



Part II – GRANT APPLICATION PLANNING TOOL AND INSTRUCTIONS

***This document is for planning purposes only.
Do not submit this as your application.***

Applications must be submitted online at: <http://grants.firesafecouncil.org>

1. APPLICATION SNAPSHOT

a. Applicant Organization Name:	Ember Falls Home Owners Association
b. Fiscal Sponsor Organization Name:	Carbonaceous Fire Safe Council
c. Project Name:	Brush Bash 2013
d. Funding Requested:	\$19,575
e. Matching Funds Provided:	\$20,500
f. Type of Project:	Education <input checked="" type="checkbox"/> Fuel Treatment Planning
g. Total acreage of project footprint(Fuels Projects Only):	12 acres
h. If this is an ongoing or maintenance project, please identify the name and the grant number of the project under which the earlier parts of the project were funded.	Grant name: Brush Bash 2012 Grant number: 12USFS-SFA 1234

- Enter the name of the organization applying for funding.
- Enter the name of the organization that is acting as fiscal sponsor for this project (If applicable). If your project is selected for funding, your fiscal sponsor will be the authorized recipient of the grant funds. (Fiscal Sponsor's Only)
- Enter the name of the proposed project (be descriptive and interesting).
- Enter the amount of grant funding you are requesting for this project.
- Enter the amount of matching funds your organization and your partners will provide to this project.
- Check the boxes to indicate the type(s) of project you are planning. Example: Fuel Treatment and Education.



- g. Enter the total acreage of the project's footprint. The "footprint" of your project is the area where planned treatment(s) will occur on the ground. It does not include access and egress to the project.

ORGANIZATIONAL INFORMATION

2. Organization Name

Provide the name of the organization applying for funding.

Ember Falls Homeowner's Association

3. Organization Address

Provide this information for the applicant organization.

Address1: 1213 Jackpot Ravine

Address2:

City: Ember Falls State: CA Zip: 99999

4. Primary Contact Person

Provide the contact information for the person who will manage the project.

First Name: Forest Last Name: Stranger

Phone: 555-555-5555 Fax: same

E-mail: grants@firesafecouncil.org

5. Administrative Contact Person

Provide this information for the person who will be the contact for administrative matters. This person will serve as a backup in the absence of the primary contact person. The Administrative Contact must be a different person from the Primary Contact.

First Name: Robin Last Name: Redbreast

Phone: 555-555-5555 Fax: same

E-mail: grants@firesafecouncil.org

6. Type of Organization

Select the appropriate entity. The applicant organization must have legal standing to apply for a grant from the California Fire Safe Council. If you are a Nonprofit, For-Profit or Other organization, you must be incorporated to do business in the State of California or the State of Nevada and you must have a Federal Employer Identification Number/Federal Tax Identification Number (FEIN/FTIN). If you do not meet these requirements, you must identify a fiscal sponsor



that has legal standing to act as your co-applicant. If you are applying from a state agency, you must have spending authority; contact your budget office to learn more.

- Nonprofit Organization
- Home/Property Owners Association
- Native American Tribe
- Non-Federal Government Agency – Please specify:
- For-Profit Company
- Other — Please specify:

7. If you answered “Nonprofit Organization” in question #6, under what section of the Internal Revenue Code is your organization incorporated (e.g., 501(c)(3), 501(c)(4), etc.)?

Please refer to your IRS nonprofit determination letter for this information.

N/A

If your organization is a 501(c)(3) nonprofit, please provide your IRS number from your IRS nonprofit determination letter.

N/A

Enter your organization’s DUNS number here: none

Enter your D&B DUNS number. For more information, please see:

http://www.grants.gov/applicants/organization_registration.jsp and
<https://iupdate.dnb.com/iUpdate/viewiUpdateHome.htm> .

Enter your Central Contractor Registration (CCR) number here: none

Enter your CCR number. For more information, please see: <https://www.bpn.gov/ccr/> .

NOTE: *Unless you have a fiscal sponsor, your organization is required to have a DUNS number to apply for a Clearinghouse grant. If your organization’s project is selected for funding, you will need to secure a CCR number prior to receiving funds.*

8. Describe how your organization has the capacity to manage federal funds

A complete answer includes answers to a, b and c. Funders have a responsibility to give grants to organizations that demonstrate the ability to effectively manage funds and projects from start to finish. History and major accomplishments are indicators of organizational capability.

a. When was your organization formed or incorporated (Date/Year)? July 1996



- b. Describe the roles and responsibilities of key staff and board members, and any volunteer staff.** We have no paid staff. Our volunteer HOA coordinator and assistant coordinator will organize the project. The HOA members must approve any changes to the project plan. Our fiscal sponsor, the Carbonacious Fire Safe Council will be depositing grant payments into an account that they manage and making payments to the project contractors and material suppliers.
- c. Describe 2 major accomplishments achieved through federal grants (Indicate grant number and year) and 2 major accomplishments achieved through non-federal grants (such as donations or private grants).** Our 2010 BLM funded Ca. Fire Safe Council grant-funded "Fire Works" project resulted in hazardous fuel reduction on 45 acres immediately adjacent to our subdivision through the use of prescribed fire. Then with our 2011 Fire Safe council grant we were able to masticate and burn another 55 acres , forming a treated buffer around the notehrn half of the subdividsion. These two projects had the unexpected effect of drawing the homeowners closer together, resulting in more trust of their neighbors and a greater willingness to work for the common good. This resulted in the creation of a homeowner's garden club that emphasizes residential landscaping with fire-resistive plants, and also a "Carpool Club" and phone tree that people can use to get their kids to-and-from school on bad weather days.

9. Does your organization have a fiscal sponsor?

The applicant organization must have legal standing to apply for a grant from the California Fire Safe Council. If you are a Nonprofit, For-Profit or other organization, you must be incorporated to do business in the State of California or the State of Nevada and you must have a Federal Employer Identification Number/Federal Tax Identification Number (FEIN/FTIN). If you do not meet these requirements, you must identify a fiscal sponsor that has legal standing to act as your financial administrator.

Yes No

If you answer yes, please complete questions 10-16 on behalf of your fiscal sponsor.

If you answer no, please skip to question 17

REMEMBER: *If you have a fiscal sponsor, they must submit a fiscal sponsor agreement letter.*

10. Briefly describe the types of services your fiscal sponsor will provide for this project.

Fiscal sponsors play many roles in your project. Please describe what services they will provide for this project, such as project management, staffing, financial administration, accounting



services or audit oversight. Fiscal Sponsor will provide only financial management and accounting services.

