

Western States Wildland Urban
Interface Grant Application

FOR OFFICIAL USE ONLY	
State Submitting Project:	
State Priority Number:	
Dollar Amount Requested:	
Matching Share:	

*For guidance on filling in each box in this application, refer to the *Criteria and Instructions to States*

Applicant Information	
1	Applicant:
	Contact Person:
	Address:
	City/Zip Code:
	Phone (Work/Cell):
	Email:
	Fax:

Community At Risk Information	
2	Name of Project:
	Community Name:
	County(ies):
	Congressional District:
	Latitude:

Grant Contributors (Matching Share)							
(Applications will be disqualified if insufficient match is identified; federal dollars DO NOT qualify- see criteria & instructions for exception)							
Specify each match contributor and the dollar amount of each contribution.							
DO NOT show grant requested funds in this table. This is for matching share only.							
3	Contributors Name:						TOTAL
	Dollars (Hard Match):						
	In-Kind (Soft Match):						
	TOTAL:						

Total Project Expense (break down matching share totals from block #3)					
4	Budget Detail (Provide additional information in Block 7)	Grant Share (\$ Amount Requested)	Match (from block #3)		TOTAL
			Dollars	In-Kind	
	Personnel / Labor:				
	Fringe Benefits:				
	Travel:				
	Equipment:				
	Supplies:				
	Contractual:				
	Construction:				
	Other:				
	Indirect Costs:				
	TOTAL:				

5	Project Summary (check all that apply and answer related questions)		
	Project Category 1: Hazard Fuels Reduction / Fire Adapted Ecosystem Restoration		
	Number of acres to be treated:		Estimated cost per acre:
	Number of communities directly affected by this project:		
	Project Category 2: Information & Education		
	Number of citizens to be reached:		
	Project Category 3: Planning		
Number of residences affected:			

6	Project Area Description	
	<p>All information for the project must fit into the allotted box provided below. Attachments will not be considered by the review committee.</p>	

7	Scope of Work	
	<p>All information for the project must fit into the allotted box provided below. Attachments will not be considered by the review committee.</p>	

8	Interagency Collaboration All information for the project must fit into the allotted box provided below. Attachments will not be considered by the review committee.
	Community Wildfire Protection Plan (CWPP)
	Does this community have a wildfire protection plan that follows the Healthy Forest Restoration Act CWPP guidelines? (choose one)
	Is this project part of the plan? (choose one)
	Where would we obtain a copy of this plan?

9	Landscape Scale All information for the project must fit into the allotted box provided below. Attachments will not be considered by the review committee.

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Project Timeline

All information for the project must fit into the allotted box provided below.
Attachments will not be considered by the review committee.

Maintenance / Sustainability

All information for the project must fit into the allotted box provided below.
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