

FY 2019 State Fire Assistance WUI Grant

FOR OFFICIAL USE ONLY

State Submitting Project:	
State Priority Number:	
Dollar Amount Requested:	
Matching Share:	

This document is for proposal development only. Applications must be submitted to the appropriate state/island forestry entity and entered into the online submission system.

1	Proposal Cooperator	
	Cooperator Organization:	
	Contact Person:	
	Address:	
	City/State/Zip Code:	
	Phone (Work/Cell):	
	Email:	
1	Applicant Information	
	Applicant:	
	Contact Person:	
	Address:	
	City/Zip Code:	
	Phone (Work/Cell):	
	Email:	
	Fax:	
	Federal Tax ID\DUNS #:	

2	Project Information	
	Name of Project:	
	Community Name(s):	
	County(ies):	
	Congressional District:	
	GIS Coordinates (choose one)	
	Reference Point Name:	
	Lat/Long:	
	Description:	
	Area Name:	
	Boundary Lat/Longs:	
Description:		

Applicant Budget				
	Grant Funds Requested	Match		Total Project Cost
		Applicant	Non-Federal Contributors	
3	Personnel/Labor:			
	Fringe Benefits:			
	Travel:			
	Equipment:			
	Supplies:			
	Contractual:			
	Other:			
	Indirect Costs:			
	TOTAL:			

Budget Narrative (1700 characters including spaces)	
4	

	Project Area Description and Challenges (1700 characters including spaces)	
5		

	Relation to Forest Action Plan and CWPP (1700 characters including spaces)	
6		

	Proposed Activities (3800 characters including spaces)	
7		

	Landscape (1700 characters including spaces)	
8		

	Project Collaboration (1700 characters including spaces)	
9		

	Project Timeline (1700 characters including spaces)	
10		

	Project Sustainability (1700 characters including spaces)	
11		