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## HCFAS Green Light Authorization

Name: \_\_\_\_\_ Membership #: \_\_\_\_\_

Address: \_\_\_\_\_ EMT #: \_\_\_\_\_

Town: \_\_\_\_\_ EMT Expiration: \_\_\_\_\_

Primary Shift: \_\_\_\_\_ Operational Status: \_\_\_\_\_

As an active operational member, I hereby apply to the Chief of the Huntington Community First Aid Squad for authorization to display a green light on my private motor vehicle. The use of the green light is allowed only when the member has been approved by the Dispatcher or officer in charge to respond to headquarters or a specified scene location.

I understand that according to Section 375 of the New York State Vehicle and Traffic Law, that this green light **does not** permit me to break **ANY** traffic laws. While the green light is in use, it does not permit me to pass a red traffic signal or stop sign, or to exceed the posted speed limit.

I understand that the Huntington Community First Aid Squad will not accept liability for any vehicle that is involved in a traffic accident or receives a traffic summons while en route to an emergency call if **ALL** traffic laws are not observed.

I further understand that if I am involved in a motor vehicle accident with a green light in use, my personal insurance company will be my representative and will provide primary coverage.

The green light may be used for identification purposes if the user comes across and emergency scene. Under **NO** circumstances may the green light be used for "Ambulance Chasing" or responding to scenes without prior authorization.

I have read and understand the above listed rules and regulations of green light authorization and agree to follow all of the rules and regulations pertaining to green light users as listed in section 375 of the New York State Vehicle and Traffic Law, the NYS Department of Motor Vehicles and the Huntington Community First Aid Squad. I further understand that this authorization can be revoked by the squad Chief or his designee at any time.

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Chief Signature: \_\_\_\_\_ Date: \_\_\_\_\_