



FOR INTERNAL USE ONLY
 RATING: _____
 CASE NO: _____
 ROUTING: 2604 HH FEPP FPP

APPLICATION FOR FIRE DEPARTMENT ASSISTANCE

VOLUNTEER PROGRAMS: Rural VFD Assistance Programs (2604), Helping Hands, Federal Property (FEPP & FFP)

Name of Fire Department: _____

Physical Address: _____
(Street) (City) (Zip)

Mailing Address: _____
(Street or PO Box) (City) (Zip)

Email Address: _____

County: _____ Department Telephone: _____

Fax Telephone: _____

Fire Department Officers (Contact Information)

Name	Title	Telephone Number	Cell Number
	Fire Chief		

State of Texas Charter Number (Required): _____
If operating under a city government, please print "Under City".

Year Fire Department was Created: _____

Membership: Number of Volunteers: _____

Number of Paid Full-Time: _____

Number of Paid Part-Time: _____

Federal Tax Identification Number (Required): _____

Do you have a designated protection area under a 911 Public Service Answering Point?

Yes No

Size of Protection Area (Do not include mutual aid response area): _____
 (Square Miles)

Attach a map of your Primary 911 Protection Area with this application if a map has not been previously submitted, or there has been a change in the size of your Primary 911 Protection Area.

Population of your 911 Protection Area: _____

Distance to the Nearest Viable Mutual-Aid Department (Station to Station): _____
 (Miles)

Name of Department: _____

RURAL VOLUNTEER FIRE DEPARTMENT ASSISTANCE PROGRAM (HB2604) (IRS FORM W-9 Required)

Purchases made before a grant approval date are not eligible for reimbursement.

You may apply for multiple Elements. Applications will remain on file until approved by TFS or cancelled in writing by the VFD.

Compressed Air Foam System (CAFS) Options will be offered at the time of award for the following program elements: Large Brush Truck, Tanker, Small Brush Truck and Slip-On Modules. CAFS Cost Share Rate: 90% up to a maximum of \$18,000.

Copies of previous requests will not be accepted.

Manual Calculation (Percentage Conversion: 90%=.9, 75% = .75)

Mark (X)	Program Element	Estimated Total Cost	TFS Cost Share %	Requested Amount	TFS Maximum Allowable Amount
	Large Brush Truck				\$200,000
	Tanker				\$200,000
	Small Brush Truck				\$100,000
	Truck Chassis - Large				\$90,000
	Truck Chassis - Small				\$45,000
	Slip-On Modules				\$18,000
	Rescue Equipment				\$15,000
	Fire Equipment				\$15,000
	Structural Gear				\$8,400
	Wildland Gear				\$8,400
	Training Library				\$8,000
	Computer				\$1,000
	Training Equipment (Projector)				\$1,000
	Dry Hydrants				\$8,000
					\$800/Installation

TRAINING TUITION (IRS FORM W-9 Required)

Applications received on or after the course start date are not eligible for reimbursement.

Please attach additional course information, such as a syllabus, brochure, and/or a flyer for eligibility determination purposes.

Name of School (Required): _____

Date(s) of Training	Course Name (s)	Number of Trainees	Tuition Cost per Trainee

HELPING HANDS PROGRAM

Describe the equipment you are requesting, including size information for all protective clothing, water handling equipment, etc.
Attach additional sheets as needed.

FEDERAL PROPERTY PROGRAMS DoD Firefighter Property Program (FFP) & Federal Excess Personal Property (FEPP)

FFP (Equipment Ownership)	FEPP (Equipment On Loan)
Choose ONE vehicle per application. Submit additional applications for additional vehicles.	Please describe the requested equipment, including transfer details. Attach additional sheets as needed.
Truck Cargo 1 Ton or 5/4 Ton 4X4 Truck Tanker	
Truck Cargo 2.5 Ton Truck Van	
Truck Cargo 5 Ton Truck Blazer	
Truck Tractor (5th Wheel) Truck Fire	

High Mobility Multi-purpose Wheeled Humvee or Multi-purpose Wheeled Vehicles **are not available** under the DoD-FFP program.
There is no guarantee that the Texas A&M Forest Service will be able to provide the requested vehicle.

POINT OF CONTACT: The Point of Contact should be an individual who may be easily reached to coordinate with TFS.

Name: _____ E-mail: _____
Home Phone: _____ Cell Phone: _____
Fax Number: _____ Work Phone: _____

AUTHORIZATION: This document requires authentication by the departments highest ranking official.

I certify that the information entered on this application is true and accurate and that I, the undersigned
am authorized by the _____ Volunteer Fire Department
to represent their interests in acquiring funds and equipment for the Department.

What is your preferred method of communication with Texas A&M Forest Service?

Email Fax Direct Mail

Name (Print): _____ Title: _____

Signature: _____ Date: _____

Submit via Mail or Fax:

Rural VFD Assistance Program (2604)

Texas A&M Forest Service
Capacity Building Department
200 Technology Way, Suite 1162
College Station, Texas 77845-3424

Fax: (979) 845-6160

Call 979-458-6505 to confirm it was received.

Federal Property and Helping Hands Programs

Texas A&M Forest Service
Capacity Building Department
P.O. Box 310
Lufkin, Texas 75901-0310

Fax: (936) 639- 8138

Call 936-639-8100 to confirm it was received.

Important Notes

Send all 3 pages of the application with each submission.
Rural VFD Assistance Program (HB2604) requires IRS Form W-9.
The application and IRS Form W-9 must be signed and dated.