equivalent.

PROFESSIONAL SUMMARY

Versatile and experienced, I bring both technical and leadership expertise to the table. With over 10 years of demonstrated success in software engineering roles, I offer a hands-on approach to complex projects. This allows me to provide direct guidance to developers while maintaining a strategic outlook.

My coworkers know me as a dynamic and motivated leader, one who integrates the input of both technical and business teams during planning and development. I excel in roles which require me to build consensus with key stakeholders.

SKILLS

Leading Technology Initiatives
Data and Analytics Strategy
Leadership and People Development

Product Lifecycle Management
Experienced with Multiple Computer Languages
Certified Scrum Master

WORK HISTORY

Converseon, New York, NY

May. 2015 ~ Present

Director of Engineering (Python, Django, SQL, Machine Learning, NLP, AWS, DevOps, Git, Jenkins, Kubernetes, SOC 2)

- Established the SaaS business line, set vision and roadmap in alignment with CTO and CEO. Built organization from ground-up.
- Led and managed R&D portfolios to address business needs on products and offerings. Establish initiatives to build long-term differentiation.
- Identified company-wide opportunities and recommend technology strategies, achieving >5x+ ROI.
- Researched different machine learning implementations, continues seeking to increase performance and scalability of in-house NLP pipeline.
- Worked with Amazon Web Services (AWS), build company private computing cloud infrastructure. Made sure the networking, computing, and data warehouse is efficient, secure, and scalable.
- Led DevOps effort, designed system architecture, implemented continuous integration with Jenkins, multiple availability zones load balancing and failover, automatic deployment and horizontal scaling with Kubernetes.
- As full stack developer, worked with machine learning toolkits, in house and third-party APIs, moved large amount of social media data for natural language processing and analysis.
- Participated in front-end UI/UX design and implementation. Worked with D3.js and Tableau for visualization.
- Held training sessions for internal teams, taught Python programming and data analysis.

Lightcrest, Los Angeles, CA

Nov. 2014 ~ May 2015

Senior Software Engineer - Contractor (Python, Django, SQL, Open Stack)

- Worked as full stack developer, designed and implemented system to manage user credentials, storage resources, billing and payment information, support tickets, and on-demand private clouds.
- Integrated payment gateway (Braintree), helpdesk ticketing system (Zendesk), and invoicing system (Fresh Books) through 3rd party APIs.
- Designed and documented customer-facing native and REST APIs.
- Actively contributed in bug fixes and code enhancements for upstream projects in GitHub.
- Participated in front-end UI/UX design and implementation.

Advent Capital Management, New York, NY

Jul. 2014 ~ Oct. 2014

System Developer (Python, Django, SQL Server, SQLite)

- Analyzed existing systems, documented all functions and procedures, and fixed critical bugs.

Anthony Bu

anthonybu.work@gmail.com

+1-917-292-7007(c)

- Worked closely with end user, analyzed business needs, and wrote technical requirements.
- Worked as architect; designed data structures based on business logics.
- Implemented dynamic process loading to maximize user flexibility.
- Designed and implemented AI with self-learning, reduced the need for human intervention.
- Set up and managed Django application server with Apache backend. Set up and managed subversion server for the company. Designed and enforced test and deployment workflow.

Bank of America Merrill Lynch, Metropolitan New York City
Application Developer (Java, Python, Oracle, Sybase, XML, TIBCO)

Feb. 2011 ~ Jul. 2014

- Worked in scrum team, designed and implemented algorithms for settlement platform using Python and in house object oriented database. Worked closely with FXO traders.
- Worked on real-time, low latency (100 ms) data acquisition and delivery system with Java.
- Worked with high volume (500K/day) MQ messaging system, providing reference data for the whole firm.
- Involved with large scale system acquisition and migration projects for both code bases and data sets.
- Developed large scale, performance critical, applications utilizing Java and TIBCO Business Works.

City University of New York, New York, NY
Internship - Application Developer (C#, Ajax, SQL server, Oracle)

Jan. 2009 ~ Sep. 2009

- Developed and maintained student management applications utilizing ASP.NET, Telerik Controls, XML, JavaScript/Ajax under Windows Server, SQL Server, Oracle environment.
- Designed and developed websites for the university using PHP, Apache Webserver.

