

REQUIREMENTS FOR STRETCHER TRANSPORTATION SERVICE LICENCE APPLICATION
Complete Identifying Information and this Section to apply for a Stretcher Transportation Service Licence

As per *Stretcher Transportation Services Regulation Section 3*, please provide a list of:

- Names and addresses of the directors and officers of the corporation (if incorporated under *The Corporations Act*) *Regulation Section 3(2)(a)*; or
- Name and address of the owner *Regulation Section 3(2)(b)*; or
- Names and addresses of all the general partners (if a partnership) *Regulation Section 3(2)(b)*
- All municipal and mailing addresses of all the premises from which the applicant proposes to operate the stretcher transportation system *Regulation Section 3(2)(c)*

Please provide copies of the following:

- Liability Insurance Policy *Regulation Section 14*
- Written agreement(s) with Regional Health Authority(s) *Regulation Section 6*
- Guidelines for reporting of occurrences *Regulation Section 18(1)*
- Annual safety inspection report for every stretcher transportation vehicle from an agent authorized by the Vehicle Standards and Inspections Section of the Department of Transportation and Government Services *Regulation Section 8(1)*

Please attest to the following:

- Attestation / Declaration that the service provider has an infection control program in place. *Regulation Section 13*

I hereby declare that I have established and implemented an infection control program that meets the minimum standard as outlined in the Manitoba Health Emergency Treatment Guidelines.

Signature

Date (yyyy/mm/dd)

INSTRUCTIONS FOR LICENCE APPLICATION

STRETCHER TRANSPORTATION SERVICE LICENCE – This license authorizes a licence holder to provide non-urgent transportation of individuals via ground transportation.

EXPIRY AND RENEWAL OF LICENCE – To renew a Stretcher Transportation Service Licence, a licence holder must submit a renewal application at least 90 days prior to the expiry date of his/her current licence.

APPLICATION FORM – Read each statement carefully and provide the information requested. The identifying information portion of the form must be completed, signed and the **original** form, along with the required documents, sent to MHHL, Emergency Medical Services. Retain a copy of the application form for your records.

IDENTIFYING INFORMATION – The name you print on your application form must be the legal name of your service. Your licence will be issued in this name. Please provide the name of the primary contact for the service.

CHECK OFF TYPE OF LICENSE REQUESTED – Put a check mark into the box beside either Initial Licence or Renewal Licence and beside the licence that you are applying for. Please check other applicable boxes.

REQUIREMENTS FOR STRETCHER TRANSPORTATION SERVICE LICENCE APPLICATION - Ensure that you have attached all required documentation as requested.