



GEORGIA EMS VEHICLE AND EQUIPMENT REPLACEMENT GRANT

QUESTION AND ANSWER

	QUESTIONS	ANSWERS
1	<p>The grant will be filed by the County Commission and if awarded will be accepted by the County. I, as contractor of the Ambulance Service, will operate the EMS for the County.</p> <ol style="list-style-type: none"> Will I, as contractor, or the Chairman of the Commissioners sign the documents concerning B, C, & D. Also will the county seal be sufficient for corporate seal on C? On D, business associate agreement, do I fill in Treutlen County Commission for contractor and do I leave contract # blank? 	<ol style="list-style-type: none"> The authorized person for the organization that will enter into agreement with the state should be the signatory. Yes. Fill in the name of the organization that will enter into agreement with the state.
2	Does the grant application require a local match or contribution in order to apply?	No.
3	We are run by the hospital but our ambulances are owned by the County. My Question is who I need to put as applicant organization, director of organization, etc. Should I use the hospital administration people or the county commissioners for these areas?	The organization that will enter into agreement with the state.
4	What is the USPS address of the furthest point within your 911 zone is going to be hard to get. The post office is not going to want to give out this information. Is it mandatory that we answer that question?	Yes. The local 911 office should be able to provide a map of its zones.
5	Is there a minimum score to determine eligibility for this grant?	No.
6	Is the maximum state portion still \$75,000?	Anticipated Awards: Funding amounts is at the discretion of the Georgia Trauma Care Network Commission.
7	Our Hospital is licensed for XX beds, but there is only XX beds in that facility. Which number should I use. Actual available beds or licensed number.	Licensed number of beds.
8	Do we need to complete an application for the Ambulance grant on each unit we are requesting or do we place multiple units on one document.	Yes.
9	Appendix A – is it required to have a designated per son for each of the following: director of applicant org, fiscal mgmt. officer, operating org., contact person for operating org., contact person for further info on app.	If your operating org and contact for operating org and further info are different than the applicant org. place that information in the corresponding areas.
10	Type of organization? We are an ambulance service owned by county govt. Does that qualify us as a govt. entity?	Government is any state, local, county, or municipality.



11	Registration number for this Qualifying Replacement Ambulance as listed on the most recent GA EMS form 1000 Schedule B. Is this the VID# the Office of EMS provides?	This is the VID#.
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