



**2019-2020 Grant Program Application-
Fuels & Forest Health Projects**
Forest Restoration and Wildfire Risk Mitigation
Grant Program
Established by SB 17-050

A. Applicant Information

Name of Project:	
Applicant/Fiscal Agent:	
Type of Organization:	
Contact Person/Title:	
Mailing Address:	
City/Zip Code:	
Phone (Work/Cell):	
Email:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is this application associated with a separate capacity building grant application?
<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, to the above, is the proposed capacity building project contingent upon funding of this fuels & forest health project?

B. Eligibility

Note: If "no" is selected for any of the items below, the application will be considered ineligible

Is the project area within the wildland urban interface (WUI) of Colorado and have you attached a required 1-page map showing the project area from CO-WRAP* with the wildfire risk layer highlighted? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have an additional required detailed and clear map indicating treatment area(s) and location description? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a required defined plan for utilizing forest products/woody materials generated by the project? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you contacted any forest products or wood utilization businesses or incorporated wood utilization as required ? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you consulted with county officials on this project and attached a required letter of support? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have required formal commitment for matching funds and landowner participation? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you agree to contracting requirements, including reporting and monitoring requirements, as outlined in the Request for Applications? <input type="checkbox"/> Yes <input type="checkbox"/> No

*CO-WRAP may be accessed at: <https://www.coloradowildfirerisk.com/>

C. Project Summary

All information for the project must fit into the allotted character spaces below.

Approximate number of homes directly affected by this project.	
Total number of acres* to be treated:	
Estimated cost/acre:	
Is this project identified through a community-based collaborative process such as a Community Wildfire Protection Plan (CWPP) or similar? If yes, please list plan name(s).	
Will this project involve a contract with an accredited Colorado Youth or Veterans Corps Association? If yes, please name the group.	
Will this project result in the protection of water supplies? If yes, please describe water supplies in Section H. <i>Project Area Description and Current Conditions.</i>	

***Total number of acres** identified should only be treated acres within project boundaries and should not include areas that are inoperable, inaccessible, or untreated “reserves” within project areas.

D. Project Objectives

All information for the project must fit into the allotted 1,500-character space. **Characters include letters, numbers, spaces and punctuation.**

E. Matching Contributions

(Applications will be disqualified if sufficient match is not identified.) Please specify the name of each match contributor and the dollar amount of each contribution. **DO NOT** show grant -requested funds in this table. This is for matching share only, which is a minimum of 50 percent of total project cost.

Contributors: (Please specify)							TOTAL
Cash Match (Dollars):							
In-kind Match: Hourly rate cannot exceed \$26.78							
TOTAL:							

F. Total Project Budget

	Grant Share (\$ Amount requested)	Match (carry over from Block C above)		TOTAL
		Dollars	In-Kind	
Personnel / Labor:				
Supplies / Materials:				
Contractual Services:				
Indirect Costs*:				
TOTAL PROJECT BUDGET				

Anticipated Project Revenue (from wood or biomass utilization)	
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* Grant share indirect costs may not exceed 10% of grant total

Please be sure the totals in **green** match *and* the totals in **red** match.

G. Budget Narrative

All information for the project must fit into the allotted 2,000-character space. **Characters include letters, numbers, spaces and punctuation.**

H. Project Area Description and Current Conditions

All information for the project must fit into the allotted 2,000-character space. **Characters include letters, numbers, spaces and punctuation.**

I. Project Prescription and Scientific Foundation

All information for the project must fit into the allotted 2,500-character space. **Characters include letters, numbers, spaces and punctuation.**

J. Strategic Value of Project

All information for the project must fit into the allotted 1,500-character space. **Characters include letters, numbers, spaces and punctuation.**

K. Forest Product Utilization

All information for the project must fit into the allotted 1,500-character space. **Characters include letters, numbers, spaces and punctuation.**

L. Partners and Supporters

All information for the project must fit into the allotted 1,000-character space. **Characters include letters, numbers, spaces and punctuation.**

M. Timeline

All information for the project must fit into the allotted 1,000-character space. **Characters include letters, numbers, spaces and punctuation.**

N. Maintenance Sustaining Project Longevity

All information for the project must fit into the allotted 1,500-character space. **Characters include letters, numbers, spaces and punctuation.**

Applicant Signature: _____

Date: _____

Note: Additional support materials beyond the allowable support letters, maps and contract bids will not be considered.