## **FY 2018 State Fire Assistance WUI Grant**

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

This document is for proposal development only. Applications must be submitted to the appropriate state/island forestry entity and entered into the online submission system.

		Proposal Cooperator
	Cooperator Organization:	
	Contact Person:	
1	Address:	
	City/State/Zip Code:	
	Phone (Work/Cell):	
	Email:	
		Applicant Information
	Applicant:	
	Contact Person:	
1	Address:	
	City/Zip Code:	
	Phone (Work/Cell):	
	Email:	
	Fax:	
	Federal Tax ID\DUNS #:	

		Project Information
	Name of Project:	
	<b>Community Name(s):</b>	
	County(ies):	
2	Congressional District:	
		GIS Coordinates (choose one)
	Reference Point Name:	
	Lat/Long:	
	Description:	
	Area Name:	
	Boundary Lat/Longs:	
	<b>Description:</b>	

	Applicant Budget				
		Grant	Match		Total Project
		Funds Requested			Cost
			Applicant	Non-Federal	
				Contributors	
	Personnel/Labor:				
3	Fringe Benefits:				
	Travel:				
	Equipment:				
	Supplies:				
	Contractual:				
	Other:				
	Indirect Costs:				
	TOTAL:				

	Budget Narrative (1700 characters including spaces)	
4		

	Project Area Description and Challenges (1700 characters including spaces)	
5		
	Relation to Forest Action Plan and CWPP (1700 characters including spaces)	
6		

	Proposed Activities (3800 characters including spaces)	
7		
	Landscape (1700 characters including spaces)	
8		

	Project Collaboration (1700 characters including spaces)	
9		
	Project Timeline (1700 characters including spaces)	
10		
	Project Sustainability (1700 characters including spaces)	
11		