11. Fiscal Sponsor Organization Name

Enter your fiscal sponsor's organizational name. If your project is selected for funding, your fiscal sponsor will be the authorized recipient of the grant funds.

Carbonaceous Fire Safe Council

12. Fiscal Sponsor Organization Address

Provide this information for the fiscal sponsor.

Address1: 5000 Puzzle Piece Place

Address2:

City: Carbonaceous

State: CA

Zip: 99999

13. Fiscal Sponsor Contact Person

Enter this information for the person who will manage the grant fund. The Fiscal Sponsor Contact must be a different person than the Applicant's Primary and Administrative Contacts.

First Name: Lotta

Last Name: Cash

Phone: 555-555-5555

Fax: same

E-mail: grants@firesafecouncil.org

14. Fiscal Sponsor Organization Type

Pick one from the menu. If the applicant organization does not have legal standing, than the fiscal sponsor must. For example, if you are a Nonprofit, Profit or other organization, you must be incorporated to do business in the State of California or the State of Nevada and have a Federal Employee Identification Number (EIN).

- Nonprofit Organization
- Home/Property Owners Association
- Native American Tribe
- Non-Federal Government Agency – Please specify:
- For-Profit Company
- Other — Please specify:

15. FISCAL SPONSOR: If you answered "Nonprofit Organization" in question #14, under what section of the Internal Revenue Code is your organization incorporated (e.g., 501(c)(3), 501(c)(4), etc.)?



Please refer to your IRS nonprofit determination letter for this information.

501(c)(4)

If your organization is a 501(c)(3) nonprofit, please provide your IRS number from your IRS nonprofit determination letter.

123-45678

Enter your organization's DUNS number here: 123XYZ

Enter your D&B DUNS number. For more information, please see:

http://www.grants.gov/applicants/organization_registration.jsp and
<https://iupdate.dnb.com/iUpdate/viewiUpdateHome.htm> .

Enter your Central Contractor Registration (CCR) number here: ABC123

Enter your CCR number. For more information, please see: <https://www.bpn.gov/ccr/> .

NOTE: *Your organization is required to have a DUNS number to apply for a Clearinghouse grant. If your organization's project is selected for funding, you will need to secure a CCR number prior to receiving funds.*

FISCAL SPONSOR:

16. Describe how your organization has the capacity to manage federal funds

A complete answer includes answers to a, b and c. Funders have a responsibility to give grants to organizations that demonstrate the ability to effectively manage funds and projects from start to finish. History and major accomplishments are indicators of organizational capability.

- a. When was your organization formed or incorporated (Date/Year)?** Sept. 1989
- b. Describe the roles and responsibilities of key staff and board members, and any volunteer staff.** Denny Droconus–Project Coordinator, performs accounting and project coordination. Checks are signed by Denny Droctonus and Wally Adelgid, Board members. Khnum Burz–Bookkeeper–Reviews invoices, receipts, payroll and bank statements monthly.
- c. Describe 2 major accomplishments achieved through federal grants (Indicate grant number and year) and 2 major accomplishments achieved through non-federal grants (such as donations or private grants).** Recent activities and accomplishments include the completion of a 2009 clearinghouse grant project (10BLM 0234) to clear vegetation and create safe areas in the retirement community of Decadent Springs, and with funding from another Clearinghouse



grant, 11NPS 0235) we were able to conduct a successful county-wide effort to contact new home buyers about fire-hazard reduction, defensible space, and fire safe home upgrades.

FINANCIAL INFORMATION

<p>17. Funding Requested <i>Enter the amount of grant funding you are requesting for this project. This amount must match the amount in 1k of Question #48. Enter whole dollars (no cents). Do not use any punctuation.</i></p>	<p>\$19,575</p>
<p>18. Matching Funds Provided (all sources) <i>Enter the amount of matching funds your organization and your partners will provide to this project. This amount must match the total amount in Question #48. Enter whole dollars (no cents). Do not use any punctuation.</i></p>	<p>\$20,500</p>
<p>19. Total Project Cost <i>Line 17 plus line 18.</i></p>	<p>\$40,075</p>
<p>20. Percentage of Match to <u>Total Project Cost</u> <i>Line 18 divided by line 19 multiplied by 100.</i></p>	<p>51%</p>

PROJECT DESCRIPTION

21. Describe the proposed project and how it addresses wildfire survivability in the project area?
Briefly describe the project, how it will address and reduce wildfire hazards and the prescription for treatment.

- a. **What is the problem?** The community of Ember Falls is a remote area almost 20 minutes from the nearest fire station. There are frequent fires in the area due to lightening, and the Highway, ¼ mile away is also a potential source of ignition. Homeowners have created 100 feet of defensible space, but movement of material from adjacent burning land could still ignite homes. The forest and chaparral surrounding Ember Falls has not burned in over 70 years.
- b. **What is the prescription for treatment?** The fuel reduction portion of the project will be performed on 12 acres below the Ember Falls community that is both viewed by passing traffic, and a strategic and high priority location for fuel reduction. A forester will be hired to prepare a fire hazard exemption and a prescription for thinning of trees within the project, and a tree faller will be hired to remove those

trees. The wood produced will be sold as firewood to create program income for the grant. The residents will remove and stack the brush, and a chipping contractor will be hired to complete the brush chipping. The chips will be distributed over the ground to protect it from erosion. Any remaining large sticks or root balls will be piled and burned during the wet season. The proposed fuel break will tie into a power line that runs along the south side of the hill, and the two access roads that connect to the power line right of way and the Ember Falls community.

- c. **How will this project reduce wildfire hazards in the project area?** The wildfire hazard will be reduced through the elimination of many tons of woody biomass, thus reducing the flame length and energy release that will result if a wildfire does become established within the treatment area. This in turn will slow the rate of spread, allowing more time for firefighters to arrive before homes are threatened. And even if the fire does approach structures, the reduced flame length and intensity will make it less likely that the structures will ignite.
- d. **How will the project be maintained after the grant is complete?** Once the trees have been thinned and the large diameter brush has been removed, the HOA will coordinate a yearly rotation of maintenance for the fuel break. Brush will be cut every three years so that the fuel hazard remains low and the stems are small enough to be cut by hand. The stems will be chipped using the Chipwhiz 3" chipper/shredder purchased with the Fire Works 2008 grant.

