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| Utah Fire Department Assistance Grant Application 2023 |
| 1. | Department: |       | 2. | FDID # |       | Fed Employer ID # |       |
|  |  |  |  | UEI # |       | CFDA # | 10.664 |
| 3.  | Address: |       | 4.  | City: | 5. | Zip Code: | 6. | County: |
|  |  |  |       |       |       |
| 7.  | Contact Person: |       | 8.  | Title: |       | 9. | Daytime Phone: |       |
| 10.  | Cellular Phone: |       | 11. | Fax: |       | 12. | Email: |       |
| 13. Group Application(Enter each additional Dept’s Name, FDID#, UEI’s# and Fed EIN#) | **Dept. Name** | **FDID** | **UEI’s** | **Fed EIN#** |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
| 14.  | Is Department NIMS compliant? | **Yes** |  | **No** |   | 15.  | RESERVED do not answer | **Yes** |  | **No** |  |
| 16. | If your Department includes members who have not been trained and certified, does this application request assistance for training and/or certification?  | **Yes** |  | **No** |  |
|  | If yes, how many new wildland qualified members do you expect to add through this request? |       |
| 17. | What is the percentage of the department personnel that are on call only? |       |
| 18.. | Number of NWCG Wildland Firefighter II or NFPA Wildland Firefighter I? |       |
| 19. | Total number of department Personnel? |       |
| 20. | How many qualified NWCG single resource and above personnel? |       |
| 21. | Does this request include the buildup of FEPP Equipment?  | **Yes** |  | **No** |  |
| 22.  | A. Does Department participate in the State Wildland fire UWRMOU Program? | **Yes** |  | **No** |  |
|  | B. Does this request include items to meet provisions of the State Wildland UWRMOU Program or NWCG standard? | **Yes** |  | **No** |  |
|  | C. Does this request include items to bring the Department to NFPA Standards? | **Yes** |  | **No** |  |
|  | D. Does Department participate in the Utah Wildland Fire Management Program? (Fire Policy) | **Yes** |  | **No** |  |
| 23.  | How will Dept. provide matching portion? | In-kind Services/Donated Labor? |   | Dept. Budget/Donated Funds? |   |
| 24. | If your Department is selected for a grant, the grant will be a 100% match, this equates to dollar for dollar. |
| 25. | **Does the Department serve a rural population?** ***Check only One:***(Refer to application instructions for assistance in selection of appropriate category) | Category 1 |   | Category 3 |   | Category 5 |   |
|  |  | Category 2 |   | Category 4 |   |  |  |
|  | **If your Department serves an area in category 2,3, or 4 List them** |       |
| 26. | Check all categories that apply below |
|  | Border Federal lands |   | Borders State lands |   | Does not respond to Federal fires |   |  |
| 27. | A. Does the Department respond to wildland fires on DOI lands? | Yes |   | No |   |  |
|  | B. Does the Department respond to wildland fires on USFS lands? | Yes |   | No |   |  |
| 28.  | Total all incident responses in 2022 |       | 30... | A. Wildfire responses in area to DOI lands 2022 |       |
| 29..  | Total wildfire responses in 2022 |       |  | B. Wildfire responses in area to USFS lands 2022 |  |
|  |  |  |  | C. Wildfire responses in area to State Lands in 2022 |  |
| 31. | A. Department currently has **complete and fully approved (NWCG)** wildland personal protective equipment (PPE) for all members? | Yes |   | No |   |
|  | B. If No, does this application request NWCG wildland PPE? |       |
|  | C. If not, how many members are ***not***equipped with PPE? |       |
| 32. | A. Does Dept. have interoperable VHF radio communications for all seated positions in all apparatus? | Yes |   | No |   |
|  | B. If no, will this request be used for radio communication needs?[Refer to radio spec sheet for communication purchases]  | Radios (P 25 compliant) |  |
|  | C. How many seated positions? |       |  |
| 33.. | A. Did you receive a grant from this program last year? | Yes |   | No |   |
|  | B. If so, did you complete the projects/purchases that were funded? | Yes |   | No |   |
| 34.. | What is the total Community At Risk Score (CARS) for all communities within your service area? |      No  |
| 35.. | How many CWPPs are in your fire protection jurisdiction?  |       |
| 36. | Is this a new Fire Department? | Yes |   | No |   |
| 37. | Is the lack of requested equipment hampering your efforts to suppress wildfires? | Yes |   | No |   |

