

November 18, 2020

VIA E-MAIL & HAND DELIVERY

alipsk@milwaukee.gov
Mr. Aaron Lipski, Acting Fire Chief
City of Milwaukee Fire Department
711 West Wells Street
Milwaukee, WI 53233

Attn: Mr. Joshua Parish, Acting Assistant Chief

VIA E-MAIL

jowcza@milwaukee.gov Mr. James Owczarski, City Clerk City of Milwaukee City Hall – Room 205 200 East Wells Street Milwaukee, WI 53202

RE: Midwest Medical Transport Company, LLC / City of Milwaukee, WI – Application for Ambulance Certification and Assignment of Ambulance Service Agreement for Service Area No. 1

SUBJ: Common Council File No. 200890 [or No. _____-TBD]: Resolution relating to certification of ambulance service providers for the city emergency medical service system (Application by Midwest Medical Transport Company, LLC for Ambulance Certification)

SUBJ: Common Council File No. ______: Resolution approving an Assignment and Assumption of the Private Ambulance Service Provider Agreement for Emergency Medical Services in Area #1 and Certificate for Area #1 from Paratech Ambulance Service, Inc. to Midwest Medical Transport Company, LLC

Dear Chief Parish and Mr. Owczarski:

I am writing on behalf of our client Midwest Medical Transport Company, LLC ("Midwest Medical Transport") as Midwest Medical Transport has negotiated an agreement to buy substantially all of the assets of Paratech Ambulance Service, Inc. ("Paratech") under an asset purchase agreement (the "Purchase Agreement"). The transaction under the Purchase Agreement is scheduled to close in early December.

As you know, Paratech is a contract partner with the City of Milwaukee for the Emergency Medical Services System under that certain Private Ambulance Service Provider Agreement for Emergency Medical Services in Area #1 in the City of Milwaukee (the "Area #1 Agreement")

Mr. Aaron Lipski, Acting Fire Chief Attn: Mr. Joshua Parish, Acting Assistant Chief and Mr. James Owczarski, City Clerk November 18, 2020 Page 2

and Paratech operates under a certificate from the City as a BLS provider for Area #1 (the "Area #1 Certificate").

The Purchase Agreement provides for Paratech to assign and Midwest Medical Transport to assume, subject to the approval of the City, the Area #1 Agreement as well as the Area #1 Certificate as the BLS provider for Area #1 in the City.

First, Midwest Medical Transport must be approved as a certified provider by the City for the balance of 2020 and for 2021. The Application for Ambulance Certification must be processed and reviewed in accordance with Section 75-15, Milwaukee Code of Ordinances, which application shall ultimately be approved by the Common Council as part of the pending certification Common Council File No. 200890 or a separate file to be introduced.

Accordingly, please find the following application materials:

- 1) Application for Ambulance Certification by Midwest Medical Transport Company, LLC d/b/a Paratech Ambulance;
- 2) Vehicle List;
- 3) Certificate of Insurance; and
- 4) Check in the amount of \$1,100.00 for the application fee.

As indicated in Midwest Medical Transport's application materials, Jeff Shullaw is the primary contact for any direct questions or additional information that may be needed.

Kindly process and review these materials and place them at the appropriate time in Common Council File No. 200890 or a separate file to be introduced.

Second, please consider this letter as Midwest Medical Transport and Paratech's request, pursuant to § 11 of the Area #1 Agreement. that the City approve the assignment and assumption of the Area #1 Agreement and the Area #1 Certificate from Paratech to Midwest Medical Transport. It is our understanding that a separate Common Council file and resolution will be introduced for the requested assignment.

By separate letter to Tyrone St. Junior, the Assistant City Attorney for the City's ambulance matters, I will forward an initial draft of an Assignment and Assumption of Ambulance Service Agreement for Area #1 and Approval by the City of Milwaukee.

Please do not hesitate to contact me, or any of the principals of the companies directly, should you or any other City officials have questions or comments regarding the transaction, the

Mr. Aaron Lipski, Acting Fire Chief **Attn**: Mr. Joshua Parish, Acting Assistant Chief and Mr. James Owczarski, City Clerk November 18, 2020 Page 3

Application for Ambulance Certification by Midwest Medical Transport, or the assignment request and approval process under § 11 of the Area #1 Agreement.

Thank you for your attention to this communication.

Very truly yours,

Davis & Kuelthau, s.c.

Brian C. Randall

BCR:las

Enclosures (to Chief Parish) / Attachments (all except check)

cc: All Via E-Mail (w/attachs.)

Tyrone St. Junior, Esq. – Assistant City Attorney

Mr. Jeff Shullaw – Midwest Medical Transport Company, LLC

Mr. Ed Matteson - Midwest Medical Transport Company, LLC

Mr. Robert A. Rauch – Paratech Ambulance Service, Inc.

Mr. Richard Romanshek – Paratech Ambulance Service, Inc.

