



DIVISION OF FIRE AND RESCUE SERVICES
MONTGOMERY COUNTY, MARYLAND

MEMORANDUM

Date: _____

TO: Whom It May Concern

FROM: Name: _____
Rank: _____

SUBJECT: Certification to Drive a Basic Life Support Unit

This memorandum certifies that Firefighter/Rescuer _____,
assigned to station _____ has been qualified to drive and operate a Montgomery
County Basic Life Support Unit known as Ambulance _____.

This certification is effective _____.

Name and Rank of DFRS Certifying Official

Date