- 22. Describe what outreach efforts will be provided to engage the broader public in your project?** *Briefly describe what types of educational activities or materials this project will utilize to engage community members, fire jurisdictions and elected officials in the project. Please limit your response to 1,200 characters (approximately 200 words).*

In addition to the hazardous fuel reduction work, the fuel reduction work will be the central focus of several community presentations on hazardous fuel reduction around structures, and will be featured in a pamphlet that will be mailed to hundreds of residents in the communities surrounding Carbonaceous.

23. Sustainability

Describe how this project will lead the community to investing (e.g., effort, funding, etc.) in making itself fire safe after the grant term ends. Please be specific and realistic. What type of community capacity will be developed to sustain this project in the long-term? What change do you hope to create in the community? Please limit your response to 1,200 characters (approximately 200 words).

The members of the homeowner's association have decided to assess themselves an annual fee of \$0.10 per square foot of their parcel that will be paid into a special fuel reduction maintenance account to fund annual maintenance of the fuel reduction work performed. They have also agreed that any failure to pay the annual assessment will constitute a lien against their property.

24. Please describe how your project will align with the guiding principles and core values identified in Phase 1 of the [National Cohesive Wildland Fire Management Strategy](#).

Briefly summarize how this project will address the guiding principles and core values identified in page 6 of the Cohesive Strategy. Please limit your response to 1,200 characters (approximately 200 words).

Many of the "Guiding Principles and Core Values" of the National Cohesive Wildland Fire Management Strategy relate only to firefighting agencies, and thus cannot be addressed by projects undertaken by organizations not engaged in fire suppression activities. However, we believe that this proposed project does address the first five of the Strategy's principles and core values, as follows:

- Reduces risk to firefighters and public by decreasing flammability and fuel loading of the project area, resulting in shorter flame lengths and less energy release.
- This reduced risk is the kind of "sound risk management" foundation upon which fire management (suppression) activities can be conducted.
- This project is the essence of "actively manag(ing) the land to make it more resilient to disturbance" that would be caused by a high-intensity wildfire. Human and wildlife habitat will be less severely impacted by a wildfire than if hazardous fuels had not been reduced..
- It "Improves and sustains both community and individual responsibilities to prepare for, respond to and recover from wildfire through capacity-building activities" by showing them what can be done to improve both the safety and the resilience of their community and its natural resources. This is a "preparation" project that will make firefighting "response" more effective and "recovery" quicker.
- Project supports "rigorous wildfire prevention programs" with community outreach and education presentations and distribution of a pamphlet on the benefits of hazardous fuel reduction to hundreds of residents of Carbonaceous and surrounding communities.

25. Workplan

Fill in the blanks for each major task. **Please note:** every workplan must have a sequential task entitled "photo monitoring" and "success story development." A sample workplan is available in the Resource Center at <http://grants.firesafecouncil.org>.

Sequential Tasks/Activities	Timeframe (1-24 Months)	Responsible Party	Outcomes/Results/Deliverables
Photo monitoring	Months 1 and 24	EFHOA Project Coordinator	Before and after photo CD
Success story development	continuous	EFHOA Project Coordinator	PDF versions of the educational brochure and project report for annual HOA publication.
Complete quarterly progress reports	Months 3, 6, 9, 12, 15, 18	EFHOA Project Coordinator	6 Progress reposts submitted.
Community fuel modification presentation followed by planning mtg. for Brush Bash 2011. Develop and publish request for proposals for forestry services, tree felling and chipping services.	Month 1-3	EFHOA/Carbonaceous FSC Coordinators and EFHOA Project Coordinator	One meeting held. Request for proposals published.
Select RPF to prepare tree thinning prescription and complete environmental studies or surveys required by federal, state, and local regulatory agencies.	Months 2-9	EFHOA Project Coordinator	Filing of an exemption request with Cal Fire as the state lead agency for CEQA. Additional studies to be determined by federal reviewers in the development of mitigation measures for ESA, MBTA, and NHPA.
Removal of trees according to prescription.	Month 9	EFHOA/Contractor	Trees cut down on 12 acres according to prescription.
Cut and stack brush, buck and split firewood (two work days). Complete Chipping.	Month 9-10	EFHOA Volunteers/Project Coordinator/Chipping Contractor	Brush cut and stacked. Firewood split and piled. Brush from 12 acres chipped.
Complete "after" pictures of fuel modification. Complete design of fuel modification demonstration pamphlet.	Month 11-12	EFHOA Volunteers/Project Coordinator	"After" pictures on CD. File with pamphlet layout ready for printing.



Planning for community fuel modification presentation, project tour, and wood sale.	Month 12-15	Carbonaceous FSC/EFHOA Project Coordinators and Volunteers	PowerPoint presentation with pictures of project and tips for working with local vegetation. Map to project site, and flyer advertising prices of available firewood.
Presentation of Brush Bash 2011 demonstration project followed by site tour and firewood sale.	Month 15	EFHOA/Carbonaceous FSC Project Coordinators and Volunteers	
Burn remaining debris (root balls and large sticks, not chipped)	Month 15-18	EFHOA Volunteers	Remaining debris removed from 12 acers
Complete grant closeout report and survey.	Month 18	EFHOA Project Coordinator	Grant closeout report and survey returned to Ca. FSC. CD of "before and after" pictures, pamphlet and HOA report.

Additional rows can be added as needed when you complete the workplan online. Use the table above to draft some ideas. You will have sufficient space to describe your activities in the online workplan. Please consult the workplan guidelines on the next page.

Workplan Guidelines

In the **Sequential Tasks/Activities** box, describe the major tasks that will be performed to complete your project (e.g., Host quarterly education workshops; develop a CWPP; perform defensible space clearing for low-income/elderly/disabled homeowners; perform biological/cultural resources study; prepare work site(s) for treatment; create a shaded fuel break; etc.). Be as detailed as necessary to describe the tasks required to complete your project.

In the **Timeframe** box, indicate the month(s) in which you will work.

In the **Responsible Party** box, indicate who (by job title) will be responsible for performing the work and supervising its completion.

In the **Outcomes/Results/Deliverables** box, list the specific, quantifiable, outcomes from the tasks/activities performed (e.g., the number of acres prepared for treatment; the number of acres treated; the number of workshops held; the number of people educated on fire prevention; the number of homes that created defensible space; etc.)



PROJECT OVERVIEW

26. How many fuels treatment projects will you conduct with grant funds? 12

Fuel treatment projects may be split by a variety of conditions. Some applicants separate their fuel projects by location, treatment type, timing, landowner, contractor or fuel type. Please indicate if your project is more than one fuels reduction project. It is a single project covering three different sites.

27. How many total acres is your fuels treatment project? 12

What is the size (in acres) of your project area? The “footprint” of your project is the area where planned treatment(s) will occur on the ground. It does not include access and egress to the project.

