

Ambulance License Renewal

This application is to renew currently licensed Ambulances. It is to be used in conjunction with the Ambulance Service Permit which should be completed prior to this application. This application is NOT to be used for NEW vehicles/aircraft entering your fleet. This application is available to Service Directors, Assistant Service Directors, and Administrative Staff.

This application is for your renewal of Ambulance licenses (both Ground and Air) only. Complete this form only after completion of the **Ambulance Service Renewal Application.**

To begin, Once signed into the portal, click on Applications, then click on “View Services Applications”:

JAMES KENNEDY | Logout

My Account

Applications

Continue 3

Checkout

Transaction

Review 2

Education

Services

Lookup

Manage

Available Applications

Click "View My Applications" to view all personnel applications, or click "View Service Applications" to view available service licenses for this login.

KENNEDY, JAMES P (997744)
EMT
Issue Date: 09/12/2021
Expiration Date: 12/31/2021 [View My Applications](#)

KBEMS Test 1 (99991)
900 SW Jackson Room 1031, Topeka, Kansas 66612
Ground Ambulance -- Issued: 04/28/2021 -- Expires: 04/30/2023 [View Services Applications](#)

Click “Apply Now” next to the “Ambulance License Renewal”:

My Applications | **Services Applications**

KBEMS Test 1 (99991)
900 SW Jackson Room 1031, Topeka, Kansas 66612
Ground Ambulance -- Issued: 04/28/2021 -- Expires: 04/30/2023

Applications	Action
Service Investigations Self Report Are you needing to report potential misconduct or potential violation of state laws relating to an EMS service?	Apply Now
Service Staff Position Do you need to make changes to or add administrative staff to your service? Use this form to add/change Service Directors, Medical Directors, Assistant Service Directors, non-Attendant Administrative Staff, Primary Contact, Instructional Staff, Lab Instructors, Infection Control Officers, Pediatric Emergency Care Coordinators, and/or ePCR Contact. Service Director changes require a copy of letter assigning the position from the service operator/owner to be attached. Medical Director changes r...	Apply Now
Ambulance License Renewal Is it time to renew the Ground/Air Ambulance Licenses for your fleet? This application is to renew currently licensed Ambulances. It is to be used in conjunction with the Ambulance Service Permit which should be completed prior to this application. This application is NOT to be used for NEW vehicles/aircraft entering your fleet.	Apply Now 35 days until application period closes
Services Support/Other Vehicles Application Do you want to add Support Vehicles to your Service? The Kansas Board of EMS now requires reporting of Support	Apply Now

Click on the appropriate Certification Level for you Service:

Service Information

*Service Number
99991

*Name
KBEMS Test 1

*Certification Levels
 Ground Ambulance
 Air Ambulance

For EACH ambulance click the box on the left next to each unit being renewed:

Ambulance Information

Please click on the box to the left next to each ambulance you are renewing and complete the requested information. As you complete each one, CLICK UPDATE. After complete the information for ALL of your ambulances fill in the total number ambulances that you are renewing. NOTE: If there are ambulances on this list which were added to your serv after March 1st, there is no action needed. Do NOT include them in the count of ambulances being renewed.

Please remember to update Mileage/Hours, add Tag number for each ambulance (if not already provided) and Designate a Primary Use for each Vehicle (Ambulance or Support).

<input type="checkbox"/>	VIN Number	VIN Number	Unit Number	Call Sign	Year	Make	Model	License Tag	Primary Use	Location
<input checked="" type="checkbox"/>	MadeUp06	MadeUp06	06	Cal06	2020	Ford	F-250	MadeUp06	Ambulance	Kansas Board two
<input checked="" type="checkbox"/>	AAAMadeUp5	AAAMadeUp5	MA5	MA5	2021	Chevrolet	Ltz	ab0999	Ambulance	Kansas Board of EMS
<input checked="" type="checkbox"/>	AAAMadeUp1	AAAMadeUp1	MA1	MA1	2020	Chevrolet	2500	123 ABC	Ambulance	Kansas Board of EMS
<input checked="" type="checkbox"/>	AAAMadeUp3	AAAMadeUp3	MA3	MA3	1902	Ford	Model T	1234BC	Ambulance	Kansas Board of EMS
<input checked="" type="checkbox"/>	AAAMadeUp2	AAAMadeUp2	MA2	MA2	2020	Ford	F250	456 DFG	Ambulance	Kansas Board of EMS
<input checked="" type="checkbox"/>	NotaVIN123456	NotaVIN123456			2024	Chevrolet	Suburban	EMS 123	Support	Kansas Board of EMS
<input checked="" type="checkbox"/>	AAAMadeUp07	AAAMadeUp07	MA07	MA07	2022	Ford	F450	789654	Ambulance	Kansas Board of EMS

