

**NORTH CAROLINA ASSOCIATION OF RESCUE & EMERGENCY MEDICAL SERVICES, INC.**

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**STATEMENT OF ELIGIBILITY**

**HIGH ANGLE RESCUE**

\*\*\* PLEASE PRINT OR TYPE

NAME OF DEPARTMENT \_\_\_\_\_ DATE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ ST. ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTY \_\_\_\_\_

DEPARTMENT EMAIL ADDRESS \_\_\_\_\_

COMM CENTER PHONE #( ) \_\_\_\_\_ BUSINESS PHONE #( ) \_\_\_\_\_

DEPARTMENT CELL PHONE #( ) \_\_\_\_\_ FAX # \_\_\_\_\_

CAPTAIN/CHIEF \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

WORK PHONE #( ) \_\_\_\_\_ HOME PHONE #( ) \_\_\_\_\_ CELL #( ) \_\_\_\_\_

SECRETARY \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

WORK PHONE #( ) \_\_\_\_\_ HOME PHONE #( ) \_\_\_\_\_ CELL #( ) \_\_\_\_\_

DOES YOUR SQUAD PROVIDE?

RESCUE ONLY \_\_\_ EMS ONLY \_\_\_ EMS/FIRE \_\_\_ EMS/RESCUE \_\_\_ EMS/FIRE/RESCUE \_\_\_ FIRE/RESCUE \_\_\_

**DOCUMENTS NEEDED TO CERTIFY & MUST ACCOMPANY THIS STATEMENT OF ELIGIBILITY:**

- 1) COPY OF STATE CHARTER**
- 2) AUTHORITY TO OPERATE WITH CITY/COUNTY**

# **AUTHORITY TO OPERATE**

## **TO BE SIGNED & NOTARIZED BY CITY OR COUNTY OFFICIAL**

THIS IS TO CERTIFY THAT \_\_\_\_\_  
Name of Department

IS AN ACTIVE OPERATING SERVICE, OPERATING IN \_\_\_\_\_ CITY  
OR COUNTY AND IS HEREBY AUTHORIZED TO PROVIDE **HIGH ANGLE RESCUE** IN THE ABOVE MENTIONED  
CITY OR COUNTY.

\_\_\_\_\_  
COUNTY OR CITY OFFICIAL PRINT NAME \_\_\_\_\_ SIGNED

\_\_\_\_\_  
TITLE

(NOTARY SEAL)

COUNTY OF \_\_\_\_\_ STATE OF \_\_\_\_\_

ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_\_, APPEARED BEFORE ME THE SAID INDIVIDUAL DESCRIBED  
HEREIN AND WHO EXECUTED THE FOREGOING INSTRUMENT, AND HE (OR SHE) DULY ACKNOWLEDGED TO ME THAT HE (OR SHE)  
EXECUTED SAME AND THAT THE STATEMENT THEREIN CONTAINED WERE TRUE TO THE BEST OF HIS (OR HER) KNOWLEDGE AND  
BELIEF.

MY COMMISSION EXPIRES: \_\_\_\_\_ NOTARY PUBLIC

## **TO BE SIGNED & NOTARIZED BY DEPARTMENT OFFICIAL**

THIS IS TO CERTIFY THAT \_\_\_\_\_  
Name of Department

IS AN ACTIVE OPERATING SERVICE, OPERATING IN \_\_\_\_\_ CITY  
OR COUNTY AND IS HEREBY AUTHORIZED TO PROVIDE **HIGH ANGLE RESCUE** IN THE ABOVE MENTIONED  
CITY OR COUNTY.

\_\_\_\_\_  
DEPARTMENT OFFICIAL PRINT NAME \_\_\_\_\_ SIGNED

\_\_\_\_\_  
TITLE

(NOTARY SEAL)

COUNTY OF \_\_\_\_\_ STATE OF \_\_\_\_\_

ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_\_, APPEARED BEFORE ME THE SAID INDIVIDUAL  
DESCRIBED HEREIN AND WHO EXECUTED THE FOREGOING INSTRUMENT, AND HE (OR SHE) DULY ACKNOWLEDGED TO ME THAT HE (OR  
SHE) EXECUTED THE SAME AND THAT THE STATEMENTS THEREIN CONTAINED WERE TRUE TO THE BEST OF HIS (OR HER) KNOWLEDGE  
AND BELIEF.

