2012 WILDLAND FIRE PERSONAL PROTECTIVE EQUIPMENT GRANTS

(GENERAL INFORMATION)

The U.S. Department of Agriculture, Forest Service, through the Cooperative Forestry Assistance Act, has allocated funds to Ohio for the Volunteer Fire Assistance Grant Program. A large portion of these funds will be used to purchase wildland fire personal protective equipment. These items will equip rural and volunteer fire departments with equipment that meets NFPA 1977 Standard for Wildland Firefighting Protective Clothing. This equipment will be distributed to fire protection agencies on the basis of the Act and the federal guidelines.

1. The Department receiving a grant will receive up to 10 complete sets of wildland fire personal protective equipment. The sets include nomex pants and shirt, fire shelter, gloves, hard hat, and goggles. This equipment meets the NFPA 1977 Standard for Wildland Firefighting Protective Clothing.

2. Only fire departments protecting communities under 10,000 population qualify.

3. Communities imposing strict boundary limits which exclude rural residences or using a subscription or a fee response system will not be considered.

4. Departments **must** have a Fire Department Identification number (FDID) to qualify.

5. Grants will be awarded based on application information.

6. Awardees will be notified as to time, dates, and location of equipment pickups. Awardees will be responsible for picking up the equipment on these dates.

If you have any questions, please call Rick Maier (740) 774-1596 - ext 110

APPLICATIONS MUST BE POSTMARKED NO LATER THAN JUNE 18, 2012

2012 Wildland Fire Personal Protective Equipment (WFPPE) Grants (funded by the Volunteer Fire Assistance Program)

GENERAL INSTRUCTIONS

Type or print all information. Each blank must be filled in and the application must be signed by the *Chief* of the fire department.

The deadline for return of the application to the Division of Forestry is June 18, 2012.

LINE BY LINE INSTRUCTIONS

1. **FIRE DEPARTMENT NAME**. Enter the proper name of the fire department.

2. **FIRE DEPARTMENT IDENTIFICATION NUMBER (FDID).** Enter the five digit number you use to identify your fire department on State Fire Report Forms.

3. **ADDRESS:** Fire department mailing address

4. **CITY:** Fire department city

5. **ZIP:** Zip code of fire department

6. **COUNTY**. Enter the county where your fire department is *located.*

7. **TOWNSHIP.** Enter the township where your fire department is *located.*

8. **NUMBER OF FULL-TIME FIREFIGHTERS ON YOUR DEPARTMENT**. In Ohio, full-time firefighters will be members of the Police and Firemen's Pension Fund.

9. **NUMBER OF FIREFIGHTERS WHO ARE PART-TIME PAID OR RECEIVE AN ANNUAL SALARY**. Enter the number of firefighters who are not full-time but who do receive some form of monetary compensation.

10. **NUMBER OF FIREFIGHTERS IN YOUR DEPARTMENT WHO ARE NOT PAID.** Enter the number of firefighters who do not receive any compensation.

11. **TOTAL POPULATION SERVED BY YOUR DEPARTMENT:** Enter the population of the area for which this department provides primary fire protection. Include territory under contract if primary fire protection is provided. DO NOT include territory where you respond under mutual aid agreements to provide supplemental protection. This figure should be as accurate as possible. For multi-community applications separate the population of each jurisdiction out and list individually.

12. **SOURCE OF POPULATION FIGURES**: Indicate where you obtained the population figures.

13. **SQUARE MILES PROTECTED**: Enter the total square miles of the area for which this department provides primary fire protection. Include territory under contract if primary protection is provided. DO NOT include territory where you respond under mutual aid agreements to provide supplemental protection. This figure should be as accurate as possible.

14. **TOTAL OPERATING BUDGET**: Total operating budget includes money provided by taxes and fire protection contracts, as well as from fund raising and donations used for operating expenses.

15. **WILDLAND FIRE REPORTS**: Only fire departments located within the Division of Forestry's designated protection area are eligible to submit reports.

16. thru 19. **SELF-EXPLANATORY**

20. **TYPE OF POLITICAL SUBDIVISION THAT OPERATES THIS FIRE DEPARTMENT:** Public fire departments are operated by one of the governmental units listed on the application. Private volunteer fire companies are normally operated as non-profit corporations that contract their services to a political subdivision.

21. **PAST VFA OR WFPPE GRANT RECEIVED:** If your department has received a VFA grant in the past, or received WFPPE through this program please list the year that the grant was received.