For Ground Ambulances, Enter the License Tag/Registration number, Odometer Reading, Select Primary Use (Ambulance), Designate its primary location, then click Done. Repeat for each ambulance being renewed.

*VIN Number
MadeUp06

*VIN Number
MadeUp06

Unit Number
06

Call Sign
Cal06

Year
2020

Make
Ford

Model
F-250

*License Tag
123XYZ

*Odometer Reading (Miles)
100

*Primary Use
Ambulance

Location
kansas Board two

(Continued on next page).

For each Air Ambulance enter the Total Aircraft Hours, Select Ambulance from the Dropdown for Primary Use, Select the primary location for the Aircraft, and then Click Done:

*Airframe Serial Number
SN123456

*Airframe Serial Number
SN123456

*N Number
N1234X

Unit Number
04

Call Sign
EM504

Year
2012

Make
Eurocopter

Model
EC130-B4

*Aircraft Hours
1500

*Primary Use
Ambulance

Location
Kansas Board of EMS

Once all ambulances being renewed have been updated, enter the total number of Ambulances being renewed:

**** Total of Ambulances being Renewed ****
6

(Continued on next page)

For each ambulance license being renewed a copy of the Registration should be uploaded. You may batch and scan all Registrations together into one document (Adobe PDF is the preferred format) for upload.

Below you will find two additional documentation forms. The first is the vehicle mechanical inspection form. Please click on it to download. You will need to print one for each ambulance you will license and have it completed and signed by your mechanic. Once completed you may upload all of the inspection forms into this application prior to submission. You may scan all of the inspection forms in as one (1) document.

The second is the vehicle ownership form. If you have ambulances that you are renewing and they are not owned by your service, you will need to download this form. You will need to print one for each ambulance that is owned by an entity other than the licensed ambulance service. NOTE: If your service is owned by a governmental entity (i.e. city/county) and the service vehicles are owned by the same entity, you do NOT have to complete this form.

To upload forms: Fill in the File Name and Description, click Upload file, then Browse to the form (on YOUR computer) you wish to upload, click Open and Click Save. Click Add Another again to upload additional form(s). For each additional form, repeat the process.

Additional Documentation

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To upload forms: Click on the ADD button. Fill in a name for the form (or batch of scanned forms) that you wish to upload. Browse to the form (on YOUR computer) you wish to upload and click on it. Click ADD again to upload the form(s). For each additional form, repeat the process.

When all documents are uploaded, click SAVE AND CONTINUE

***** If you have a Long Term Vehicle Maintenance plan please submit in lieu of the vehicle mechanical form.

Click here [Vehicle Mechanical Inspection](#) to download and complete the form. Print one for each vehicle for which you are renewing an ambulance license.

Below upload the following:

- ***Vehicle mechanical or Vehicle maintenance plan upload
- ***A copy of the Vehicle/Aircraft Registration(s)
- ***Ambulance ownership form upload

To download the Ambulance Ownership form click here: [Ambulance Ownership Form](#). Print, complete and upload one form for each Ambulance NOT owned by your service

*File

Adding Support Vehicles.docx

Name
Registrations

Description
All Vehicle Registrations

Document Type
Supporting Documents

When all documents are uploaded, click SAVE AND CONTINUE

Enter today's date and your password, then Click Submit.

Ambulance - 1 of 2 Acknowledgement - 2 of 2

▼ Acknowledgement

As the appointed representative of the organization, I assure and certify that the organization understands and is in compliance with the authority and requirements of an Ambulance Service as described in Kansas statutes annotated and Kansas administrative regulation. I declare under the penalty of perjury under the laws of the State of Kansas that the information provided in this application is true and correct.

*Date of Application
04/01/2024 Today

*Signature - Applicant
Username: James.Kennedy
Password: