



COMMUNITY PLANNING & PERMITTING WILDFIRE TEAM

**STRATEGIC FUELS MITIGATION GRANT PROGRAM**

SFMG PLANNING APPLICATION

<b>Name of Project</b>		
<b>Applicant/Fiscal Agent</b>		
<b>Type of Organization</b>		
<b>Contact Person/Title</b>		
<b>Mailing Address</b>		
<b>City/Zip Code</b>		
<b>Phone (Work/Cell)</b>		
<b>Email Address</b>		
<b>Is this application a request to match other grant funding?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Is this application for a planning project in a socially vulnerable community?*</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, complete Box M in the application. If No, leave Box M blank.
<b>Choose the grant you plan to match from the drop-down list. If checked other, please write the name in the field.</b>	Name:	Provide the approximate award notification date for other grants. Date:
<b>If applying for more than one grant, please list additional grants.</b>	Name:	Date:
<b>Could you match this grant if other grants you have applied for are not awarded?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Is this project scalable (with full or partial funding)?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Please select one:</b> <input type="checkbox"/> Updating a Current CWPP <input type="checkbox"/> Developing a New CWPP	<b>If updating a current CWPP please provide the name and year of the CWPP:</b> Name: _____ Year: _____	
<b>Project Area Map:</b> Have you attached a one-page map showing the project area?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>CONSULTATION/PARTNERING:</b> Have you contacted and consulted with a local professional forestry agency, fire protection district, or county or municipality officials?		
Name: _____ Date: _____		

**C. Project Goals and Objectives** (1,500 Character limit; characters include: letters, numbers, spaces, and punctuation.)

**D. BUDGET MATCHING CONTRIBUTIONS**

Contributors:							<b>TOTAL</b>
Cash Match/Dollars							
In-Kind Match/Soft Match							
<b>Total Contribution:</b>							

**E. TOTAL PROJECT BUDGET**

	SFMG Share Amount Requesting	Match Amounts(carry over from table D above)		TOTAL
		Cash Match	In-Kind Match	
Personnel/Labor				
Supplies/Materials				
Contractual Services				
<b>TOTAL PROJECT BUDGET</b>				

**F. Budget Narrative** (1,500 Character limit; characters include: letters, numbers, spaces, and punctuation.)

**G. Project Area Description & Challenges** (2,000 Character limit; characters include: letters, numbers, spaces, and punctuation.)

**H. Scope of Work** (1,500 Character limit; characters include: letters, numbers, spaces, and punctuation.)

**I. Strategic Value of Project** (1,500 Character limit; characters include: letters, numbers, spaces, and punctuation.)

**J. Partners/Contributors** (1,500 Character limit; characters include: letters, numbers, spaces, and punctuation.)

**K. Timeline** (1,000 Character limit; characters include: letters, numbers, spaces, and punctuation.)

**L. Project Sustainability** (1,500 Character limit; characters include: letters, numbers, spaces, and punctuation.)

**M. Socially Vulnerable Community** (1,500 Character limit; characters include: letters, numbers, spaces, and punctuation.)

**ONLY COMPLETE THIS BOX IF YOU ARE APPLYING AS AN ENTIRE SOCIALLY VULNERABLE COMMUNITY.**

This box is ONLY applicable for projects in which the entire community is identified as socially vulnerable based on the SVI Index and local level knowledge.