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# Volunteer Fire Assistance

# 2016 Phase II Grant Application

#### Application Directions

* Fill out application completely. Incomplete applications will not be accepted.
* The maximum funding request per applicant is **$12,000**.
* A 50% applicant match is required (one dollar of match for each grant dollar expended).
* Applicants may only submit one application. Application must be signed by the Fire Chief or a Commissioner (see Section F)
* Submit completed and signed application by one of the following methods:
  + Email: [fepp\_assist@dnr.wa.gov](mailto:fepp_assist@dnr.wa.gov), or
  + Mail: Resource Protection Division

ATTN: 2015 Phase II Grant Applications

Washington State Department of Natural Resources

1111 Washington Street SE

Olympia, WA 98504

* Applications must be received by DNR no later than 5:00 PM on November 30, 2015.

#### Contact Information

1. Applicant:       Fire District/Fire Department (Full Name)
2. Mailing Address:

Street City Zip Code + 4

     

County Contact Email

1. Contact Name:

Printed Name Phone

(XXX-XXX-XXXX)

Title

1. Applicant DUNS number:       (must be provided)

* *If the applicant doesn’t have a DUNS number, one can be obtained at* [*https://fedgov.dnb.com/webform*](https://fedgov.dnb.com/webform)*)*

#### Eligibility Information

1. Fire district service area provides fire protection to which of the following. Check appropriate box and provide community name(s):

Rural area or rural community with a population of 10,000 or fewer residents

Community Name(s)

Community of more than 10,000 residents AND a service area that includes a rural community of fewer than 10,000 residents (funding must be used to benefit the rural community)

Community Name(s)

None of the above *(Not eligible to apply)*

1. Does applicant have a current agreement with DNR? Check appropriate box. Provide the DNR agreement number.

No Agreement *(Not eligible to apply)*

Forest Land Response Agreement and Federal Grant Agreement

Agreement Number

Fire District Assistance Agreement

Agreement Number

1. Does applicant have a current agreement to provide wildland fire suppression support to federal jurisdiction within or adjacent to your jurisdiction? *(Considered in prioritization but not required for eligibility)*

No  Yes - If yes, check appropriate box for federal agency(s)

Bureau of Land Management  US Forest Service  National Park Service

Bureau of Indian Affairs (BIA)  US Fish & Wildlife Service

#### Fire District/Department Information

1. Number of all Fire Staff       Number of Volunteer Fire Staff
2. Check appropriate box identifying if applicant has previously received funding under this program:

Last year  2 years ago  Not within the past 2 years  Never

1. Fire Operating Budget:
2. Average No. of Annual Wildfire Responses:
3. Current ISO Insurance Rating Number:

Is project required to reduce or maintain Current Insurance Rating Number?  Yes  No

1. **Funding Request**

Provide the following information for the project:

1. Project Category – check only one box *(Firefighter Property refers to vehicles obtained through the Firefighter Property Program)*

FEPP generator replacement  Firefighter Property Acquisition/Refurbishment (vehicles)

Fire Equipment – non vehicle  Non-Firefighter Property Acquisition/Refurbishment (vehicles)

Communications  Training

Fire Prevention  Dry Hydrant

1. Provide a narrative describing the project, how the project improves fire response, and fire district ability to complete the project within the grant term.

1. Complete the “Project – Cost Summary” detailing required purchases and funding source (grant dollars, applicant match, donations, in-kind labor) required to complete the project.(Note: Sub-total and total columns calculate automatically after data entry and using the tab key to move to the next field)

**Do not enter commas or dollar signs when entering Project Cost Breakdown fields**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Project - Cost Summary** | | | | | |
| **2015 VFA Phase II** | | | | | |
| 1. **Project Requirements** | | | 1. **Project Cost Breakdown** | | |
| **List all equipment, material, labor, etc. required to complete the project.** | | | **Grant Funding** | **District Match** | **Totals** |
|  | | |  |  | **$0.00** |
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|  | | |  |  | **$0.00** |
| Applicable Sales Tax (if not included above) | | |  |  | **$0.00** |
| **Sub-total** | | | **$0.00** | **$0.00** | **$0.00** |
| **Donations - list type** | | | **Grant Funding** | **District Match** | **Totals** |
|  | | | N/A |  | **$0.00** |
|  | | | N/A |  | **$0.00** |
|  | | | N/A |  | **$0.00** |
|  | | | N/A |  | **$0.00** |
| **Sub-total** | | | **$0.00** | **$0.00** | **$0.00** |
| **In-Kind Labor - list type** | **Rate/Hr** | **Hours** | **Grant Funding** | **District Match** | **Totals** |
|  | 16.00 |  | N/A | $0.00 | **$0.00** |
|  | 16.00 |  | N/A | $0.00 | **$0.00** |
|  | 16.00 |  | N/A | $0.00 | **$0.00** |
|  | 16.00 |  | N/A | $0.00 | **$0.00** |
| **Sub-total** | | | **$0.00** | **$0.00** | **$0.00** |
| **Total Project Costs** | | | **$0.00** | **$0.00** | **$0.00** |

#### Signature Block

I certify that:

* The information provided is true and accurate to the best of my knowledge
* If awarded a grant, applicant will comply with the following:
  + All grant costs submitted for reimbursement and all required applicant match represent project expenses/contributions incurred after the date of grant award.
  + Fiscal records pertaining to the grant award must be kept for three years after the final grant payment or any dispute resolution.
  + Federal regulations relating to equipment and supplies acquired by state and local governments (7CFR 3016.32: Equipment)
  + All appropriate state and federal laws, rules and regulations.

Authorized Representative

     

Printed Name Title

Signature Date