

**APPLICATION
FOR
CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY**

Pursuant to Section 21-166, Hernando County Code of Ordinances, applicants for a Certificate of Public Convenience and Necessity must provide the following information. Please complete the form in its entirety. *Note: extra space is provided in number 14.*

1. Name and business address of owner or operator of the Advanced Life Support (ALS) or Basic Life Support (BLS) service, or proposed service:

Hernando County Fire and Emergency Services d/b/a Hernando County Fire Rescue

15470 Flight Path Drive, Brooksville, Florida 34604

2. Name under which the applicant will operate: Hernando County Fire and Emergency Services d/b/a
Hernando County Fire Rescue

3. List names and addresses of all officers, directors, and shareholders of applicant:

Paul Hasenmeier – Director of Public Safety / Fire Chief – 15470 Flight Path Drive, Brooksville, FL 34604

Kristian Sloane – Deputy Chief - 15470 Flight Path Drive, Brooksville, FL 34604

Chad Coates – Division Chief of EMS - 15470 Flight Path Drive, Brooksville, FL 34604

Louise Galajda – Finance Supervisor - 15470 Flight Path Drive, Brooksville, FL 34604

4. Territory which the applicant desires to serve; Geographic boundaries of Hernando County
number of vehicles 42 and brief description of each vehicle as indicated below:

	Vehicle #1	Vehicle #2	Vehicle #3
a. Type of vehicle:	<u>See Attachment # 1</u>		
b. Make & Model:			
c. Year:			
d. Mileage:			
e. VIN:			
f. Aviation/Marine Registration Nr.			

- g. Passenger capacity: _____
- h. Size & gross weight: _____
- i. Identifying Markings: _____
- j. Color Scheme: _____

5. Location and description of each place from which applicant's service is intended to operate:
Hernando County Fire Rescue is the primary ALS/BLS Emergency Service Provider for Hernando County covering the entire geographic boundary.

6. Training and experience of the applicant in the transportation and care of patients: Hernando County Fire Rescue provides both ALS/BLS first response and medical transport to the citizens of Hernando County. All medical personnel maintain license compliance with the Bureau of EMS and operate under the Medical Direction of Doctor Roderick Bennett.

7. Names and addresses of three (3) county residents available as references:

a. Name:	<u>Lauren Erhard</u>	<u>Kelly Trout</u>	<u>Nancy Jone</u>
b. Street:	<u>15470 Flight Path Dr</u>	<u>15470 Flight Path Dr</u>	<u>15470 Flight Path Dr</u>
d. City, St, Zip:	<u>Brooksville, FL 34604</u>	<u>Brooksville, FL 34604</u>	<u>Brooksville, FL 34604</u>
e. Phone:	<u>352-754-4787</u>	<u>352-754-4282</u>	<u>352-754-4135</u>

8. In the event that the application shall be granted and prior to its effectiveness, applicant shall provide copies of public liability, property damage and malpractice insurance or a surety bond conditioned for the payment and satisfaction of any final judgment as required or provided for in this article and chapter 401, Florida Statutes. **See Attachment #2**

9. Applicant certifies that it will provide continuous service on a 24-hour/day, seven-day-week- basis, and the minimum level of patient care rendered and/or available will always be advanced life support, with the exceptions of disasters or extraordinary circumstances, (advanced life support applicants only).

Hernando County Fire Rescue provides year-round coverage including times of disasters

10. The applicant may provide any other information that the board deems necessary bearing on the applicant's capabilities, character, past experiences, or any other factors that indicate applicant's qualifications for issuance of a Certificate of Need.

Hernando County Fire Rescue License ALS2703 - Transport Provider - License Status Clear

11. During the past five (5) years, or other relevant time period, has the applicant or any of its officers, agents, or employees, been sued for any reason on account of rendering inappropriate care regarding BLS or ALS services? If so, please describe and indicate whether any judgments were rendered against applicant, its officers, employees, or agents and the amount of any such judgment.

No

12. Please list the name of each employee or applicant at the time of this application that will be providing BLS or ALS services under the Certificate of Need as indicated below:

Name	Date Employed	Certificate Held	Certificate Number
See Attachment #3			

13. State if during the last five (5) years, or other relevant time period, if applicant has received any disciplinary notices or actions from the Department of HRS for violation of any Florida Statutes or administrative rule regarding the provisions of BLS or ALS Services. For each violation or notice, please provide the outcome and the measures taken to correct the violation.

Violation or Notice	Corrective Actions
None	

14. The space below is provided for additional information that would not fit in the space provided above. Please refer to the question number that you are responding to and attach to this application. You may attach additional sheets as necessary.

- Number _____

15. I/we have answered all questions truthfully and fully to the best of my/our knowledge.

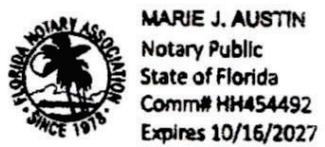
By: [Signature]
 Printed name Chad Coats

By: [Signature]
 Printed name Marie J Austin

STATE OF FLORIDA
 COUNTY OF Hernando

Sworn to and subscribed before me this 15 day of December, 2025, by Chief Chad Coats who is personally known to me or has produced _____ as identification.