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| **Section II** |
| Training – Wildland FireDescribe your departments training request |
| 38.  | Describe in 200 words or less: **See Program Guidance**. |
|       |
| 39. | How will project improve/extend existing conditions or circumstances? |
|       |
| 40. | **Itemized Grant Request** Include materials, equipment, books, per-diem, lodging, mileage, etc. | **Wildland** |
| Description | Quantity | Cost | Total |
| 1 |       |       |       | $ 0.00 |
| 2 |       |       |       | $ 0.00 |
| 3 |       |       |       | $ 0.00 |
| 4 |       |       |       | $ 0.00 |
| 5 |       |       |       | $ 0.00 |
| 6 |       |       |       | $ 0.00 |
| 7 |       |       |       | $ 0.00 |
| 8 |       |       |       | $ 0.00 |
| 9 |       |       |       | $ 0.00 |
| 10 |       |       |       | $ 0.00 |
| 11 |       |       |       | $ 0.00 |
| 12 |       |       |       | $ 0.00 |
| 13 |       |       |       | $ 0.00 |
| 14 |       |       |       | $ 0.00 |
|  | Total Training – Wildland Fire Request | $ 0.00 |

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| 41. | Prepared by: (Please Print) |       | Title: |       |
| Signature: |       | Date: |       |

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| **Section II cont.** |
| Personal Protective Equipment– Wildland FireDescribe your departments Fire Equipment and Apparatus request. |
| 42.  | Describe in 200 words or less: **See Program Guidance**. |
|       |
| 43. | How will project improve/extend existing conditions or circumstances? |
|       |
| 44. | **Itemized Grant Request**  | **Wildland** |
| Description | Quantity | Cost | Total |
| 1 |       |       |       | $ 0.00 |
| 2 |       |       |       | $ 0.00 |
| 3 |       |       |       | $ 0.00 |
| 4 |       |       |       | $ 0.00 |
| 5 |       |       |       | $ 0.00 |
| 6 |       |       |       | $ 0.00 |
| 7 |       |       |       | $ 0.00 |
| 8 |       |       |       | $ 0.00 |
| 9 |       |       |       | $ 0.00 |
| 10 |       |       |       | $ 0.00 |
| 11 |       |       |       | $ 0.00 |
| 12 |       |       |       | $ 0.00 |
| 13 |       |       |       | $ 0.00 |
| 14 |       |       |       | $ 0.00 |
|  | Total PPE–Wildland Fire Request | $ 0.00 |

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| 45. | Prepared by: (Please Print) |       | Title: |       |
| Signature: |       | Date: |       |

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| **Section II cont.** |
| Communications– Wildland FireDescribe your department’s Communications request. |
| 46.  | Describe in 200 words or less: **See Program Guidance**. |
|       |
| 47. | How will project improve/extend existing conditions or circumstances. |
|       |
| 48. | **Itemized Grant Request**  | **Wildland** |
| Description | Quantity | Cost | Total |
| 1 |       |       |       | $ 0.00 |
| 2 |       |       |       | $ 0.00 |
| 3 |       |       |       | $ 0.00 |
| 4 |       |       |       | $ 0.00 |
| 5 |       |       |       | $ 0.00 |
| 6 |       |       |       | $ 0.00 |
| 7 |       |       |       | $ 0.00 |
| 8 |       |       |       | $ 0.00 |
| 9 |       |       |       | $ 0.00 |
| 10 |       |       |       | $ 0.00 |
| 11 |       |       |       | $ 0.00 |
| 12 |       |       |       | $ 0.00 |
| 13 |       |       |       | $ 0.00 |
| 14 |       |       |       | $ 0.00 |
|  | Total Communications – Wildland Fire Request | $ 0.00 |

