

**Fairbanks North Star Borough Emergency Medical Services FY2003 Request: \$91,000**  
**- Ambulance Replacement Reference No: 36489**

**AP/AL:** Appropriation **Project Type:** Equipment  
**Category:** Health/Human Services **Recipient:** Fairbanks North Star Borough  
**Location:** Fairbanks Areawide **Contact:** Melanie Greer  
**House District:** Fairbanks Areawide (HD 29-34) **Contact Phone:** (907)465-5541  
**Estimated Project Dates:** 07/01/2002 - 06/30/2007

**Brief Summary and Statement of Need:**

Replace old ambulance.

| <b>Funding:</b> | <b>FY2003</b> | <b>FY2004</b> | <b>FY2005</b> | <b>FY2006</b> | <b>FY2007</b> | <b>FY2008</b> | <b>Total</b> |
|-----------------|---------------|---------------|---------------|---------------|---------------|---------------|--------------|
| Muni Match      | \$91,000      |               |               |               |               |               | \$91,000     |
| <b>Total:</b>   | \$91,000      | \$0           | \$0           | \$0           | \$0           | \$0           | \$91,000     |

|   |   |                                       |   |  |
|---|---|---------------------------------------|---|--|
| <input type="checkbox"/> State Match Required | <input type="checkbox"/> One-Time Project | <input type="checkbox"/> Phased - new | <input type="checkbox"/> Phased - underway  | <input checked="" type="checkbox"/> On-Going |
| 0% = Minimum State Match % Required           |   | <input type="checkbox"/> Amendment    | <input type="checkbox"/> Mental Health Bill |  |

**Operating & Maintenance Costs:**

|                      | <u>Amount</u> | <u>Staff</u> |
|----------------------|---------------|--------------|
| Project Development: | 0             | 0            |
| Ongoing Operating:   | 0             | 0            |
| One-Time Startup:    | 0             |              |
| <b>Totals:</b>       | <b>0</b>      | <b>0</b>     |

**Additional Information / Prior Funding History:**