EDUCATION

St. John's University, New York, NY
MBA in Decision Science, Dec. 2010

Saint John's University, Collegeville, MN
Bachelor in Computer Science, Dec. 2006

ADDITIONAL CURRICULUM

- **Multilingual**
- **NYS EMT-B, Private Pilot Class III, Licensed HAM Radio Operator**
- **Volunteer: Income Tax Preparer (IRS SPEC)**
Forest Hills Volunteer Ambulance Corps (EMT, driver, treasurer)
American Red Cross, greater New York region (EMT, driver)

2004 ~ 2009

Dec. 2013 ~ Present

Mar. 2017 ~ Present

**New York State Department of Health
EMT Certification - Search Results Screen
EMT Detail Information Screen
EMT: BU , ANTHONY YAOYAO**

[Print Page](#)[RETURN](#)

EMT Number		
Last Name	First Name	Middle Initial
City	State	Zip
County		
Status Description	Certification Expiration Date	Exam Level
427828		
BU	ANTHONY YAOYAO	
FOREST HILLS	NY	11375
QUEENS		
Status OK	04/30/2022	Emergency Medical Technician (EMT)

[RETURN](#)

Congratulations!

You have achieved certification as a New York State Emergency Medical Technician or Certified First Responder. Attached is your proof of certification and your course completion certificate. Please carefully cut out your wallet card and wall certificate. We suggest that you sign the back and laminate your proof of certification. The results of your examination are on the back of the course completion certificate.

Please note the date of expiration indicated on the wallet card.

*New York State Department of Health
Bureau of Emergency Medical Services*

ANTHONY YAOYAO BU

*has completed certification course
for the level of*

EMT - BASIC

Course Number: 188064

Issue Date: 3/15/2018

ID Number: 427828

Andrew G. Johnson

Andrew G. Johnson, Acting Director
Bureau of Emergency Medical Services

DOH-3815 (5/2014)



New York State Department of Health
Bureau of Emergency Medical Services

Certificate No.: 427828 Expiration: 4/30/2021

ANTHONY YAOYAO BU

EMT - BASIC

Howard A. Zucker, M.D., J.D.
Commissioner of Health

Andrew G. Johnson
Acting Director

DOH-3815 (5/2014)

Affirmation of Fitness and Competency

By completing this form, you are aware that the NYS Department of Health will be conducting a detailed background review in order to determine fitness and competency in accordance with Article 30 of the NYS Public Health Law.

FOREST HILLS VOLUNTEER AMBULANCE CORPS, INC.

7347

Name of EMS Agency

NYS EMS Agency Code

FOREST HILLS VOLUNTEER AMBULANCE CORPS, INC.

Full Name of Corporate Entity requiring F&C review as a new owner/operator

KYLE MARRIELLO

LIEUTENANT

Full Name of Individual

Title

92-29 METROPOLITAN AVENUE

Address of the Individual or Corporate Entity requiring F&C review as a new owner/operator

Social Security Number (this is not releasable under the provisions of FOIL)

Date of Birth

As the proposed new owner/operator of an EMS agency, I hereby certify that I am or have been a director, sponsor, principal, stockholder, operator or operations manager of one or more of the following in the past 10 years (Article 30 § 3005(5)):

YES NO

- ☒ ☐ Emergency Medical Service certified by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Hospital, long term care facility or other Article 28 facility licensed by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Invalid coach (Ambulette) Service authorized by the NYS Department of Transportation or equivalent in any other state.
- ☐ ☒ Home or residence licensed by NYS or equivalent in any other state.
- ☐ ☒ Halfway house, hostel or residential facility or institution licensed by, or subject to the rules of the NYS Office of Mental Health (OMH) or Office of Mental Retardation and Developmental Disabilities (OMRDD), or equivalent in any other state.

→ If NO has been marked for all of the above, it indicates that there is no history of operating an entity identified in NYS Public Health Law; signing this affirmation is informational only and a testimony to the accuracy of the information provided.

→ If YES has been marked for any of the above, on an attached page, please provide the following information for each:

- Name of agency or facility
- Mailing address of facility or agency
- Name of Certifying or Licensing authority
- If applicable, a copy of license, certificate or identification number
- Individual position(s) held with start and end dates

REQUIRED ATTACHMENTS TO THIS AFFIRMATION

- Current resume or curriculum vitae
- Copies of any related licenses and certifications
- Listing of address of residence, or if less than 2 years, addresses of prior residences

Certification of Competency

By completing and signing this affirmation, I certify that I have operated all of the agencies indicated, in compliance with all applicable statutes, rules, regulations and policies, specifically 10 NYCRR800.