28. Project Deliverables (check all that apply)

What is your project producing and how much will it cost? You must include costs for all deliverables.

	Quantity Projected	Federal Cost	Quantity Projected	Matching Cost
<u>Community Assessment Wildfire Planning</u>				
Community Risk Assessment				\$1,000
Community Wildfire Protection Plan				\$1,000
Fire Management Plan				\$1,000
TOTAL COMMUNITY ASSESSMENT WILDFIRE PLANNING		\$ 0		\$ 3,000
<u>Information/Education</u>				
Workshops/Training Sessions	4	\$600		\$2,500
Outreach/Education Programs	1	\$110		\$2,500
Education/Information Products	1	\$350		\$2,500
TOTAL INFORMATION/EDUCATION	4	\$760		\$ 7,500
<u>Fuels Treatment</u>				
Preparation for Treatment	12 acres	\$ 4,300		\$5,000
<i>Include total Prep Acres for all fuels projects.</i>				
<u>Mechanical Treatment</u>				
Biomass removal	12 acres	\$2,433		\$
Chipping	12 acres	\$2,900		\$
Crushing	acres	\$		\$
Hand pile	12 acres	\$2,900		\$1,000
Seeding	acres	\$		\$
Lop and scatter	acres	\$		\$
Machine pile	acres	\$		\$



Mastication/Mowing	acres	\$		\$
Thinning	12 acres	\$2,290	12 acres	\$1,000
Thinning – Tree felling & removal	12 acres	\$2,192	12 acres	\$2,000
TOTAL MECHANICAL TREATMENT	72 acres	\$8,715		\$4,000

Prescribed Fire	acres	\$		\$
Broadcast burn	acres	\$		\$
Fire use	acres	\$		\$
Hand pile burn	12 acres	\$1,500		\$1,000
Jackpot burn	acres	\$		\$
Machine pile burn	acres	\$		\$
TOTAL PRESCRIBED FIRE	12 acres	\$1,500		\$1,000

Other Treatment	acres	\$		\$
Chemical	acres	\$		\$
Biological	acres	\$		\$
Browsing	acres	\$		\$
TOTAL OTHER TREATMENT	0 acres	\$ 0		\$ 0

TOTAL FUELS TREATMENT ACRES & COST				\$ 0
<i>Prep for Treatment + Total Mechanical + Total Fire + Total Other</i>	96 acres	\$19,575		

GRAND TOTAL				
<i>Total Community Assessment + Total Information/Education + Total Fuels Treatment</i>		\$15,950		\$20,500

VALUES PROTECTED

All grant applications, including educational or public outreach projects must answer these questions. Can be outside of the immediate project area.

Estimate the number of homes protected by your project

The total number of homes that will be directly (such as defensible space) or indirectly (such as a fuel break) protected from wildfire.

45
200
\$13,500,000

Estimate the number of community members protected by your project

The total number of individuals living in the community that will be protected from wildfire by your projects. Educational projects can protect community members by increasing awareness that creates behavioral change.

Estimate the value of property protected by your project

The total value of property protected from wildfire by your project.



29. In what type of plan is the project, or area to be addressed by the project, identified (check all that apply):

*The proposed project or the problem/area it addresses should be identified in a plan such as a Community Wildfire Protection Plan (CWPP) or its equivalent. Projects that are in a planning document will rank higher. If your project is to create a CWPP, explain the need for the CWPP. To find out if your project or the area to be addressed by your project is in an existing **CWPP**, contact your local fire department, local government or local forester. Also, links to some CWPPs are available at: <http://www.cafirealliance.org/cwpp/>. To find out if your project is in an existing **DMA 2000 Local Hazard Mitigation Plan**, contact your local department of emergency services. To find out if your project or the area to be addressed by your project is in another type of plan, contact your local fire department, land management agency, utility district, etc. Sources include but are not limited to CAL FIRE, USDA Forest Service, USDI Bureau of Land Management, USDI Fish & Wildlife Service and USDI National Park Service.*

Community Wildfire Protection Plan (CWPP) [Indicate CWPP status (check one)]

Approved by local government, fire department and state forester.

Date approved: 9/9/10

Last Updated: Our CWPP has not been updated since 2010.

In process

When did you begin working on this CWPP? (month/year)

Explain the need for the CWPP:

Additional comments:

Please identify the title of the CWPP:

DMA 2000 Local Hazard Mitigation Plan [Indicate plan status (check one)]

FEMA approved

Date approved:

Late Updated:

Submitted to and being reviewed by FEMA

Reviewed by FEMA and sent back for editing

Reviewed by FEMA, FEMA approval pending local adoption

Other

Type of plan:

Date approved and by whom:

Last Updated:

Name of plan and contact information:

30. What is the project/area's priority in the plan identified in question #29 and on what page of the plan is it addressed?

Community Wildfire Protection Plan (CWPP)

Priority in the plan: **1**

Page number where the project is addressed: **33**

Disaster Mitigation Act of 2000 (DMA 2000) Local Hazard Mitigation Plan

Priority in the plan:

Page number where the project is addressed:

Other

Priority in the plan:

Page number where the project is addressed:

31. Select the Community(ies)-At-Risk within 3 miles of your project area that your project will improve wildfire survivability in.

Online, you will be presented with a menu of Communities At Risk. Please select only the Communities at Risk that are within 3 miles of the project area and will be affected by your proposed project. You can find a list of Communities At Risk at http://www.cafirealliance.org/communities_at_risk/.

**Carbonaceous
McClellan**

32. List communities within 3 miles of your project area, other than Communities At Risk, that your project will improve wildfire survivability in.

If communities other than those in the Communities At Risk section will benefit, please list.

West Carbonaceous

33. List communities that are directly affected by your project's deliverables. Please list the communities and provide a total for each project deliverable. If the community receives more than one (1) service, please list them in all applicable categories.

a. Prevention and Education Programs

Carbonaceous

McClellan

West Carbonaceous

b. Hazardous Fuel Reduction Projects

Carbonaceous

McClellan

c. Fire Management Plans, Risk Assessments or equivalents

None

34. Please estimate the number of people who will be contacted by your project's deliverables.

There are a variety of methods by which your project deliverables reach your audience. Consider the number of people who will be contacted about your project through meetings, educational mailings, email lists, homeowner participation, or other events.

a. Prevention and Education programs 400

b. Hazardous Fuel Reduction projects 325

c. Fire Management plans, Risk Assessments or equivalents 35

35. How many people (such as planning, fuels reduction, environmental compliance, project management, etc.) will you employ with this project? Please count both contractors and salaried employees.

