

Environmental Health and Emergency Preparedness Division

101 West 9th Street, Pueblo, CO 81003 Phone 719.583.4307 Fax 719.583.9902 pueblohealth.org

PUEBLO COUNTY AMBULANCE SERVICE VEHICLE INFORMATION FORM

(Submit additional forms as needed)

Name of Ambulance			
Service			
Address / Zip			
	VEHICLE 1	VEHICLE 2	VEHICLE 3
Unit #			
Vehicle License #			
Validation Month			
Make/Model/Year			
Chassis Number (VIN)			
Length of time ambulance has been in use			
Distinguishing Characteristics (Color, Insignia)			
Location(s) from which ambulance will operate			
Service Area			
Colorado State Emergency Vehicle Permit CRS 42-4-106(5) Colorado Dept of Motor Vehicles	□ Yes □ No	□ Yes □ No	□ Yes □ No
Owner Name (print)			
Signature			Date