MY COMMISSION EXPIRES: \_\_\_\_\_ NOTARY PUBLIC

## **BOTH SIGNATURES ARE REQUIRED**

# MINIMUM STANDARD REQUIREMENTS - NCAR&EMS

## HIGH ANGLE RESCUE

### 1. MINIMUM PERSONNEL / ORGANIZATION REQUIREMENTS:

NUMBER OF PERSONNEL WITH CERTIFICATION

(ENTER NUMBER OF PERSONNEL WITH EACH CERTIFICATION)

FIRST RESPONDER - \_\_\_\_\_ MEDICAL RESPONDER - \_\_\_\_\_ EMT - \_\_\_\_\_

EMT-I - \_\_\_\_\_ EMT-P - \_\_\_\_\_ RESCUE CERTIFIED - \_\_\_\_\_ RN/MICN - \_\_\_\_\_

### **A MINIMUM OF EIGHT (8) PERSONNEL SHALL HOLD RESCUE CERTIFICATIONS AS ERT, RT-VMR & RT-ROPES, TR-GENERAL & TR-ROPES OR TECHNICAL RESCUER**

ORGANIZATIONS OPERATING AT THE TECHNICIAN LEVELS OF HIGH ANGLE RESCUE SHOULD HAVE COMPLETED AS A MIMUMUM AN ADDITIONAL 36 HOURS OF HIGH LEVEL RESCUE TRAINING. THIS TRAINING MAY COME FROM SUCH COURSES AS GRADUATION FROM THE N.C. HIGH ANGLE RESCUE SCHOOL OR COMPLETION OF THE WESTERN N.C. RESCUE COLLEGE MOUNTAIN RESCUE PROGRAM OR OTHER RECOGNIZED COURSES OF INSTRUCTION MEETING NFPA 1006 TECHNICIAN LEVEL. RESCUE TECHNICIANS WHO HAVE COMPLETED NFPA 1006, CHAPTER 6 (ROPES) WILL SATISFY THESE REQUIREMENTS.

### 2. TYPE OF RESCUE TO PERFORM:

AS SPECIFIED BY THE CONTRACT WITH THE AHJ

### 3. VEHICLE:

VEHICLE(S) USED FOR HIGH ANGLE RESCUE SHALL BE CAPABLE OF TRANSPORTING RESCUE PERSONNEL AND EQUIPMENT TO AN INCIDENT SAFELY AND CANNOT EXCEED THE VEHICLE'S TOTAL GVWR, INCLUDING THE CHASSIS, BODY, AND RESCUE EQUIPMENT AND MEDICAL CARE EQUIPMENT WHEN LOADED. ALL EQUIPMENT SHALL BE LOADED ON APPARATUS AND RESPONSE READY.

**4. MINIMUM REQUIRED EQUIPMENT: DEPT. NAME \_\_\_\_\_**

NCAR&EMS, INC.,  
REPRESENTATIVE \_\_\_\_\_ DATE: \_\_\_\_\_

APPROVED: \_\_\_\_\_ YES \_\_\_\_\_ NO INSPECTOR'S SIGNATURE: \_\_\_\_\_

**YOU MUST HAVE EACH OF THE FOLLOWING ITEMS TO MEET ELIGIBILITY REQUIREMENTS FOR CERTIFICATION IN ADDITION TO THE LISTED EQUIPMENT FOR LIGHT RESCUE**

**HIGH ANGLE RESCUE**

MINIMUM OF EIGHT TEAM MEMBERS SHALL HAVE THE FOLLOWING:

- \_\_\_\_ 1 HELMET
- \_\_\_\_ 1 PAIR GLOVES (LEATHER PALM MINIMUM)
- \_\_\_\_ 1 PAIR LONG SLEEVE COVERALLS
- \_\_\_\_ 1 KNIFE
- \_\_\_\_ 1 FLASHLIGHT WITH EXTRA BATTERIES (MAY INCLUDE HELMET LIGHT)

