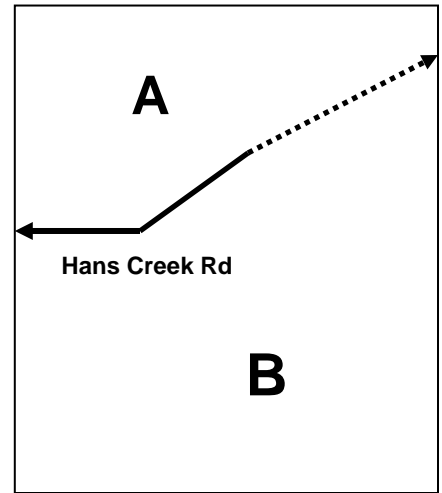


MUTUAL AID CHOICE

*First
5 Ambulances*

You may subdivide your district into a maximum of 4 zones, using major roads. Diagram your dividing roads in the box at the right. Label each zone alphabetically, starting with A. Leave this box blank if you do not wish to divide your district for mutual aid choices.



Ambulance Corps Name: Town of Providence

# Ambulances Required	First Preference	Second Preference (first not available)	Third Preference (first & second not available)
1	Duty Contract: A: Edinburg B: Galway	A: Galway B: Galway (2 nd rig)	A: Galway (2 nd rig) B: Edinburg
2	A: Galway B: Edinburg	A: Galway B: Edinburg	A: Broadalbin B: GAVAC
3	A: Galway B: Edinburg	A: Broadalbin B: GAVAC	A: Fulton County B: Community
4	A: Broadalbin B: GAVAC	A: Fulton County B: Community	A: GAVAC B: Broadalbin
5	A: Fulton County B: Community	A: GAVAC B: Broadalbin	A: Jessups B: Jessups

This document will be maintained of file for use by the Communications Center of the Saratoga County Sheriff's Department for EMS Dispatch. The Saratoga County Office of Emergency Services will utilize this document in countywide MCI planning and management. Contact the County EMS Coordinator to make changes in this document.

This plan is issued under orders of Mike McEvoy, Saratoga County EMS Coordinator, effective August 1, 2015 until further notice. Authority New York State County Law, Section 223-b.