Further, I certify that there have been no administrative orders issued by any Federal, State or local agency for matters that are or were recurrent or uncorrected, or dealt with patient harm or neglect in accordance with NYS Public Health Law during my tenure as a director, sponsor, principal, stock holder, operator or operations manager.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of competency.

KYLE MARRIELLO

Full Name

Signature

Date

Certification of Fitness

By completing and signing this affirmation, I certify that I have not been convicted of any crime at anytime, involving murder, manslaughter, assault, sexual abuse, theft, robbery, drug abuse, or sale of drugs, nor have I pleaded nolo contendere to a felony charge relating to any of these offenses.

Further, I certify that, I am not, or was not subject to a state or federal administrative order relating to fraud, embezzlement or patient harm, including, but not limited to actions involving Medicare and or Medicaid.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of fitness.

KYLE MARRIELLO

Full Name

Signature

Date

Notary Public Affirmation and Acknowledgement

Notary Public Name

Signature

Date



Please affix Notary Public Stamp or equivalent.

New York State Department of Health	
Bureau of Emergency Medical Services	
Certificate No. 444949	Expiration 2/28/2023
KYLE P. MARRIELLO	
is hereby certified as an	
EMT-BASIC	
Howard A. Zucker, M.D., JD.	Ryan P. Greenberg
Commissioner of Health	Director

**New York State Department of Health
EMT Certification - Search Results Screen
EMT Detail Information Screen
EMT: MARRIELLO , KYLE P**

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EMT Number		
Last Name	First Name	Middle Initial
City	State	Zip
County		
Status Description	Certification Expiration Date	Exam Level
444949		
MARRIELLO	KYLE	P
GLENDAL	NY	11385
QUEENS		
Status OK	02/28/2024	Emergency Medical Technician (EMT)
444949		
Status OK	01/31/2021	Emergency Medical Technician (EMT)

[RETURN](#)

Kyle Marriello



Kmarriello@gmail.com

OBJECTIVE

To obtain a position where I am able to utilize my emergency service knowledge to advance as a team member and enhance my skills.

EDUCATION

St. John's University, Flushing, NY December 2016 Emergency Medical Technician

Saint Paul's School of Nursing, Rego Park, NY February 2013 Associate Degree Occupational Studies, Medical Assisting,

CERTIFICATION/ LICENSES

MOLST May 2017 CEVO 4(Coaching Emergency Vehicle Operator)
May 2017 EVOC (Emergency Vehicle Operator Course) February 2017
New York State Emergency Medical Technician December. 2016
Basic Life Support (BLS Provider) September 2016
OSHA August 2015 Transit Worker Identification Card(TWIC)
February 2015 New York State Driver's License Exp 2019
FEMA IS-100,IS-005,IS-700,IS-200,IS-800 September 2016

EXTERNSHIP EXPERIENCE

Flushing Hospital Medical Center October 2016 Student EMT

- Assisted with patient care
- Triage patients enroute to hospital
- Communicated with hospital staff for patient care

Dr. Rosman, Forest Hills, NY December 2012-February 2013 Medical Assistant Extern

- Assisted patients with recording glucose readings
- Entered information into computer-based patient medical records
- Scheduled appointments and answered phones
- Assisted with urinalysis testing

WORK EXPERIENCE

Fire Department of New York City

February 2019- Present

911 Emergency Medical Technician

- Collecting patient medical information
- Transports patient with medical emergency to the hospital
- Communicate with hospital about the patient's care

Jamaica Hospital Medical Center

May 2018-Present

911 Emergency Medical Technician

- Collecting patient medical information
- Transports patient with medical emergency to the hospital
- Communicate with hospital about the patient's care

ParaDocs Event EMS

September 2017

Emergency Medical Technician

- Collecting patient medical information
- Triage patient for medical needs
- Assisting with onsite treatments

Senior Care EMS May 2017- Present Emergency Medical Technician/Logistics

- Collecting patient medical information
- Transports patient to and from their house and hospital or dialysis clinics
- Communicate with hospital and clinic staff about the patient's care

Midwood Ambulance & Oxygen Service January 2017-May 2017 Emergency Medical Technician

- Collecting patient medical information
- Transports patient to and from their house and hospital or dialysis clinics
- Communicate with hospital and clinic staff about the patient's care

Stellae International Inc, Lake Success, NY September 2015- January 2017 Warehouse Associate

- Stocking merchandise
- Receiving and allocating new merchandise
- Retrieving merchandise to ship out to customers