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| 49. | Prepared by: (Please Print) |       | Title: |       |
| Signature: |       | Date: |       |

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| **Section II cont.** |
| Fire Equipment and Apparatus – Wildland FireDescribe your departments Fire Equipment and Apparatus request. |
| 50.  | Describe in 200 words or less: **See Program Guidance**. |
|       |
| 51. | How will project improve/extend existing conditions or circumstances. |
|       |
| 52. | **Itemized Grant Request**  | **Wildland** |
| Description | Quantity | Cost | Total |
| 1 |       |       |       | $ 0.00 |
| 2 |       |       |       | $ 0.00 |
| 3 |       |       |       | $ 0.00 |
| 4 |       |       |       | $ 0.00 |
| 5 |       |       |       | $ 0.00 |
| 6 |       |       |       | $ 0.00 |
| 7 |       |       |       | $ 0.00 |
| 8 |       |       |       | $ 0.00 |
| 9 |       |       |       | $ 0.00 |
| 10 |       |       |       | $ 0.00 |
| 11 |       |       |       | $ 0.00 |
| 12 |       |       |       | $ 0.00 |
| 13 |       |       |       | $ 0.00 |
| 14 |       |       |       | $ 0.00 |
|  | Total Equipment & Apparatus– Wildland Fire Request | $ 0.00 |

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| 53. | Prepared by: (Please Print) |       | Title: |       |
| Signature: |       | Date: |       |

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| **Section II cont.** |
| Fire Prevention – Wildland FireDescribe your departments Fire Prevention request. |
| 54.  | Describe in 200 words or less: **See Program Guidance**. |
|       |
| 55. | How will project improve/extend existing conditions or circumstances? |
|       |
| 56. | **Itemized Grant Request**  | **Wildland** |
| Description | Quantity | Cost | Total |
| 1 |       |       |       | $ 0.00 |
| 2 |       |       |       | $ 0.00 |
| 3 |       |       |       | $ 0.00 |
| 4 |       |       |       | $ 0.00 |
| 5 |       |       |       | $ 0.00 |
| 6 |       |       |       | $ 0.00 |
| 7 |       |       |       | $ 0.00 |
| 8 |       |       |       | $ 0.00 |
| 9 |       |       |       | $ 0.00 |
| 10 |       |       |       | $ 0.00 |
| 11 |       |       |       | $ 0.00 |
| 12 |       |       |       | $ 0.00 |
| 13 |       |       |       | $ 0.00 |
| 14 |       |       |       | $ 0.00 |
|  | Total Prevention– Wildland Fire Request | $ 0.00 |

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| 57. | Prepared by: (Please Print) |       | Title: |       |
| Signature: |       | Date: |       |

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| **Section II cont.** |
| Special Needs / Other – Wildland FireDescribe your departments special / other needs request. |
| 58. | Describe in 200 words or less: **See Program Guidance**. |
|       |
| 59. | How will project improve/extend existing conditions or circumstances. |
|       |
| 60. | **Itemized Grant Request**  | **Wildland** |
| Description | Quantity | Cost | Total |
| 1 |       |       |       | $ 0.00 |
| 2 |       |       |       | $ 0.00 |
| 3 |       |       |       | $ 0.00 |
| 4 |       |       |       | $ 0.00 |
| 5 |       |       |       | $ 0.00 |
| 6 |       |       |       | $ 0.00 |
| 7 |       |       |       | $ 0.00 |
| 8 |       |       |       | $ 0.00 |
| 9 |       |       |       | $ 0.00 |
| 10 |       |       |       | $ 0.00 |
| 11 |       |       |       | $ 0.00 |
| 12 |       |       |       | $ 0.00 |
| 13 |       |       |       | $ 0.00 |
| 14 |       |       |       | $ 0.00 |
|  | Total Special / Other Needs - Wildland Fire Request | $ 0.00 |

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| 61. | Prepared by: (Please Print) |       | Title: |       |
| Signature: |       | Date: |       |