Salaried employees: 1

Contractors: 4



36. Condition Class: 1 2 3

Check the appropriate box(es). Find your project's condition class at: <http://www.frcc.gov> or at CDF <http://frap.cdf.ca.gov/data/frapgismaps/select.asp>.

37. Fire Regime: I II III IV V

Check the appropriate box(es). Find your project's fire regime(s) at: <http://www.frcc.gov>.

38. Fire Hazard Severity Zone (FHSV):

Check the appropriate box(es). Find your project's fire hazard severity zone at:
http://www.fire.ca.gov/fire_prevention/fire_prevention_wildland_zones.php

- Very High Severity Zone
- High Severity Zone
- Moderate Severity Zone



PROJECT LOCATION

39. Latitude: 38.67712 N

Longitude: -121.39183 W

Latitude and longitude for your project may be found at <http://itouchmap.com/latlong.html>. If your project is countywide please select a central point that best represents the project boundaries.

40. Is any part of your project on federal land or on land leased by the federal government? **None**

- USFS
- BLM
- BIA
- NPS
- USFWS
- Other:

Explain:

41. Is the area impacted by your project at risk from fire originating on federal land?

If you answer yes to this question, make sure you select the appropriate agency(ies) that own or manage the land. Once you select an agency nearby, choose from the drop down menu (online) to select the nearest national park, monument, recreational area, forest, refuge or field office to your project area. If you need help, contact local agency representatives or consult a map for this information. Also, select one of two options listed to note how far your project is from federal land in miles.

Yes No

If yes, which federal land? Please answer below

If no, please skip to question 42.

USDI Bureau of Indian Affairs

USDI Bureau of Land Management. Nearest field office:
Online, you will be able to select the nearest BLM field office from a menu of options.

USDI Bureau of Reclamation

USDI National Park Service. Nearest park, monument or recreational area:



Online, you will be able to select the nearest park, monument or recreational area from a menu of options.

USDA Forest Service. Nearest forest:

Online, you will be able to select the nearest forest from a menu of options.

USDI U.S. Fish & Wildlife Service. Nearest refuge:

Online, you will be able to select the nearest refuge from a menu of options.

Military Installation. Name: Beale AFB

How far is your project from federal lands?

0-3 miles

More than 3 miles

42. Congressional District

Enter the district number for the project location. Find Congressional, State Assembly/House and State Senate district numbers for California at <http://www.calvoter.org/voter/maps/index.html>
Nevada maps at: <http://mapserve.leg.state.nv.us/website/lcb/viewer.htm>.

Congressional District number(s)

CALIFORNIA

- | | | | | | | | | | |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input checked="" type="checkbox"/> 6 | <input type="checkbox"/> 7 | <input type="checkbox"/> 8 | <input type="checkbox"/> 9 | <input type="checkbox"/> 10 |
| <input type="checkbox"/> 11 | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19 | <input type="checkbox"/> 20 |
| <input type="checkbox"/> 21 | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 | <input type="checkbox"/> 28 | <input type="checkbox"/> 29 | <input type="checkbox"/> 30 |
| <input type="checkbox"/> 31 | <input type="checkbox"/> 32 | <input type="checkbox"/> 33 | <input type="checkbox"/> 34 | <input type="checkbox"/> 35 | <input type="checkbox"/> 36 | <input type="checkbox"/> 37 | <input type="checkbox"/> 38 | <input type="checkbox"/> 39 | <input type="checkbox"/> 40 |
| <input type="checkbox"/> 41 | <input type="checkbox"/> 42 | <input type="checkbox"/> 43 | <input type="checkbox"/> 44 | <input type="checkbox"/> 45 | <input type="checkbox"/> 46 | <input type="checkbox"/> 47 | <input type="checkbox"/> 48 | <input type="checkbox"/> 49 | <input type="checkbox"/> 50 |
| <input type="checkbox"/> 51 | <input type="checkbox"/> 52 | <input type="checkbox"/> 53 | | | | | | | |

NEVADA

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State Senate District number(s)

CALIFORNIA

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NEVADA

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State Assembly/House District number(s)

CALIFORNIA

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| <input type="checkbox"/> 71 | <input type="checkbox"/> 72 | <input type="checkbox"/> 73 | <input type="checkbox"/> 74 | <input type="checkbox"/> 75 | <input type="checkbox"/> 76 | <input type="checkbox"/> 77 | <input type="checkbox"/> 78 | <input type="checkbox"/> 79 | <input type="checkbox"/> 80 |

NEVADA

- 26 39

43. County

First, select the state in which the proposed project will take place. Then, select the county of the proposed project from the check boxes. If you are proposing to work in multiple counties, please select the county in which the majority of work will be performed. If the work will be divided equally across county lines, then select more than one county.

CALIFORNIA

- | | | | |
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| <input type="checkbox"/> Alameda | <input type="checkbox"/> Kings | <input type="checkbox"/> Placer | <input type="checkbox"/> Sierra |
| <input type="checkbox"/> Alpine | <input type="checkbox"/> Lake | <input type="checkbox"/> Plumas | <input type="checkbox"/> Siskiyou |
| <input type="checkbox"/> Amador | <input type="checkbox"/> Lassen | <input type="checkbox"/> Riverside | <input type="checkbox"/> Solano |
| <input type="checkbox"/> Butte | <input type="checkbox"/> Los Angeles | <input checked="" type="checkbox"/> Sacramento | <input type="checkbox"/> Sonoma |
| <input type="checkbox"/> Calaveras | <input type="checkbox"/> Madera | <input type="checkbox"/> San Benito | <input type="checkbox"/> Stanislaus |
| <input type="checkbox"/> Colusa | <input type="checkbox"/> Marin | <input type="checkbox"/> San Bernardino | <input type="checkbox"/> Sutter |
| <input type="checkbox"/> Contra Costa | <input type="checkbox"/> Mariposa | <input type="checkbox"/> San Diego | <input type="checkbox"/> Tehama |
| <input type="checkbox"/> Del Norte | <input type="checkbox"/> Mendocino | <input type="checkbox"/> San Francisco | <input type="checkbox"/> Trinity |
| <input type="checkbox"/> El Dorado | <input type="checkbox"/> Merced | <input type="checkbox"/> San Joaquin | <input type="checkbox"/> Tulare |
| <input type="checkbox"/> Fresno | <input type="checkbox"/> Modoc | <input type="checkbox"/> San Luis Obispo | <input type="checkbox"/> Tuolumne |
| <input type="checkbox"/> Glenn | <input type="checkbox"/> Mono | <input type="checkbox"/> San Mateo | <input type="checkbox"/> Ventura |
| <input type="checkbox"/> Humboldt | <input type="checkbox"/> Monterey | <input type="checkbox"/> Santa Barbara | <input type="checkbox"/> Yolo |
| <input type="checkbox"/> Imperial | <input type="checkbox"/> Napa | <input type="checkbox"/> Santa Clara | <input type="checkbox"/> Yuba |
| <input type="checkbox"/> Inyo | <input type="checkbox"/> Nevada | <input type="checkbox"/> Santa Cruz | |
| <input type="checkbox"/> Kern | <input type="checkbox"/> Orange | <input type="checkbox"/> Shasta | |