Mr. Lawrence J. Knuth – Paratech Ambulance Service, Inc.

Mr. Paul Rauch – Paratech Ambulance Service, Inc.

City of Milwaukee Fire Department

Application for Ambulance Certification

Fee Must Accompany Application.

The license period is from January 1 to December 31. \$1,100.00 - New Applicants and Renewals Make check payable to the City of Milwaukee Fire Department

Che	ck(✔) one: ☐ Individual ☐ Partnership								
	Corporation (Limited Liability Company)								
1.	NAME OF APPLICANT (If individual):								
	NAME OF APPLICANT (If individual): Business Name: Midwest Medical Transport Company, LLC d/b/a Paratech Ambulance Phone: 833-526-5319								
	Business Address: 2155 33 rd Avenue								
	City: Columbus								
	Have any people on this application been convicted of violating any federal or state laws, or local ordinances? Yes N								
	If 'yes', name of person(s), date, charge, and penalty:								
2.	PARTNERSHIP (If applicable):								
	Name: _								
	Home Address:								
	City:								
	Phone: Date of Birth:								
	Name								
	Home Address:								
	City:								
	Phone: Date of Birth:								
2	NAME OF CORPORATION Midwest Medical Transport Company	LLC d/h/a Baratach Amh	ulanco						
	NAME OF CORPORATION Midwest Medical Transport Company, LLC d/b/a Paratech Ambulance Address: Headquarters: 2155 33 rd Avenue Columbus, NE 68601 Local: 9401 W. Brown Deer Road Milwaukee, WI 53224								
	Date and Place of Incorporation: February 23,2000, Columbus, NE								
	President: Jeff Shullaw								
	Home Address: 22112 Quail Circle								
	City: Elkhorn	State: <u>NE</u>	Zip: 68022						
	ml 400 000 000 C	Date of Birth <u>11/22</u>							
	Vice President: Jeff Shullaw		(- <u>X</u> ,						
	Home Address: 22112 Quail Circle								
		State: NE	Zip: 68022						
		Date of Birth: 11/22							
	Phone 402.800.2936	Date Of DRUIT 11/22	/ 0 /						

	Secretary: <u>Jeff Shullaw</u>								
	Home Address: 22112 Quail Circle								
	City: Elkhorn State: NE Zip: 68022								
	Phone 402.800.2936 Date of Birth 11/22/67								
	Treasurer: Jeff Shullaw								
	Home Address: 22112 Quail Circle								
	City: Elkhorn State: NE Zip: 68022								
	Agent: Jeff Shullaw								
	Home Address: 22112 Quail Circle								
	City: Elkhorn State: NE Zip: 68022								
4.	OTHER REQUIREMENTS: Do you have on file with the Fire Department, a valid and current certificate of insurance for this license period? Do you have a valid State of Wisconsin Inspection Certificate? Do you participate in the Emergency Medical Services System? Yes No								
	If yes, list service are a number: 1 Do you wish to participate in the Emergency Medical Services System? Yes No								
	Total number of vehicles in service: 10 Please attach a separate page listing all vehicles including city assigned number, and description (year, make and vin number).								
5.	The undersigned agrees to inform the Milwaukee Fire Department within ten days of any substantial changes in the information supplied in this application. The undersigned shall not willfully refuse to provide those services offered under this license, permit, or franchise, or refuse to employ, or discharge any person otherwise qualified because of race, color, creed, sex, national origin or ancestry; and not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.								
6.	The undersigned understand that this application does not entitle the applicants to a license and that the granting of licenses is solely in the discretion of the Common Council.								
7.	I have a knowledge of the City Ordinances currently regulating the license applied for herein, and being duly sworn under oath, depose and say that I am the person named above and that all statements made in the foregoing application are true and correct.								
	SUBSCRIBED AND SWORN TO BEFORE ME THIS 6 day of November, 2020 Individual/Corporate President/Partner:								
	Additional Partner/Corporate Vice President: MOTARY Notary Public, State of Wisconsin: My commission expires: March 25, 2023 Corporate Secretary: Corporate Treasurer:								
Do	Not Write Below This Line								
	Clark Liconsoft New Renewal Date Filled Date Granted								

Midwest Medical Transport Company, LLC d/b/a Paratech Ambulance

Vehicle List upon effective date of 2020 certification

Squad #	Year	Model	Туре		
109	2014	E350	Medix 90W		
110	2015	E350	Medix 90W		
111	2015	E350	Medix 90W		
114	2011	E350	Medix 90W		
120	2015	E350	Medix 90W		
122	2015	E350	Medix 90W		
127	2015	E350	Medix 90W		
129	2015	E350	Medix 90W		
130	2016	E350	Medix 90W		
134	2012	E350	Medix 90W		