22 thru 23: **SELF-EXPLANATORY**

If you have questions after reading these instructions, please call Rick Maier with the Division of Forestry at (740) 774-1596- ext.110.

REMEMBER, APPLICATIONS MUST BE POSTMARKED NO LATER THAN JUNE 18, 2012

SEND TO:

RICK MAIER, FEPP/ VFA PROGRAM COORDINATOR
ODNR - OHIO DIVISION OF FORESTRY
345 ALLEN AVE.
CHILLICOTHE, OH 45601

ODNR DIVISION OF FORESTRY
2012 Wildland Fire Personal Protective Equipment Grants
(funded by the Volunteer Fire Assistance program)

APPLICATIONS MUST BE POSTMARKED NO LATER THAN JUNE 18, 2012

1. Fire Department Name: _____

2. Fire Department Identification Number (FDID): _____

3. Address:_____ 4. City:_____

5. Zip:_____ 6. County _____7. Township_____

8. Number of full-time firefighters on your department: _____

9. Number of firefighters who are part-time paid or receive an annual salary: _____

10. Number of firefighters in your department who are not paid: _____

11. Total resident population served by your department: _____

12. Source of population figure: (check box) (1) ☐ Census (2) ☐ Government Agency

    (3) ☐ Fire Dept. Estimate (4) ☐ Other: (please list source) _____

13. What is the total area, in square miles, that you provide primary fire protection for?
    _____ square miles

14. What was your total operating budget last year, including both public and private sources of income?

    Tax Levy Income $_____._____

    Fund Raisers $_____._____

    Total Budget $_____._____

15. Does your department submit wildland fire reports to the Ohio Division of Forestry?
    Yes ☐ No ☐

16. List the total number of fires in the following categories for last year:

    Structure _____ Vehicle _____ Wildland _____

17. Do you have mutual aid agreements with other fire departments? (check box) ☐ Yes ☐ No

18. Does your department utilize the Incident Command System (ICS) when planning and responding to incidents? Yes ☐ No ☐

19. Will the grant be used by: (check one)
    ☐ Established fire department
    ☐ Newly organizing fire department- **if yes, list date of organization _____**

20. Type of political subdivision that operates this fire department: (check the description that applies)
    City ☐ Village ☐ Township ☐ County ☐ Joint Fire Protection District ☐
    None, this is a private company ☐

21. Has your fire department received a VFA or WFPPE grant in the past?

    Yes ☐ No ☐ If yes, what year ?_____

22. *Print* the name and telephone number of a person we may contact with questions about this application.

_____ (_____)_____-_____ (_____)_____ -_____ (____)____-_____
Name Day Phone Night Phone Cell Phone

Email address:_____

CERTIFICATION

23. I certify that the information contained in this application is correct to the best of my knowledge and that the fire department or political subdivision I represent has the intention to complete this project should the grant be awarded.

X_____
Signature of Fire Chief **Date**

_____
Print or Type Name of Fire Chief **Area Code and Phone Number**

_____
Address of Fire Chief

_____ _____ _____
City **State** **Zip Code**

MUST BE POSTMARKED BY JUNE 18, 2012

RETURN TO : RICK MAIER, FEPP / VFA PROGRAM COORDINATOR
OHIO DIVISION OF FORESTRY
345 ALLEN AVE.
CHILLICOTHE, OH 45601

(All sections MUST be filled out completely and have equipment request form attached)

2012 Wildland Fire Personal Protective Clothing Request Form

Department Name:_____County:_____

FDID #:_____

Nomex Pants Size	Waist	Length	How many each? (maximum total 10 pair)
Medium	30-34	30	
Large	34-38	30	
X - Large	36-40	30	
XX-Large	40-44	30	
Medium	30-34	33	
Large	34-38	33	
X - Large	36-40	33	
XX-Large	40-44	33	

Nomex Shirt Size	How many each? (maximum total 10 shirts)
Medium (15 ½ x 33" Sleeve)	
Large (16 ½ x 34" Sleeve)	
X-Large (17 ½ x 35" Sleeve)	
XX-Large (18 ½ x 36" Sleeve)	

Leather Glove Size	How many each? (maximum total 10 pair)
Medium	
Large	
X-Large	

	How many? (maximum 10 each item)
Fire Shelters	
Hard Hats	
Safety Goggles	

This form must be attached to your application for Wildland PPE!!!!