

# AGENCY ADMINISTRATOR FORM

ENGLISH

The Agency Licensure Administrator Role:

To the EMS office, a primary contact regarding the agency’s license. This role is responsible for the annual renewal of the agency license and vehicles, as well as processing agency and vehicle updates, via the eLicensing system, as changes occur throughout the licensure. Examples include adding, removing, or upgrading vehicles; agency role changes; managing the personnel roster; and updates to agency contact names or information. Additionally, this role will have permission to assign other agency roles in the eLicensing system. The Agency Licensure Administrator is an active role for the Life Support Agency. The recommendation is to register at least two people to this role; however, a minimum of 1 person is required.

**It is recommended that an Agency Licensure Administrator be a licensed EMS provider. If an individual assigned to this role is not a licensed EMS provider or does not already have a login and password for the eLicensing system, a user account will need to be created first for the State EMS office to assign the individual to this role.**

**PLEASE NOTE: The people assigned to these roles will be the point of contact between the EMS office and the agency. The email used for this role is SUBJECT TO FOIA and will be released if requested. Consider not using a personal email or creating a new email for this use only.**

Life Support Agency Name:

Life Support Agency Number:

Agency Licensure Administrator #1 Name	Agency Licensure Administrator #2 Name
eLicensure System Username #1	eLicensure System Username #2
Agency Licensure Administrator #1 Email	Agency Licensure Administrator #2 Email
Agency Licensure Administrator #1 Phone No.	Agency Licensure Administrator #2 Phone No.
<p style="font-size: 2em; font-weight: bold; text-align: center;">X</p> <p>Agency Licensure Administrator # 1</p> <p><b>NOTE:</b> Click on the box above or in the E-Sign menu in the upper left corner to sign the form electronically.</p> <p style="text-align: right;">E-Sign  Draw </p>	<p style="font-size: 2em; font-weight: bold; text-align: center;">X</p> <p>Agency Licensure Administrator # 2</p> <p><b>NOTE:</b> Click on the box above or in the E-Sign menu in the upper left corner to sign the form electronically.</p> <p style="text-align: right;">E-Sign  Draw </p>

Please submit this document via email to: [EMS@michigan.gov](mailto:EMS@michigan.gov).