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/11/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

	this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).										
PRODUCER						CONTACT NAME: Gina Schlake					
The Harry A. Koch Co. P.O. Box 45279				PHONE FAX (A/C, No, Ext): (A/C, No):							
Omaha NE 68145				E-MAIL ADDRESS: gina.schlake@hakco.com							
٥.,	MIN 142 00140				ADDRE						
								RDING COVERAGE	-	NAIC#	
INSU	PED			MID16775	INSURER A: MMIC Insurance				16942		
	west Medical Transport Company	LLC:	Midy		INSURER B: Old Republic				24147		
Tra	nsportation Company, LLC:				INSURER C: Depositors Insurance Company				42587		
Mic	west Medical Group, LLC; Platte C	ount	y Am	nbulance	INSURER D:						
	20 S 147th Street, Suite 101				INSURER E :						
Um	aha NE 68137				INSURER F:						
CO	VERAGES CER	TIFIC	CATE	NUMBER: 46790059	REVISION NUMBER:						
TH	IS IS TO CERTIFY THAT THE POLICIES	OF I	INSUF	RANCE LISTED BELOW HAY	/E BEE	N ISSUED TO	THE INSURE	ED NAMED ABOVE FOR TH	IE POL	ICY PERIOD	
IN CE	DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY (CLUSIONS AND CONDITIONS OF SUCH	QUIF PERT	remei Ain,	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF AN' ED BY	Y CONTRACT THE POLICIE:	OR OTHER : S DESCRIBE	DOCUMENT WITH RESPECT D HEREIN IS SUBJECT TO	T TO V	VHICH THIS	
INSR LTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
A	X COMMERCIAL GENERAL LIABILITY	INSD	WVD	MFP000614		(MM/DD/YYYY) 6/1/2020	(MM/DD/YYYY) 6/1/2021			000	
	CLAIMS-MADE X OCCUR			1911 1 000014		G/ 1/2020	0/1/2021	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000			
								MED EXP (Any one person)	\$ 10,000	0	
								PERSONAL & ADV INJURY	\$ 1.000.000		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 3,000,000		
	POLICY PRO- X LOC							PRODUCTS - COMP/OP AGG	\$ 3,000,000		
	OTHER:							TROBUSTO COMPTOT AGG	\$ 3,000,000		
В	AUTOMOBILE LIABILITY			MWTB31357520 - All other v	ehicles	6/1/2020	6/1/2021	COMBINED SINGLE LIMIT	\$ 1,000,000		
С	X ANY AUTO			ACPBA3028832343 - Private		6/1/2020	6/1/2021	(Ea accident) BODILY INJURY (Per person)	\$ 1,000,000		
	OWNED SCHEDULED			Passenger Autos				1			
	AUTOS ONLY AUTOS HIRED NON-OWNED AUTOS ONLY AUTOS ONLY						BODILY INJURY (Per accident) PROPERTY DAMAGE				
								(Per accident)			
	X PP-Scheduled	duled							\$		
Α	UMBRELLA LIAB OCCUR MFP000614			6/1/2020	6/1/2021	EACH OCCURRENCE	\$ 9,000,000				
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$ 9,000,000				
	DED RETENTION \$	DED RETENTION \$							\$		
8	WORKERS COMPENSATION			MWC31357620		6/1/2020	6/1/2021	X PER OTH-			
	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	\$ 1,000,000		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE			
	If yes, describe under										
A	DÉSCRIPTION OF OPERATIONS below Professional Liability			MFP000614	6/1/2020		6/4/2024	E.L. DISEASE - POLICY LIMIT Per Claim	\$1,000,000		
	Retro 10/20/2015			WIFF000014		6/1/2020	6/1/2021	Aggregate	\$3,000		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Umbrella policy is excess of the General Liability, Auto Liability, Workers' Compensation Employers liability and Professional Liability policies. The General Liability policy have been endorsed to provide 30 days' notice of cancellation.											
CEF											
CERTIFICATE HOLDER CANCELLATION											
City of Milwaukee Fire Department 711 West Wells Street Milwaukee WI 53233				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
				AUTHORIZED REPRESENTATIVE Third Comments The comments of the							

Great Western Bank Midwest Medical Transport Company Improving Life Through Medicine in Motion 4020 S 147th St, Ste 101 Omaha, NE 68137 APclerk@MMTdirect.com

78-873/914

PAY TO THE ORDER OF_

CITY OF MILWAUKEE FIRE DEPARTMENT

**1,100.00

11/16/2020

DOLLARS

0

15582

CITY OF MILWAUKÉE FIRE DEPARTMENT

Void after 180 days

땅그병 **6 6** 图主图 TOWN TREET

UTHORIZED SIGNATURE

МЕМО

1:0914087341 #*O 1558 2#* 149501341

Midwest Medical Transport Company

CITY OF MILWAUKEE FIRE DEPARTMENT

11/16/2020

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1,100.00

Great Western - Oper

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