



MESQUITE FIRE & RESCUE AMBULANCE SUBSCRIPTION

911 Emergency Ambulance Subscription is NOW AVAILABLE.

- ◆ This coverage is valid for one year and can be renewed each year thereafter.
- ◆ This ambulance subscription covers one family per household.*
- ◆ This ambulance subscription is for 911 life threatening use **ONLY** and does not apply to requests for personal health related responses or transports.
- ◆ This ambulance subscription is for **Mesquite residents only**.
- ◆ This ambulance subscription does not preclude the billing of your insurance companies. It is our policy to bill your primary and secondary insurance companies first.

**The cost of this Ambulance Subscription is \$125.00
per year.** (Begins date you enroll and continues for twelve months)

To apply for this ambulance subscription you need to fill out an application at the Mesquite Fire & Rescue Office or Mesquite City Hall. Questions can be referred to 346-2690.

*See dependent eligibility coverage (copy available).

Mesquite Fire & Rescue reserves the right to discontinue this ambulance subscription when it is determined that such service is being abused or used improperly. This ambulance subscription **ONLY** applies to Mesquite City Fire & Rescue ambulance services.

DEPENDENT ELIGIBILITY

If you are eligible for coverage, the family members listed below are included:

- ▶ Your legal spouse;
- ▶ Your unmarried children under age 19. Children include:
 - your naturally born children;
 - stepchildren;
 - legally adopted children, or children placed with you for adoption, who are dependent upon you for support and maintenance;
 - foster children, but only when the court has appointed you legal guardian;
 - grandchildren, but only when the court has appointed you legal guardian, the grandchildren are principally dependent on you for support, and they live with you.
- ▶ Your unmarried children ages 19 through 26 who are full-time students (at least 9 units of study) at an accredited post-secondary educational institution, such as a college or university, community or junior college, graduate school, or an accredited vocational, trade, or business school.
- ▶ Your unmarried children who depend on you for support, and who are unable to do self-sustaining work, due to mental retardation or a physical handicap. You must provide written evidence of your child's incapacity.
- ▶ Elderly parent or sibling related by marriage or blood who live in your household and depend on you for support.



**CITY OF MESQUITE FIRE RESCUE
GROUND AMBULANCE SUBSCRIPTION COVERAGE**

IMPORTANT CLAUSE: This ground ambulance subscription is for Emergency 911 Life Threatening use only and does not apply to requests for personal health related responses or transports. Mesquite Fire Rescue reserves the right to discontinue this ambulance subscription when it is determined that such service is being abused or used improperly. This coverage is valid for one year and can be renewed on a yearly basis thereafter. This ambulance subscription does not preclude the billing of your insurance. It is our policy to bill your primary and secondary insurance companies. You will be requested to provide insurance information to the billing company upon usage of this emergency service. This ambulance subscription only applies to Mesquite Fire Rescue ground ambulance services and is for Mesquite residents only.

Signature of Understanding by Purchaser: _____

NAME OF PERSON PURCHASING CITY AMBULANCE SUPPLEMENT _____

PHYSICAL ADDRESS _____

MAILING ADDRESS _____

PHONE NUMBER _____

CLEARLY PRINT THE NAMES OF ELIGIBLE DEPENDENTS AT HOUSEHOLD ADDRESS:

_____	_____
_____	_____
_____	_____

Date:	Received by:	Amount:
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