[Signature]
 (Signature of Notary Public - State of Florida)



Attachment #1**Rescues**

Asset #	Year	Mileage	Identifier	Vin	Make & Model
22190	2020	244137	Rescue 1	1HA6GUCG8LN003916	CHEVROLET EXPRESS
23328	2026	2480	Rescue 2	1FDXE4FN1TDD05722	FORD E-450
22839	2021	125140	Rescue 3	1HA6GUC79MN012920	CHEVROLET EXPRESS
23330	2026	1284	Rescue 4	1FDXE4FN2TDD05731	FORD E-450
23072	2024	32586	Rescue 204	1FDXE4FN8RD00297	FORD E-450
23329	2026	205	Rescue 5	1FDXE4FN7TDD05725	FORD E-450
22871	2023	49996	Medic 205	1FDXF4FN6PDD25101	FORD E-450
20085	2017	319748	Rescue 7	1GB6GUCG8H1211009	CHEVROLET EXPRESS
23073	2024	44325	Rescue 8	1FDXE4FN1RDD00299	FORD E-450
21412	2017	236766	Rescue 10	1HA6GUCG5HN009342	CHEVROLET EXPRESS
21414	2017	256448	Rescue 11	1HA6GUCG6HN009298	CHEVROLET EXPRESS
19414	2015	283436	Rescue 211	1FVACWDT0FHGA7144	FREIGHTLINER M2
22840	2021	103427	Rescue 12	1HA6GUC76MN013068	CHEVROLET EXPRESS
23327	2026	192	Medic 212	1FDXE4FN2TDD14297	FORD E-450
22191	2020	121948	Rescue 13	1HA6GUCG6LN004112	CHEVROLET EXPRESS
22870	2023	49779	Medic 214	1FDXE4FN2PDD25113	FORD E-450
19464	2016	339121	Rescue 303	1FVACWDT7GHHD7715	FREIGHTLINER M2
19496	2016	282383	Rescue 305	1FVACWDT5GHHD7714	FREIGHTLINER M2
19415	2015	241216	Rescue 306	1FVACWDT2FHGA7145	FREIGHTLINER M2
21415	2017	253869	Rescue 307	1HA6GUCG5HN008644	CHEVROLET EXPRESS
20092	2017	299171	Rescue 310	1GB6GUCG8H1211950	CHEVROLET EXPRESS
21413	2017	209764	Rescue 311	1HA6GUCG3HN009369	CHEVROLET EXPRESS

Engines

21396	2018	99845	Engine 1	4EN6AAA88J1001412	E-ONE TRUCK
19473	2015	132687	Engine 2	4EN6AAA89F1009560	E-ONE TRUCK
22187	2020	80238	Engine 3	1S9A1BND9L3003031	SUTPHEN CUSTOM
19434	2015	161222	Engine 4	4EN6AAA85F1009152	E-ONE TRUCK
23010	2023	35819	Engine 5	1S9A1BND8P3003205	SUTPHEN CUSTOM
20331	2014	63663	Engine 6	1S9A1BND9E1003030	SUTPHEN CUSTOM
22188	2020	5336	Engine 7	1S9A1BNDOL3003032	SUTPHEN CUSTOM
18894	2013	10200	Engine 8	4P1CJ01A5DA013478	Pierce Impel
21397	2018	113719	Engine 9	1FVAG5FE5JHJX4525	FREIGHTLINER 108SD
19418	2014	140594	Engine 10	4P1CJ01A3EA014517	Pierce Impel
19417	2014	190288	Engine 11	4P1CJ01A1EA014516	Pierce Impel
22830	2022	5641	Engine 12	1S9A1BND9N3003016	SUTPHEN CUSTOM
22784	2021	4492	Engine 13	1S9A1BND5M3003030	SUTPHEN CUSTOM
23011	2023	35443	Engine 14	1S9Z1BND7P3003180	SUTPHEN CUSTOM
22908	2023	23834	Truck 10	1S9A3JNE7P1003009	SUTPHEN CUSTOM
15222	2010	174,643	Engine 101	44KFT4286AWZ21904	HME FIRE TRUCK
18895	2013	167115	Engine 205	4P1CJ01A5DA013478	PIERCE MANUFACTURING IMPEL
15155	2007	228095	Engine 206	4P1CE01T87A007586	PIERCE MANUFACTURING ENFOR
15153	2007	197302	Engine 214	4P1CE01A67A007603	PIERCE MANUFACTURING ENFO
17654	2006	79003	Ladder 5	4P1CD01F46A006513	PIERCE MANUFACTURING DASH



Attachment #2

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/07/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement.

PRODUCER: Brown & Brown Insurance Services, Inc.
CONTACT NAME: Stephanie Casella
PHONE: (727) 461-6044
INSURER(S) AFFORDING COVERAGE: Preferred Governmental Insurance Trust (PGIT)

COVERAGES CERTIFICATE NUMBER: 25-26 Master REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF, POLICY EXP, LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liability, Workers Compensation, and Professional Liability.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Certificate holder is Additional Insured with respect to General Liability if required by written contract.

CERTIFICATE HOLDER: Hernando County Fire & Emergency Services
CANCELLATION: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.