

## Volunteer Fire Assistance Grant Application - CFDA 10.664

Applicant Information	
<b>Name of Fire Department:</b>	
<b>Contact Person:</b>	
<b>Address:</b>	
<b>City/Zip Code:</b>	
<b>Phone (Work/Cell):</b>	
<b>Email:</b>	
<b>Fax:</b>	
<b>Federal Tax ID #:</b>	

Fire Department Information	
<b>1. Departments percentage of volunteer firefighters</b>	
<b>2. Population of community(ies) served by department</b>	
<b>3. Number of rural communities department serves</b>	
<b>4. Square miles served by your department</b>	
<b>5. Average number of emergency responses in a calendar year</b>	
<b>Break down by incident type:</b>	<b>Fire:</b>
	<b>EMS:</b>
	<b>Haz Mat:</b>
	<b>Other:</b>
<b>6. Number of active firefighting and/or EMS members within your department</b>	
<b>7. Do you provide initial attack protection outside the local jurisdiction?      Yes      No</b>	
<b>8. Current ISO rating</b>	
<b>9. Form of Organization      Municipal      Fire District      Non Profit      Training Facility</b>	

Priority	Wildland PPE (Nomex Shirts/Pants)			
	Shirt Size	Quantity	Pant Size	Quantity
<input style="width: 40px; height: 40px;" type="checkbox"/>				

Priority	New Generation Fire Shelters	
<input style="width: 40px; height: 40px;" type="checkbox"/>	Size	Quantity

Priority	P25 Compliant Radios	
<input style="width: 40px; height: 40px;" type="checkbox"/>	Type	Quantity
	Mobile	
	Handheld	

Signature Block	
Requestor Signature	Title
Date	