NEVADA

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| <input type="checkbox"/> Carson City | <input type="checkbox"/> Douglas | <input type="checkbox"/> Washoe |
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FUEL TREATMENT PROJECTS

44. Is this a fuels treatment project?

Yes No

If yes, please answer questions 45-49

If no, please skip to question 50.

The following questions (45-49) are related to the Federal environmental compliance review process.

45. All ground disturbing projects must receive environmental clearance approval from the California Fire Safe Council. Have any biological or environmental assessments been completed for the project area?

Yes No

If yes, which statute or other environmental regulation were the studies/assessments completed for:

California Environmental Quality Act (CEQA)

By whom and when:

National Environmental Policy Act (NEPA)

By whom and when:

Endangered Species Act (ESA)

By whom and when:

California Endangered Species Act (CESA)

By whom and when:

Migratory Bird Treaty Act (MBTA)

By whom and when:

National Historic Preservation Act (NHPA)

By whom and when:

Other

By whom and when:

46. What is the percent of dominant vegetation type at treatment site?

Enter the percent of the dominant type of vegetation in the project area. If you select "other," be specific about the type of vegetation.

25% Chaparral

75% Open or closed canopy mixed conifer forest

% Ponderosa

% Douglas Fir

% Pine Plantation

% Oak Woodland

% Other. Please specify:

47. If vegetation is to be modified, describe in detail.

Select the type of vegetation to be treated from the drop down menu. Describe how the treatment will be performed, what type of equipment will be used, who will perform the work and how will they work on the project.

Chaparral

Open or closed canopy mixed conifer forest

Ponderosa

Douglas Fir

Pine Plantation

Oak Woodland

Other. Please specify:

Describe the pre and post treatment site: Pre-treatment site is choked with immature and medium-age conifers and chaparral within 100 feet of many structures. Post -treatment site will have a 75% reduction in tree volume and a 95% reduction in chaparral volume, with better tree spacing to reduce groundwater competition and promote vigorous growth of remaining trees and only isolated single chaparral plants left for biodiversity.

48. Will the project generate biomass, small logs of a merchantable volume or a marketable product?

Select yes or no if your project will generate biomass by producing saw logs, chips, firewood, fuel wood, post and poles or indicate Other type. Biomass is any plant material removed from the site.

Yes

No



If yes, estimate the type and volume of biomass.

- | | | |
|--|----------------------|--------------|
| <input type="checkbox"/> Saw logs (cubic board ft.) | Estimated volume = | Cubic Volume |
| <input type="checkbox"/> Chips (green ton) | Estimated quantity = | Green Tons |
| <input type="checkbox"/> Post and poles (lineal feet) | Estimated quantity = | Lineal Feet |
| <input type="checkbox"/> Fuel wood (fuel for cogen. plant) | Estimated quantity = | Green Tons |
| <input checked="" type="checkbox"/> Firewood (cords) | Estimated quantity = | 12 Cords |
| <input type="checkbox"/> Other- Specify: | Estimated quantity = | Units |

Estimate the volume of biomass by using the following formula:

Cubic Volume: Refers to the amount of wood in a tree or log expressed in cubic feet. Please see the table below for the cubic volume by DBH class. So if you have 10 trees that are 9 inches DBH the volume of each tree is 6 cubic feet, multiplied by 10 trees so, the total volume would be 60 cubic feet.

Cord: A standard cord of firewood is 128 cubic feet of wood, generally measured as a pile 8 feet long by 4 feet tall by 4 feet deep.

Lineal feet: is the accumulated length so if you have 10 poles each 8 feet long the total lineal feet would be 80.

Green ton: Please see the table below

Diameter Breast Height (DBH) is measured 4.5 feet above the ground level on the uphill side of the tree.

Diameter Breast Height (DBH)	Cubic Volume	Density Conversion Factor (Bole and Branch)	Weight per Cubic Foot	Tree Weight (lbs)
4	1.0	2.12	48	101
5	1.5	2.09	48	150
6	2.0	2.05	48	196
7	3.5	2.02	48	339
8	5.0	1.98	48	475
9	6.0	1.94	48	559
10	7.0	1.85	48	622
11	8.0	1.77	48	680
12	11.5	1.70	48	938
13	15.5	1.62	48	1205
14	20.0	1.58	48	1516

49. Is the biomass product being utilized?

Indicate if you will make use of your biomass.

- Yes No

If yes, describe: To be used as firewood to warm homes, offsetting the need to use cleaner, more expensive fuels like natural gas and propane.



50. Budget Detail

Fill in the blanks for every expense in your project. Additional rows can be added to each cost category as needed when you complete the budget detail form online. Use the table below to draft some ideas. A sample budget detail is available in the Resource Center at <http://grants.firesafecouncil.org>.

Cost Categories	Funding Sources			(4) Total
	(1) Grant	(2) Applicant	(3) Other Partners	
a. Personnel				
Project Coordinator (Ember Falls HOA) (15hrs/month x \$20/hr x 18 months = \$5,400)	\$5,400	\$7,560	\$0	\$5,400
Volunteers from Ember Falls HOA (12 volunteers x \$15/hr X 6 hrs/day x 2 days) = \$2,160	\$0	\$2,160	\$0	\$2,160
Total Personnel	\$5,400	\$9,720	\$ 0	\$7,560

b. Fringe Benefits (See guidelines)				
Total Fringe Benefits				

c. Travel				
Professional development (Pre-Award Workshop – lodging (1 night @ \$129.95/night)	\$130	\$0	\$0	\$ 130
Professional development (Pre-Award Workshop– mileage (200 miles @ \$0.55/mile)	\$110	\$0	\$0	\$ 110
Total Travel	\$ 240	\$ 0	\$ 0	\$ 240

d. Equipment (Items > \$5,000/unit. See guidelines.)				\$ 0
				\$ 0
Total Equipment	\$ 0	\$ 0	\$ 0	\$ 0

e. Supplies (Items < \$5,000/unit. See guidelines.)				
Pole saws (6 x \$55 = \$330) Loppers for Volunteers (2 pairs x 45 each = \$90) Work Gloves (10 pairs x \$4.99 each = \$49.90)	\$535	\$0	\$0	\$ 535



