



Michigan Department of Health and Human Services
Bureau of EMS, Trauma and Preparedness
Division of EMS and Trauma
P.O. Box 30207
Lansing, MI 48909-0207
MDHHS-MichiganEMS@Michigan.gov
Phone: (517) 241-3025
Fax: (517) 335-9434

Website: www.michigan.gov/ems

MANUFACTURER CERTIFICATE OF COMPLIANCE (GROUND AMBULANCE)

(Authority: Act 368 of 1978 as amended)

Instructions:

1. Depending on the type of ground ambulance being licensed, complete either:
 - a. Section 1 (New Ambulance) or
 - b. Section 2 (Remounted Ambulance) of this certificate. (Note: see additional required documentation below for remounted ambulances)
2. This prescribed form is to be certified by the final stage manufacturer (includes remounters) of the ambulance. **This completed form must be submitted with the application for life support vehicle license (BHS-EMS-181).**
 - a. Failure to do so will result in the denial of the application.
 - b. If any part of the application or this certificate is found to be fraudulent, the vehicle shall be removed from service immediately and the Department may take disciplinary action as authorized by Section 20165 of the Public Health Code.
3. All Michigan Life Support Agencies and Remounters must follow the Division of EMS & Trauma - EMS Agencies –Ground Ambulance Remounts Policy and Procedures (EMS-200) located on our website.
4. The original compliance sticker for the ambulance may be used in lieu of the original certificate of compliance when the manufacturer is no longer in business. In this case a picture of the sticker and a new manufacturer certificate of compliance should be filled out, with the life support agency certifying the compliance.

Remounted Ambulances Additional Documentation Required to be Submitted with this Form:

1. A certificate of origin from the chassis manufacturer and
2. A certificate of origin from the final stage manufacturer (remounter) and,
3. A copy of the completed Michigan Department of Secretary of State – Application for Title and Registration – Statement of Vehicle Sale ([Form RD-108](#)) for a *Michigan vehicle sale* OR a copy of the completed Michigan Department of Secretary of State – Application for Michigan Vehicle Title ([Form TR-11L](#)) for *Out of State vehicle sale* (showing new VIN number)



Michigan Department of Health and Human Services
 Bureau of EMS, Trauma and Preparedness
 Division of EMS and Trauma
 P.O. Box 30207
 Lansing, MI 48909-0207
MDHHS-MichiganEMS@Michigan.gov
 Phone: (517) 241-3025
 Fax: (517) 335-9434

Website: www.michigan.gov/ems

Notes:

1. To obtain a title, the remounter must apply for a title with the Michigan Department of Secretary of State (or other similar entity outside the State of Michigan) and show proof of the certificate of origin for the chassis and the final stage manufacturer. More information can be found on the Michigan Department of Secretary of State website: www.michigan.gov/sos.

Section 1: New Ambulance

For a vehicle that is a new chassis with a newly built patient compartment.

AMBULANCE INFORMATION			
Year	Make	Style	Vin
Sold To (Name of Life Support Agency)			
Date Sold		Date Delivered	

MANUFACTURER'S INFORMATION		
Name of Final Stage Manufacturer		
National Highway Traffic Safety Administration (NHTSA) ID Number		
Street Address		
City	State	Zip Code



Michigan Department of Health and Human Services
 Bureau of EMS, Trauma and Preparedness
 Division of EMS and Trauma
 P.O. Box 30207
 Lansing, MI 48909-0207
MDHHS-MichiganEMS@Michigan.gov
 Phone: (517) 241-3025
 Fax: (517) 335-9434

Website: www.michigan.gov/ems

Section 2: Remounted Ambulance

For a new chassis with a patient compartment from a previously manufactured ambulance.

PATIENT COMPARTMENT INFORMATION			
Year	Make	Style	Vin Number from Patient Compartment
Name of Patient Compartment Ambulance Manufacturer			
Name of Previous Owner			

FINAL STAGE MANUFACTURER'S INFORMATION		
Name of Final Stage Manufacturer (Remounter)		
National Highway Traffic Safety Administration (NHTSA) ID Number		
Street Address		
City	State	Zip Code

NEW COMPLETED AMBULANCE INFORMATION			
Year	Make	Style	Completed Vehicle VIN
Sold To (Name of Life Support Agency)			
Date Sold		Date Delivered	



Michigan Department of Health and Human Services
 Bureau of EMS, Trauma and Preparedness
 Division of EMS and Trauma
 P.O. Box 30207
 Lansing, MI 48909-0207
MDHHS-MichiganEMS@Michigan.gov
 Phone: (517) 241-3025
 Fax: (517) 335-9434

Website: www.michigan.gov/ems

FINAL STAGE MANUFACTURER CERTIFICATION

I certify the ambulance described herein meets all applicable requirements of administrative rule 325.22181, pursuant to Part 209 of P.A. 368 of 1978, as amended

(see Rule on next page of this form).

Type of Standard Vehicle Meets:

- Federal Triple K-A-1822 (excluding paint scheme)
 NFPA in Entirety
 CAAS/ GVSA in Entirety
 CAAS/GVSA Section F – Ambulance Remount (Remounts ONLY)

Name of Final Stage Manufacturer	Phone Number
---	---------------------

Name of Person Certifying Compliance (Print)

Street Address

City	State	Zip Code
-------------	--------------	-----------------

Signature of Person Certifying Compliance	Date
--	-------------

NOTARY PUBLIC

Notary Public Name (Print)	State	County
-----------------------------------	--------------	---------------

Subscribed and sworn to me this:

Day: Month: Year:

Signature of Notary Public



Michigan Department of Health and Human Services
Bureau of EMS, Trauma and Preparedness
Division of EMS and Trauma
P.O. Box 30207
Lansing, MI 48909-0207
MDHHS-MichiganEMS@Michigan.gov
Phone: (517) 241-3025
Fax: (517) 335-9434

Website: www.michigan.gov/ems

R 325.22181 Ground ambulance; requirements.

Rule 181. (1) An ambulance operation shall maintain the manufacturer's certificate of compliance on file at the time of application to the department for licensure of each ground ambulance. The certificate of compliance shall be executed by the final manufacturer of each ground ambulance and be on a form prescribed by the department.

(2) The manufacturer of a ground ambulance executing a certificate of compliance shall comply with the ambulance structural and mechanical specifications with one of the following standards that was in effect at the time of manufacture:

(a) Federal KKK-A-1822 standards, excluding the paint scheme.

(b) The Commission on Accreditation of Ambulance Services (CAAS) Ground Vehicle Standard for Ambulances (GVSA) in its entirety.

(c) The National Fire Protection Association (NFPA) 1917 Standard for Automotive Ambulances in its entirety.

(3) The manufacturer shall maintain test data demonstrating compliance.

(4) Once licensed for service, an ambulance shall not be required to meet later modified state vehicle standards during its use by the ambulance operation that obtained the license.

(5) A ground ambulance referred to in subrule (2) of this rule shall not be modified to alter its original design upon which the certificate of compliance was based, unless a new certificate is issued verifying that the modifications have not altered the integrity of the vehicle.

(6) The patient compartment of a ground ambulance that has met applicable standards at the time of manufacture may be remounted on to a different chassis by a qualified vehicle modifier as designated by the chassis manufacturer. A new manufacturer's certificate of compliance shall be issued that identifies the new vehicle identification number and demonstrates compliance with either KKK, GVSA, or NFPA standards in accordance with subrule (2) of this rule.