HIGH ANGLE RESCUE EQUIPMENT REQUIREMENTS IN ADDITION TO THE REQUIREMENTS OF LIGHT RESCUE

- \_\_\_\_ 1 RIGGING PLATE
- \_\_\_\_ 4 CLASS II HARNESSSES
- \_\_\_\_ 4 CLASS III HARNESSSES - (MAY BE A CONVERTED CLASS II WITH A CHEST HITCH)
- \_\_\_\_ 150 ft. 7mm - 9mm PRUSSIK SLINGS, LENGTHS MAY VARY PER THE AHJ'S NEEDS. All SOFTWARE MUST MEET NFPA 2500 GENERAL USE REQUIREMENTS, UNLESS YOU HAVE BEEN SUCCESSFULLY INSPECTED BY A PREVIOUS NCAREMS STANDARD AND HAVE RETAINED THAT EQUIPMENT. (Note: EYE TO EYE OR SOWN SLINGS MAY BE SUBSTITUTED FOR THE ABOVE BUT MUST MEET THE REQUIREMENTS of NFPA 2500 GENERAL USE AND BE CORRECTLY SIZED FOR THE SIZE OF ROPE BEING USED)
- \_\_\_\_ 1 LITTER - MILITARY TYPE STOKES BASKET, SKED SYSTEM OR OTHER RATED LITTER
- \_\_\_\_ 8 - 1 in. x 48" STEEL PICKETS OR EQUIVALENT SIZE REBAR
- \_\_\_\_ 8 - PICKET COVERS/CAPS
- \_\_\_\_ 2 - 8 lb. SLEDGEHAMMERS
- \_\_\_\_ 4 - DOUBLE SHEAVE PULLEYS, 1/2 IN. X 2 IN. MINIMUM DIAMETER & RATED FOR GENERAL USE OR 2 PERSON LOADS, MAY BE STEEL, ALUMINUM, ETC. PER THE AHJ.
- \_\_\_\_ 8 - SINGLE SHEAVE PULLEYS, 1/2 IN. X 2 IN. MINIMUM DIAMETER & RATED FOR GENERAL USE OR 2 PERSON LOADS
- \_\_\_\_ 4 - 2 in PRUSSIK MINDING SINGLE PULLEYS & RATED FOR GENERAL USE OR 2 PERSON LOADS
- \_\_\_\_ 4 ASCENDERS THAT WILL ACCEPT A MINIMUM OF 1/2 IN. ROPE
- \_\_\_\_ 2 KOOTENAY CARRIAGES (KNOT PASSING PULLEYS)
- \_\_\_\_ 36 LOCKING CARABINERS - MUST MEET NFPA 2500 GENERAL USE REQUIREMENTS (ALUMINUM MUST BE STAMPED). HARDWARE MUST BE SPECIFICALLY SIZED FOR THE SIZE OF ROPE BEING USED. THESE UPDATES ARE NOT REQUIRED IF YOU HAVE BEEN SUCCESSFULLY INSPECTED BY A PREVIOUS NCAREMS STANDARD AND RETAINED THAT EQUIPMENT.
- \_\_\_\_ 1,500 ft. GENERAL USE LIFE SAFETY ROPE AS SPECCIFIED IN NFPA 2500. THIS MAY BE CUT TO DIFFERENT LENGTHS. (NOTE - AGENCIES WILL BE REQUIRED TO MAINTAIN MANUFACTURER'S DOCUMENTATION TO DEMONSTRATE COMPLIANCE WITH THE ABOVE REQUIREMENTS DURING AN INSPECION, UNLESS YOU HAVE BEEN SUCCESSFULLY INSPECTED BY A PREVIOUS NCAREMS STANDARD AND RETAINED THAT EQUIPMENT). ACCORDINGLY, THE NFPA GENERAL USE LIFE SAFETY ROPES ARE TO BE 11 mm to 16 mm IN DIAMETER WITH A MBS OF 40 KN.

\_\_\_\_ 12 - 25 ft x 1/2 in LOW STRETCH KERNMANTLE ROPE  
 \_\_\_\_ 9 DESCENDERS, MAY BE ANY COMBINATION OF APPROVED GENERAL USE DESCENDERS WITH A  
 MINIMUM OF ONE (1) BRAKE BAR RACK. (8'S MUST BE WINGED TYPE)

IF AN ORGANIZATION WISHES TO BE CERTIFIED AT THE HIGH ANGLE RESCUE LEVEL AND IS CURRENTLY AT EITHER THE LIGHT, MEDIUM OR HEAVY LEVEL THE FOLLOWING CHART WILL INDICATE HOW MUCH MORE EQUIPMENT YOU WILL NEED IN ADDITION TO THE DESIRED STANDARD.

High Angle Equipment	Total	Additional Equipment		
		Light	Medium	Heavy
Rigging Plates	2	1	1	1
Class II Harness	6	4	2	2
Class III Harness	4	4	2	0
150' 8mm Accessory Cord	1	1	1	1
Stokes Basket	2	1	1	0
Pickets	16	8	4	0
8 lb. Sledgehammers	2	1	1	0
Double Sheave Pulleys	4	2	2	0
Single Sheave Pulleys	12	10	8	4
2" PMP Pulleys	4	4	3	2
Ascenders	4	4	4	4
Kootenay Carriage	2	2	2	2
Carabiners	48	36	24	12
1/2" Static Kernmantle Rope	1500'	1000'	600'	300'
25' - 1/2" Body Cords	12	4	4	4
Descenders	14	9	5	0
10' X 12' Tarps	6	4	3	0