California Fire Safe Council
Request for Applications
Grants Clearinghouse 2013 Competitive Grants Program

Safety goggles (10 @6.50 each = \$65)				
Digital camera – photo monitoring \$130 CD's for photo and project document storage = \$15 Postage for fire Brush Bash 2011! pamphlets = \$200	\$345	\$0	\$0	\$ 345
Lunches for volunteers on workdays (6.15 ea x 13 people x 2 days=160)	\$0	\$0	\$160	\$ 160
Total Supplies	\$ 880	\$ 0	\$ 160	\$1,040

f. Contractual				
Chipping Contractor = \$1,900 EZ Forestry Consulting Services = \$4,300 Joe's Timber Cutting (2 days at \$645/day = \$1,290)	\$7,490	\$0	\$0	\$7,490
Grant: 1) Workshop Facility Rental (\$50/day x 2 days) = \$100 2) Printing for Brush Bash pamphlets (1,000 pamphlets x \$350/1,000 = \$350 Other Partners: 1) Design-A-Sign Sign printing and installation = \$550 2) Coffee Service and snack tray delivery for meetings (\$100/meeting x 2meetings) = \$200	\$450	\$0	\$750	\$ 750
Bookkeeping services (\$200/month x 18 months = \$3,600)	\$3,600	\$0	\$0	\$3,600
Total Contractual	\$11,540	\$ 0	\$ 750	\$12,290

g. Other				
Insurance (General liability, directors & officers and Volunteer coverage for EFHOA)	\$1,500	\$0	\$0	\$1,500
Burn permit fee	\$15	\$0	\$0	\$ 15
Project Income from selling firewood	\$0	\$ 0	\$ 3,310	\$2,440
Total Other	\$ 1,515	\$ 0	\$ 3,310	\$ 3,955

h. Total Direct Costs	\$19,575	\$9,720	\$ 4,220	\$28,045
i. Indirect Charges (applicable only to those with a Federally approved Indirect Cost Rate)	\$0	\$0	\$0	\$ 0
j. Fiscal Sponsor Administrative fee	\$0	\$6,560	\$0	\$6,560
k. Project Total	\$19,575	\$16,280	\$ 4,220	\$40,075
l. Project Income	\$0	\$0	\$0	\$0

Please consult the budget detail guidelines on the next page.



Budget Detail Guidelines

In the **Cost Categories** boxes, itemize your expenses by category (i.e., Personnel, Fringe Benefits, Travel, Equipment, Supplies, Contractual, Other and Indirect). Include as much detail as possible when describing each category and estimated costs. Costs such as insurance, rent, utilities, employee and contractual positions should all be clearly identified. When completing the “Other “and “Supplies” category, please itemize all expenses.

a. Personnel

Enter the job title and the number of individuals that will work on your project.

NOTE: The Personnel category is for employees that receive W-2 forms. If your organization does not have employees and you use independent contractors, use the *Contractual* budget category.

NOTE: The Personnel category is also used to track volunteer labor match.

b. Fringe Benefits

Enter the fringe benefits associated with each employee listed in the Personnel category. Note: if your organization does not track benefits separately from salaries/wages, you may include a “loaded” rate in the Personnel category (i.e. salary/wage + benefits).

c. Travel

Use the Travel category to budget for mileage expenses to/from project site(s), to/from meetings, etc. The current federal rate is \$0.50/mile. Please note the mileage rate changes annually—sometimes two times per year; information is posted on the IRS’ website. Consider budgeting for 1-2 nights of hotel lodging if you need to travel a long distance to attend a grants training workshop during the life of the program.

d. Equipment

The Equipment category should be used only if your organization is requesting to **purchase** a tangible item with a unit cost of \$5,000, or more, and a useable life span of longer than one year. The item requested must be an allowable item per the federal funding guidelines. Non-allowable items will be removed from your budget during the review and scoring process. Items costing less than \$5,000 per unit should be recorded in the Supplies category. If your organization is going to contract to use a chipper or a bulldozer, for example, use the *Contractual* category.

The Equipment category is for purchases only. Equipment purchased with grant funds must be recorded and tracked by the California Fire Safe Council, as well as the grantee. Additional costs to be considered include insuring, maintaining and housing equipment plus costs associated with training personnel who will be using it.



In order to request purchase of equipment, such as a chipper, you must conduct a cost benefit analysis regarding the potential purchase, which would include surveying to see if there is available excess similar federal equipment; and comparison between leasing and purchasing the identified equipment, including comparison pricing. The request to purchase equipment must be submitted in writing to a Grant Manager at the time of application.

e. Supplies

The Supplies category is for all of the supplies and materials needed to complete your project (e.g., hand tools, personal safety equipment, chain saws, replacement parts, project computer, project software, paper, toner, educational materials, signs, brochures, etc.). Supplies have unit costs of less than \$5,000.

f. Contractual

Use the Contractual category for any companies, professionals or individuals that you hire as independent contractors for the project (e.g., work crews, chipper rental, biological/archeological consultants, grant management, CPA, attorney, etc.). You must solicit bids for services if you choose to use contractors.

g. Other

The Other category is a catch-all for expenses that do not fall within the scope of the above categories (e.g., insurance, maintenance/repairs, overhead expenses allocated to the grant, etc.).

i. Indirect Charges

Complete this category only if your organization has an approved Indirect Cost Rate (ICR) agreement. You will be required to provide a copy of your approved ICR agreement to the California Fire Safe Council if you request indirect expenses.

j. Fiscal Sponsor Administrative Fee

If you utilize a fiscal sponsor organization for administration of your project, please enter the amount they will charge for this service.

k. Project Income

Any income generated as the direct result of a grant-funded project (e.g., sale of firewood, rebates from homeowners, sale of items made from biomass, etc.) can be used as matching funds or to further your organization's project objectives. Use of project income is not necessarily limited by a project's lifespan.

In the **Funding Sources** boxes, enter the cost of every line item expense by the source of funds used (i.e., grant funds, your organization's funds [applicant] or your partners' funds [whether cash or in-kind]).

51. Budget Summary

The table below is for reference purposes only. The dollar amounts from the budget detail in question #47 automatically transfer into this table. No data entry is required.