Keaveny Electric, Jamaica, NY February 2015-August 2015 Helper/ Electrician Assistant

- Assisting with the running of power lines
- Carrying and moving wires, pipes and other equipment needed
- Learning how to wire outlets and fuse panel

Sound Connection DJ August 2011-February 2015 DJ/Roadie/Sales Associate

- Helping clients planning and envision their wedding day
- Setting up and taking down all equipment at event
- Playing the music to help guest enjoy the event

Regal Entertainment Group May 2008-August 2011 Box office/Concession/Floor/Maintenance

- Selling of the tickets, food, drinks and snacks for the movies
- Cleaning and prepping theaters for guest
- Building maintenance from fixing seats to painting walls

ACTIVITIES

Forest Hills Volunteer Ambulance Corps, 2016-Present
Volunteered with New York Cares, 2009 – 2010

Affirmation of Fitness and Competency

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FOREST HILLS VOLUNTEER AMBULANCE CORPS, INC.

7347

Name of EMS Agency

NYS EMS Agency Code

FOREST HILLS VOLUNTEER AMBULANCE CORPS, INC.

Full Name of Corporate Entity requiring F&C review as a new owner/operator

RAFAEL ARANBAYEV

SECRETARY

Full Name of Individual

Title

92-29 METROPOLITAN AVENUE

Address of the Individual or Corporate Entity requiring F&C review as a new owner/operator

Social Security Number (this is not releasable under the provisions of FOIL)

Date of Birth

As the proposed new owner/operator of an EMS agency, I hereby certify that I am or have been a director, sponsor, principal, stock holder, operator or operations manager of one or more of the following in the past 10 years (Article 30 §3005[5]).

YES NO

- ☒ ☐ Emergency Medical Service certified by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Hospital, long term care facility or other Article 28 facility licensed by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Invalid coach (Ambulette) Service authorized by the NYS Department of Transportation or equivalent in any other state.
- ☐ ☒ Home or residence licensed by NYS or equivalent in any other state.
- ☐ ☒ Halfway house, hostel or residential facility or institution licensed by, or subject to the rules of the NYS Office of Mental Health (OMH) or Office of Mental Retardation and Developmental Disabilities (OMRDD), or equivalent in any other state.

→ If **NO** has been marked for all of the above, it indicates that there is no history of operating an entity identified in NYS Public Health Law; signing this affirmation is informational only and a testimony to the accuracy of the information provided.

→ If **YES** has been marked for any of the above, on an attached page, please provide the following information for each:

- Name of agency or facility
- Mailing address of facility or agency
- Name of Certifying or Licensing authority
- If applicable, a copy of license, certificate or identification number
- Individual position(s) held with start and end dates

REQUIRED ATTACHMENTS TO THIS AFFIRMATION

- Current resume or curriculum vitae
- Copies of any related licenses and certifications
- Listing of address of residence, or if less than 2 years, addresses of prior residences.

Certification of Competency

By completing and signing this affirmation, I certify that I have operated all of the agencies indicated, in compliance with all applicable statutes, rules, regulations and policies, specifically 10 NYCRR800.

Further, I certify that there have been no administrative orders issued by any Federal, State or local agency for matters that are or were recurrent or uncorrected, or dealt with patient harm or neglect in accordance with NYS Public Health Law during my tenure as a director, sponsor, principal, stock holder, operator or operations manager.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of competency.

RAFAEL ARANBAYEV

Full Name

Signature

Date

01/18/2021

Certification of Fitness

By completing and signing this affirmation, I certify that I have not been convicted of any crime at anytime, involving murder, manslaughter, assault, sexual abuse, theft, robbery, drug abuse, or sale of drugs, nor have I pleaded nolo contendere to a felony charge relating to any of these offenses.

Further, I certify that, I am not, or was not subject to a state or federal administrative order relating to fraud, embezzlement or patient harm, including, but not limited to actions involving Medicare and or Medicaid.

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RAFAEL ARANBAYEV

Full Name

Signature

Date

01/18/2021

Notary Public Affirmation and Acknowledgement

AVIV CITRON

Notary Public Name

Signature

Date

01/18/2021

Aviv S. Citron
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01C16261778
Qualified in Queens County
Commission Expires May 14, 2024

Please affix Notary Public Stamp or equivalent.

**New York State Department of Health
Bureau of Emergency Medical Services**

Certificate No.: **338997** Expiration: **10/31/2022**

RAFAEL ARANBAYEV

is hereby certified as an

EMT - BASIC

Howard A. Zucker, M.D., J.D.

Commissioner of Health

Ryan P. Greenberg

Director

New York State Department of Health
EMT Certification - Search Results Screen
EMT Detail Information Screen
EMT: ARANBAYEV , RAFAEL

[Print Page](#)[RETURN](#)

EMT Number		
Last Name	First Name	Middle Initial
City	State	Zip
County		
Status Description	Certification Expiration Date	Exam Level
338997		
ARANBAYEV	RAFAEL	
FOREST HILLS	NY	11375
QUEENS		
Status OK	10/31/2023	Emergency Medical Technician (EMT)

[RETURN](#)

Rafael Aranbayev

Bima55@hotmail.com

Objective: To bring to your organization enthusiasm, dedication, responsibility, and good work ethic,
Combined with a desire to utilize my skills obtained through experience in the following areas:

Experience:

Aug. 98 - Present YM & YMHA: Health & Fitness Supervisor

- Security / CCTV Monitoring / Status Verification / Access Control
- Deter / Detect / Fire Safety / CPR, First Aid
- Customer Service Relations / Conflict Resolution

Aug. 12- Present CSC SECURITY: Per Diem Event Security Guard

- US OPEN: ON COURT SECURITY
- VIP / PLAYER ESCORT

Feb. 03 -Present BAGELICIOUS: Store Manager

- Run day to day operations, Loss Prevention, Customer service
- Organization and Buying of Merchandise, Inventory Control

Jun.13- Sep.13 NYC TAXI & LIMOUSINE COMISSION [USB DIVISON]: OFFICER/CADET

- John Jay PEACE OFFICER Training
- EEO / Verbal Judo
- Studied; Enforcement, Issuing of summonses for non-conformance or non-compliance rules, regulations, related laws, codes, Detain / Arrest Procedure

Volunteer Experience:

Jan. 05- Present FOREST HILLS VOLUNTEER AMBULANCE CORPS: EMT-B/ Driver/ Secretary/ Chairman; Auditing, By-Laws, Membership, Grievance, Good and Welfare

- Emergency Medical Technician, Dispatcher, CEVO, First Aid, CPR and AED

Oct. 08- Present OFFICE OF EMERGENCY MANAGEMENT: CERT Volunteer

- Community Outreach / Disaster Prevention and Preparedness
- Light Search & Rescue / Fire Safety / Medical Ops

May.01- Aug. 06 NYPD 112PRECINCT: Auxiliary Police Officer

- Prevented Crime, Auto Theft and Graffiti in the Community
- Car Patrol, Foot Patrol, Details and Canvassing of Precinct Boundaries

Education: YORK COLLEGE: Social Work / Psychology

- Perusing B.S. Degree, anticipated graduation 2019.

LAGUARDIA COMMUNITY COLLEGE: Human Services

- A.A.S. Degree in Human Services, Mental Health / Psychology 2001

Licenses:

- Certified Peace Officer / Municipal Police Training / Special Patrolman by NYPD
- Certified Food Handler by Department of Health & Mental Hygiene
- Certified EMT-B, CPR, First Aid and AED
- 8-Hours Security Guard Training, 16-Hours On-The-Job Training
- FDNY Certificate of Fitness: F-03, F-04
- NYS Driver License

Languages: Multilingual in English, Russian, light Spanish and Farsi

Affirmation of Fitness and Competency

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FOREST HILLS VOLUNTEER AMBULANCE CORPS, INC.

7347

Name of EMS Agency

NYS EMS Agency Code

FOREST HILLS VOLUNTEER AMBULANCE CORPS, INC.

Full Name of Corporate Entity requiring F&C review as a new owner/operator

MICHELLE HETTICH

TREASURER

Full Name of Individual

Title

92-29 METROPOLITAN AVENUE

Address of the Individual or Corporate Entity requiring F&C review as a new owner/operator

Social Security Number (this is not releasable under the provisions of FOIL)

Date of Birth

As the proposed new owner/operator of an EMS agency, I hereby certify that I am or have been a director, sponsor, principal stock holder, operator or operations manager of one or more of the following in the past 10 years (Article 30 § 3005(5)):

YES NO

- | | | |
|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Emergency Medical Service certified by the NYS Department of Health, or equivalent in any other state. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Hospital, long term care facility or other Article 28 facility licensed by the NYS Department of Health, or equivalent in any other state. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Invalid coach (Ambulette) Service authorized by the NYS Department of Transportation or equivalent in any other state. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Home or residence licensed by NYS or equivalent in any other state. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Halfway house, hostel or residential facility or institution licensed by, or subject to the rules of the NYS Office of Mental Health (OMH) or Office of Mental Retardation and Developmental Disabilities (OMRDD), or equivalent in any other state. |

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- Mailing address of facility or agency
- Name of Certifying or Licensing authority
- If applicable, a copy of license, certificate or identification number
- Individual position(s) held with start and end dates

REQUIRED ATTACHMENTS TO THIS AFFIRMATION

- Current resume or curriculum vitae
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- Listing of address of residence, or if less than 2 years, addresses of prior residences

Certification of Competency

By completing and signing this affirmation, I certify that I have operated all of the agencies indicated, in compliance with all applicable statutes, rules, regulations and policies, specifically 10 NYCRR800.

Further, I certify that there have been no administrative orders issued by any Federal, State or local agency for matters that are or were recurrent or uncorrected, or dealt with patient harm or neglect in accordance with NYS Public Health Law during my tenure as a director, sponsor, principal, stock holder, operator or operations manager.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of competency.

MICHELLE HETTICH

Full Name

Michelle Hettich
Signature

11/12/2020
Date

Certification of Fitness

By completing and signing this affirmation, I certify that I have not been convicted of any crime at anytime, involving murder, manslaughter, assault, sexual abuse, theft, robbery, drug abuse, or sale of drugs, nor have I pleaded nolo contendere to a felony charge relating to any of these offenses.

Further, I certify that, I am not, or was not subject to a state or federal administrative order relating to fraud, embezzlement or patient harm, including, but not limited to actions involving Medicare and or Medicaid.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of fitness.

MICHELLE HETTICH

Full Name

Michelle Hettich
Signature

11/12/2020
Date

Notary Public Affirmation and Acknowledgement

Aviv Citron
Notary Public Name

[Signature]
Signature

11/12/2020
Date

Aviv S. Citron
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01C16261778
Qualified in Queens County
Commission Expires May 14, 2024

Please affix Notary Public Stamp or equivalent.

Michelle Hettich

E-mail: Michellekm1981@yahoo.com

OBJECTIVE:

To obtain a challenging and rewarding position that utilizes my education, management skills, abilities and expertise.

EDUCATION:

St. John's University, Jamaica, New York
Bachelor of Arts in Psychology

COMPUTER SKILLS:

Proficient in Microsoft Word, Excel, PowerPoint, MISER, ABA, Cornerstone on Demand LMS, Internet Explorer, WebEx and Microsoft Outlook

PROFESSIONAL EXPERIENCE:

New York Community Bank, Hicksville, NY

April 2012 -- Present

Employee Development and Training Business Analyst

- Researches and analyzes business processes of various business units and recommends changes for process improvement
- Performs maintenance on the Learning Management System (LMS), such as adding new employees and maintaining existing employees
- Maintains LMS automated enrollments for annual required compliance training
- Creates, maintains and processes test scripts for core system front end testing
- Analyzes test results and reports findings to identified parties
- Reviews business objectives with internal clients in order to assess the effectiveness of training programs
- Stays abreast of changes in policies, procedures, and products in order to update assigned courses to ensure accuracy of both procedural and policy information
- Coordinates and participates in special projects as needed

New York Community Bank, Westbury, NY

June 2007 -- April 2012

Employee Development and Training Specialist Senior

- Effectively facilitated training courses at various locations that focus on the knowledge and skills of employees
- Conducted workshops and one-on-one coaching sessions on morale boosting programs that increased employee satisfaction and productivity
- Trained and motivated new team members by showing enthusiasm and dedication to job responsibilities
- Kept abreast of any changes in policies, procedures, and products in order to update assigned courses to ensure the accuracy of both procedural and policy information
- Tested the competency of employees and provided feedback to management, including evaluating, monitoring, and following up with employees
- Prepared all materials as it related to the course being conducted and ensured the assigned training facility was adequately supplied with training materials, neatly maintained and all equipment was in proper working order

Commerce Bank, East Meadow, NY

May 2006 -- June 2007

Branch Supervisor

- Supervised a staff of 18 employees and resolved any problems with staff and/or customers
- Directed, trained, and motivated staff to its fullest potential
- Performed Branch Manager responsibilities and participated in branch opening and closing security procedures
- Provided and analyzed financial transactions for customer accounts
- Conducted and performed monthly internal audits
- Participated in community events to position the bank as a leader within the community