



## CITY OF BUENA PARK PARAMEDIC SUBSCRIPTION PROGRAM

Recently the City Council approved an adjustment to fees relating to emergency medical treatment and transport in order to offset these costs and costs associated with the Orange County Fire Authority contract. **The City will no longer charge a basic life support fee, but instead will incorporate a first responder fee of \$300 per call beginning January 1, 2011.** Most Buena Park residents and businesses participate in the City's paramedic subscription program which exempts them from paying the first responder fee. As a subscriber, not only are you exempt from this fee, but so are your guests and all members of your household.

If you are currently not a member, we encourage you to join by filling out the form below and returning it to the Finance Department.

***The following paramedic subscription rates are effective July 1, 2010***

Residential subscription rate - \$45 per year  
 Business subscription rates (50 or fewer employees) - \$45 per year  
 (51-100 employees) - \$90 per year  
 (100 employees or more) - \$135 per year

Residents whose household annual income is less than \$15,000 may be exempt from charges. Under no circumstances will Emergency Medical Treatment be denied to anyone. Contact the City Finance Department for more information at (714) 562-3737.

### PARAMEDIC SUBSCRIPTION PROGRAM – ENROLLMENT APPLICATION

Please enroll me and all permanent members of my household or business in the Paramedic Subscription Program. I understand that the cost for an annual subscription is \$45 per household or \$45 for less than 50 employees, \$90 for 51-100 employees and \$135 for more than 100 employees. The charge may be paid in a lump sum or will be charged to my water bill in six bimonthly installments. If I do not receive a water bill, I will be invoiced.

- ☐ Residential  
☒ Business  
☒ Amount enclosed \$45.00  
☐ My total household income is less than \$15,000; please send information concerning a hardship exemption.

Bennett	Jo	5634217799
Last Name	First	Phone
512 Fallen Leaf Lane	14	32199
Address	Apt #	Zip Code
512 Fallen Leaf Lane	14	32199
Mailing Address	Apt #	Zip Code
Jo's Dog Training	3	
Business Name	# of Employees	
<i>Jo Bennett</i>		
Signature		

Mail your form to: City of Buena Park  
 Attn: Finance  
 P.O. Box 5009  
 Buena Park, CA 90621-5009