Cost Categories	Funding Sources			(4) Total
	(1) Grant	(2) Applicant	(3) Other Partners	
a. Personnel	\$5,400	\$9,720	\$ 0	\$7,560
b. Fringe Benefits	\$0	\$ 0	\$ 0	\$0
c. Travel	\$ 240	\$ 0	\$ 0	\$ 240
d. Equipment	\$ 0	\$ 0	\$ 0	\$ 0
e. Supplies	\$ 880	\$ 0	\$ 160	\$1,040
f. Contractual	\$11,540	\$ 0	\$ 750	\$12,290
g. Other	\$1,515	\$ 0	\$ 3,310	\$3,955
h. Total Direct Costs	\$19,575	\$9,720	\$4,220	\$28,045
i. Indirect Charges (only with approved federal rate)	\$ 0	\$ 0	\$ 0	\$ 0
j. Fiscal Sponsor Administrative Fee	\$0	\$6,560	\$0	\$6,560
k. Project Total	\$19,575	\$16,280	\$ 4,220	\$40,075
l. Project Income	\$ 0	\$ 0	\$0	\$0

52. Match Amounts by all organizations (including applicant) providing match

Show the dollar amounts of the matching contributions by the organization(s) providing the match. Include your organization if you are providing match. All organizations listed in the table below must provide a Letter of Commitment with your application. Enter whole dollars—no cents—and do not use punctuation marks. All non-federal contributions, including cash and third-party in-kind, are eligible for match. The match shown in your grant application cannot be used as a match for other federally-assisted projects or programs. The total must match the amount in question #17 and the sum of 2j + 3j in question #50 of the budget detail form.

Organization Name	Cost Category	Type of Match	\$ Value
1. Ember Falls HOA Volunteers	Personnel	In-Kind	\$9,720
2. Charred Fork Deli	Other	In-Kind	\$200
3. Sawmill Subs	Other	In-Kind	\$160
4. Design-a-Sign	Other	In-Kind	\$550
5. Carbonaceous FSC	Fiscal Sponsor Admin Fee	In-Kind	\$6,560
6.			
TOTAL			\$17,190



Submit letters of commitment from all organizations providing matching funds to the project. Each letter of commitment must be on the organization’s letterhead providing the match and signed by the organization’s official representative.

The applicant organization must also provide a signed letter on their letterhead indicating the amount of match and a description of the personnel and/or services to be provided.

Fiscal Sponsors must submit a signed letter on their letterhead certifying they have agreed to serve as the Fiscal Sponsor for the applicant.

*For identification purposes, each letter must include the project’s name and the name of the applicant organization as they appear in the grant proposal. Each letter of commitment must describe what the organization will provide and the value of what they will provide. **Note:** all matching contribution amounts reflected in the letters of commitment must match your application.*

Send all of your letters of commitment in one envelope, including a cover letter listing all of the organizations and their match amounts, to the appropriate Grant Manager below:

Grant Manager	Address	Counties
Katie Ziemann Grant Manager	California Fire Safe Council 502 W. Route 66, Suite 17 Glendora, CA 91740 kzeimann@cafiresafecouncil.org 626-335-7426	Santa Barbara, Los Angeles, Ventura, San Luis Obispo, Monterey, Kern, San Diego, Riverside, Orange, San Bernardino
Liron Galliano Grant Manager	California Fire Safe Council 5834 Price Avenue, Suite 101 McClellan, CA 95652 lgalliano@cafiresafecouncil.org 916-648-3615	Sonoma, Marin, San Mateo, Napa, San Benito, Santa Clara, Alameda, Contra Costa, Solano, Santa Cruz, San Francisco , Placer, El Dorado, Sacramento, Amador, Calaveras, Alpine, Stanislaus, Tuolumne, Mariposa, Mono, Fresno, Tulare, Inyo, Madera, King
Dan Lang Grant Manager	California Fire Safe Council 5834 Price Avenue, Suite 101 McClellan, CA 95652 dlang@cafiresafecouncil.org 916-648-3600	Del Norte, Humboldt, Siskiyou, Mendocino, Trinity, Lake, Yolo Modoc, Shasta, Lassen, Tehama, Plumas, Glenn, Butte, Sierra, Yuba, Nevada, Eastern Placer, Eastern El Dorado and Nevada counties in the Lake Tahoe Basin.

The letters must be POSTMARKED by the grant application deadline of July 31, 2012 for your project to be considered for funding.

If you would like confirmation that your letters were received by the California Fire Safe Council, please use a Return Receipt/Delivery Confirmation from the U.S. Postal Service or send your letters via UPS or



FedEx with a delivery tracking number. Due to the potential volume of inquiries, the California Fire Safe Council is unable to confirm by phone or email that your letters were received.

YOU MAY NOT SUBMIT THE LETTERS VIA E-MAIL OR FAX.

ACKNOWLEDGEMENTS

Funding for this project was provided in part by the Cooperative Fire Program of the U.S. Forest Service, Department of Agriculture, Pacific Southwest Region, the Bureau of Land Management, National Park Service and U.S. Fish and Wildlife Service.

The views and conclusions contained in this document are those of the authors and should not be interpreted as representing the opinions or policies of the U.S. Government. Mention of trade names or commercial products does not constitute their endorsement by the U.S. Government.

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DID YOU REMEMBER TO...

- | YES | NO | |
|-------------------------------------|--------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Submit no more than two applications per organization? (For more information see Request for Application Part I, Section 4) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Not request more than \$200,000? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Answer all applicable questions on the application? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Submit all signed Letters of Commitment (LOC) on organizational letterhead from organizations that are committing cost share/match to your project? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Submit your organization's signed Letter of Commitment if you are committing cost share/match to your project? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Provide a signed cover letter on letterhead, with the Letters of Commitment, listing the organizations providing matching funds and the amount committed? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Mail all LOC's to the appropriate Grant Manager postmarked no later than May 21, 2012 ? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Submit a signed Fiscal Sponsor Agreement letter if you have a fiscal sponsor that will be assuming the legal responsibility for the management of grant funds awarded to you? |
| <input type="checkbox"/> | <input type="checkbox"/> | Contact a Grant Manager, before you complete your application, if you would like to purchase equipment, such as a chipper, with this grant request. |
| <input type="checkbox"/> | <input type="checkbox"/> | Complete the budget cost category for Fiscal Sponsor Administrative fee if you have a fiscal sponsor. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Contact a Grant Manager for assistance and review of your application and Letters of Commitment early in the process? |