



# Hamilton Paramedic Service Dedicated Ambulance Standby Request Form



|  |  |                     |                     |
|--|--|---------------------|---------------------|
| <b>Name of Company/Organization:</b>               |  |                     |                     |
| <b>Mailing Address:</b>                            |  |                     |                     |
| <b>City/Town:</b>                                  |  | <b>Prov:</b> ON     | <b>Postal Code:</b> |
| <b>Contact info</b>                                |  |                     |                     |
| <b>Name(s) of Organizer(s):</b>                    |  |                     |                     |
| <b>Phone Number:</b>                               |  | <b>Cell Number:</b> |                     |
| <b>Contact Number on day of event:</b>             |  |                     |                     |
| <b>Email:</b>                                      |  |                     |                     |
| <b>Fax Number:</b>                                 |  |                     |                     |
| <b>Billing Information if different than above</b> |  |                     |                     |

|  |   |                        |  |
|--|---|------------------------|--|
| <b>Event Details</b>   |   |                        |  |
| <b>Location/address of event:</b>                                    |   |                        |  |
| <b>Date(s) of event:</b>   |   | <b>Set-Up Time:</b>    |  |
| <b>Start Time(s):</b>  |   | <b>Finish Time(s):</b> |  |
| <b>Number of guests expected:</b>                                    |   |                        |  |
| <b>Briefly provide any special instructions for ambulance entry:</b> |   |                        |  |
| <b>Site map attached:</b>  | Yes <input type="checkbox"/> No <input type="checkbox"/>  |                        |  |
| <b>Any allied agencies attending:</b>                                | None <input type="checkbox"/> Police <input type="checkbox"/> Other EMS <input type="checkbox"/> Fire <input type="checkbox"/><br>if other EMS describe - |                        |  |
| <b>Any other details:</b>  |   |                        |  |

|                        |                          |                        |                          |
|------------------------|--------------------------|------------------------|--------------------------|
| <b>Event Type</b>      |                          |                        |                          |
| <b>Community Event</b> | <input type="checkbox"/> | <b>Political Event</b> | <input type="checkbox"/> |
| <b>Sporting Event</b>  | <input type="checkbox"/> | <b>Entertainment</b>   | <input type="checkbox"/> |
| <b>Training</b>        | <input type="checkbox"/> | <b>Other</b>           | <input type="checkbox"/> |

**Description of Standby Duty:**

*Please select the type of coverage that you would like for your event.*

|                          |   |
|--------------------------|---|
| <input type="checkbox"/> | #1) Hamilton Paramedic Service to provide Emergency Medical standby coverage with 2 paramedics and 1 transport Ambulance at a cost of \$246.90 per hour.            |
| <input type="checkbox"/> | #2) Hamilton Paramedic Service to provide Emergency Medical standby coverage with 1 First Response Unit consisting of 1 paramedic at the cost of \$186.42 per hour. |

**TERMS OF AGREEMENT**

1. **The dedicated standby duty shall be for a minimum of four (4) hours.** Fees for a dedicated standby include one (1) hour pre and one (1) hour post event to allow for vehicle/equipment checks and travel to/from the venue.
2. The fees for the standby shall be invoiced to the requesting organization by Hamilton Paramedic Service after the event. **Fees are not to be paid to the attending paramedics.**
3. Standby duties will be booked and paid in 15-minute increments (i.e. finishing time at 4:16 p.m. will be paid until 4:30 p.m.)
4. Hamilton Paramedic Service agrees to provide Emergency Medical standby coverage and shall remain at the location of the standby duty (for dedicated standbys). Hamilton Paramedic Service reserves the right to put the ambulance into service if it is required to respond to an emergency call. We shall replace the ambulance with the next available ambulance as soon as possible.

***To book the coverage, a service contract will be required prior to the event. Filing out this form does not guarantee medical standby. Only when the service agreement is signed will an ambulance be assigned to your event.***

**Upon approval, this form will be attached to a confirmation email with the service agreement.**