

@ 1213

**GROUND Ambulance Service Renewal**

Application Status

Please ensure that the 'Renewal' Box is checked below. Applications will not process properly if left blank.

Level	Initial	Renewal	Transfer
Application Status	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

Service Demographics

2014 LIC

Please confirm your agency's demographics.  
The gray fields are not accessible. You will not have the ability to change them from this application.  
Please contact KBEMS at [KBEMS@kctcs.edu](mailto:KBEMS@kctcs.edu) if information in the gray fields is incorrect.

Service Name: DRY RIDGE FIRE DEPARTMENT

License Number: 1641

Phone: 859 - 824 - 9158

Fax: 859 - 824 - 9160

Website: www.DRFD.org

Service Primary E-mail Address: jjamison@drfd.org

Physical Street 1: 17 Race Street

Physical Street 2:

Physical Postal Code: 41035

Lookup

*Click lookup button to select city for this postal code*

Physical City: DRY RIDGE

Physical County: GRANT

Physical State: Kentucky

Latitude for Main Station: 38 40' 53"

Longitude for Main Station: 84 35' 37"

The City, County, and State will autopopulate after you input your Postal Code and hit 'Lookup'.  
If the city, county, or state is incorrect, please click the small blue button with binoculars to the right of the 'State' Field and a pop up box will appear. Please select the correct city, county, and state combination from that box by selecting the green check mark on the left side of the box.

Shipping Street: 17 Race Street

Shipping Postal Code: 41035

Lookup

*Click lookup button to select city for this postal code*

Shipping City: DRY RIDGE

Shipping County: GRANT

Shipping State:

**Dispatch Information**

Emergency Dispatch Name: KSP Post 6

Emergency Dispatch Phone: 859-428-1212

Non-Emergency Dispatch:

Non-Emergency Dispatch Phone: - -

**Questions**

Does your Dispatch Center provide pre-arrival instructions?

Yes  No

Does your Dispatch Center Provide Emergency Medical Dispatch (EMD) Trained Dispatchers?

Yes  No

Did your Agency have any Vehicle Accidents involving EMS Response (Code 3, Lights and Sirens) from Jan 2013-Dec 2013?

Yes  No

Did your agency have any vehicle accidents involving non response driving (Code 1, No Lights and Sirens) from Jan 2013-Dec 2013?

Yes  No

**Payment Information**

Please assist KBEMS in processing by answering a few questions about Payment Options.

What method of Payment will you be using?

- Credit Card
- Check
- Money Order
- Other

If using Non-Electronic (Check, Money Order, etc) Payment, when do you plan to submit payment?

/ /

**Signature**

I agree that this service and all aspects of its operation shall be open to the inspection and surveillance of the Kentucky Board of Emergency Medical Services and the Commonwealth of Kentucky. I certify that the information given in this application is accurate to the best of my knowledge and recognize that falsification of this application may result in revocation of license(s).

\* Username :  
\* Password :