



COMMUNITY PLANNING & PERMITTING WILDFIRE TEAM

STRATEGIC FUELS MITIGATION GRANT PROGRAM

FUELS MITIGATION APPLICATION

Name of Project		
Applicant/Fiscal Agent		
Type of Organization		
Contact Person/Title		
Mailing Address		
City/Zip Code		
Phone (Work/Cell)		
Email Address		
Is this application a request to match other grant funding?	Yes No	
Is this application for a project in an <i>identified</i> socially vulnerable community?*	Yes No *If yes, complete Box N in the application. If no, leave Box N blank.	
Choose the grant you plan to match from the drop-down list. If checked other, please write the name in the field.		Provide the approximate award notification date for other grants. Date:
If applying for more than one grant, please list additional grants.	Name:	Date:
Could you match this grant if other grants you have applied for are not awarded?	Yes No	
Is this project scalable (with full or partial funding)?	Yes No	
Approximate # acres to be treated?		
Estimated cost/acre?		

B. ELIGIBILITY

Is this project identified in a Community Wildfire Protection Plan or other planning document?

CWPP

Other

If answered CWPP please provide the name and year of the CWPP:

Name:

Year:

If answered *Other*, please provide the name and year of the document:

Name:

Year:

What type of project is this request for?

☐

Forest Fuels Mitigation

☐

Grasslands Fuels Mitigation

FOREST MITIGATION: Is the project in a priority area in Boulder County where it is one or more of the following (check all that apply):

- ☐ Ranked as having high wildfire risk potential as identified in a local or county CWPP
- ☐ Within or adjacent to the Boulder Priority Focus Areas
- ☐ Within or adjacent to identified Potential Operational Delineation (POD) areas
- ☐ Other? Name:

Have you attached a one-page map showing the project area?

Yes

No

GRASSLAND MITIGATION: Has this project been identified as having a high potential for wildfire risk near or adjacent to a densely populated community or critical infrastructure in:

A local or county CWPP

Other? Name:

Have you attached a one-page map showing the project area?

Yes

No

CONSULTATION/ PARTNERING: Have you consulted with a professional forester and/or the Boulder County Wildfire Partners Forest and Grasslands Project Coordinator in the early planning stages of your proposed project and completed a pre-application project site visit?

Yes

No

Have you submitted a completed site visit form, signed by the consulting forester and/or the Boulder County Wildfire Team Forest and Grasslands Project Coordinator?

Yes

No

Please provide the name of the consulting forester(s) and date of the site visit (date must be within one year of project application).

Name:

Date:

C. Project Goals and Objectives

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

D. BUDGET MATCHING CONTRIBUTIONS

Contributors:							TOTAL
Cash Match (Dollars)							
In-Kind Match (Soft)							
Total:							

E. TOTAL PROJECT BUDGET

	Grant Share \$ Amount Requesting	Match Contributions(from Table D)		TOTAL
		Cash Match	In-Kind Match	
Personnel/Labor				
Supplies/Materials				
Contractual Services				
TOTAL PROJECT BUDGET				

F. Budget Narrative (2,500 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. Project Scope of Work (2,500 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. Partner Contributions (2,000 Character limit; characters include: letters, numbers, spaces, and punctuation.)

K. Landowner Engagement (2,000 Character limit; characters include: letters, numbers, spaces, and puctuation.)

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

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

N. 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.

*****Please confirm that all required documents are included in your application packet by checking the boxes below.**