



# Yolo County Emergency Medical Services Agency Certification

Revised Date: September 1, 2018

## DUPLICATE CARD REQUEST FORM

Please write clearly and answer all questions or your application may be rejected.

Name:	Email:	
Certificate #:	Expiration Date:	
Mailing Address:		
City:	State:	Zip:
Day Phone #:	Night Phone #:	

I hereby declare that my certification/accreditation card has been lost or stolen, and request that a duplicate card be issued. Furthermore, I certify that all information on this application, to the best of my knowledge is true and correct.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

### Duplicate Card Fee: \$25.00

Cashier Check or Money Order (No cash or personal checks)  
Payable to: **Yolo County EMSA** (fees are non-refundable)

*This application and **all** required items may be mailed, emailed, or placed in the drop box at the address above.  
The drop box is located across from the stairs and is labeled YEMSA drop box and is the **preferred method!**  
If you would like to meet with someone to drop off your paperwork, please make an appointment by calling (530) 666-8665.*

YEMSA USE ONLY			
Received:	Reviewed by:	Approved by:	Complete: