



Broward County  
Resilient Environment Department  
**Consumer Protection Division**  
**ALS/BLS PERSONNEL**

Name of Service: \_\_\_\_\_

Date: \_\_\_\_\_

| Last Name | First Name/M.I. | Paramedic<br>(Y/N) | EMT<br>(Y/N) | Driver<br>(Y/N) | Certificate(s) Number |
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