



# VFA PROJECT APPLICATION

Missouri Department of Conservation  
and  
Volunteer Fire Assistance Provided by the US Forest Service  
(Please type or print all information)

Applications **MUST** be postmarked no later than  
**Friday, October 14, 2022**

If emailed or hand delivered, applications must be received by the  
Forestry Section **by 5:00 PM, Friday, October 14, 2022**

Your fire department's protection area must have a population of 10,000 or less and your fire department must have a current Mutual Aid Agreement, signed by the current Chief, on file with the Missouri Department of Conservation in order to be eligible for a Matching Funds Grant.

**\*Grants will be awarded for 50% of approved purchases up to \$8,000** (maximum of \$4,000 reimbursed by grant funds).

**\*Grants will be awarded for 50% of approved purchases up to \$9,000** (maximum of \$4,500 reimbursed by grant funds) **for fire departments which have an approved Community Wildfire Protection Plan (CWPP)**. *Must include a copy of the MDC approved CWPP with this application.*

Date of Request: \_\_\_\_\_ County: \_\_\_\_\_ Total Project Cost \$ \_\_\_\_\_  
Grand Total on Request List

Name of requesting organization or fire department: \_\_\_\_\_  
Use the same name as it appears on the Mutual Aid Agreement

Contact Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number (\_\_\_\_) \_\_\_\_\_ Alternate Phone Number: (\_\_\_\_) \_\_\_\_\_

**\*You must provide a valid contact phone number and it must remain valid throughout the grant process.**

1. What is the population of your fire department's primary response area? *(Required for funding)* \_\_\_\_\_
2. Indicate the type of fire organization that is the most correct. Is your fire department: *(Check one only)*  
 Tax Supported       Membership Supported       Donation Supported
3. Does your fire department provide any protection for State or Federal Lands? *(Check one)* Yes \_\_\_\_\_ No \_\_\_\_\_  
 State Land Acres Protected \_\_\_\_\_ Federal Land Acres Protected \_\_\_\_\_
4. How many Wildfire reports has your fire department submitted to MDC in Calendar Year 2021?  
*(Reports must be entered into the MDC Online Fire Reporting System)* # of Reports \_\_\_\_\_
5. Does your fire department submit **timely** reports of all wildfires to MDC? Yes \_\_\_\_\_ No \_\_\_\_\_  
*(Reports must be entered into the MDC Online Fire Reporting System within 30 days after the incident.)*
6. Has your department received MDC matching funds for any of the past three years? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, when? (Check all that apply) 2020 \_\_\_\_\_ 2021 \_\_\_\_\_ 2022 \_\_\_\_\_

7. What is your department's current annual budget, including all sources of income?  
**Must include** a copy of the fire department's annual budget report Annual Budget \$ \_\_\_\_\_  
 or other documents to verify this figure.
8. How many fire stations does your department have? Number of Stations: \_\_\_\_\_
9. Has your department received any federal grant assistance in the past three years? Yes \_\_\_ No \_\_\_  
 If yes, when? (Check all that apply) 2020 \_\_\_\_\_ 2021 \_\_\_\_\_ 2022 \_\_\_\_\_
10. Is your fire department's protection area covered by a Community Wildfire Protection Plan (CWPP)?  
 If yes, a copy of your fire department's CWPP must be included with this application. Yes \_\_\_ No \_\_\_

**Certifications & Assurances:**

I, \_\_\_\_\_, certify that the statements below are true and that all members of the board of directors/commission/city council are aware of these requirements:

I certify that the department complies with all federal statutes relating to non-discrimination. The department does not discriminate on the basis of race, color, or national origin, handicaps, age, and drug or alcohol abuse and will maintain confidentiality of treatment records. I also certify that the department will comply with the Wild and Scenic Rivers Act of the Department 9/68. I also certify that I am not now nor have been debarred; declared ineligible or voluntarily excluded from doing business with the federal government and that no one in the decision making position has within a three year period, proceeding this date, been convicted or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain or performing a public transaction or contract in violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements or otherwise criminally charged or indicted by a government entity. That I have not, in the last three years, had one or more transactions (Federal, State or Local) terminated for causes or default. I certify that the department operates as a drug free work place under 45CFR Part 76 and will provide a copy of the same to all employees engaged in the performance of this grant. I also certify that the above statements are true and accurate to the best of my knowledge. (Any false or incorrect information will void the application.)

*"The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, DC 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer."*

**FIRE DEPARTMENT NAME:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_ **Name Printed:** \_\_\_\_\_

**Title (circle one):** Chief    Board President    Mayor    Other (specify) \_\_\_\_\_

## EQUIPMENT PURCHASE REQUEST LIST

*Priority will be given to Communications and Wildland Fire PPE and Equipment*

**\*\* DO NOT SPECIFY BRAND NAMES OR SPECIFIC MODELS FOR THE EQUIPMENT YOU WISH TO PURCHASE\*\***

**\*\*IF AWARDED FUNDING, YOU MUST PURCHASE EXACTLY WHAT IS ASKED FOR IN REQUEST LIST BELOW\*\***

**\*\*ALL ITEMS YOU WISH TO PURCHASE MUST BE LISTED BELOW, ie. radio antennas, batteries, mics, radio programming, etc.\*\***

	Equipment	Description	Equipment Requested	\$ per each	Qty	Total \$
		<i>Base Station</i>				
		<i>Mobile</i>				
COM	Communications	<i>Portable</i>				
		<i>Pagers</i>				
		<i>Hydrant</i>				
DHY	Dry Hydrant Kits	<i>Pipe, Strainer</i>				
		<i>Brooms, Rakes</i>				
	Wildland	<i>Flappers</i>				
WHT	Handtools	<i>Back Pack Pump</i>				
		<i>Drip torch</i>				
		<i>Hose</i>				
WLH	Wildland Hose	<i>Hose Reels</i>				
	Wildland Water	<i>Hose Adapters</i>				
WLN	Delivery	<i>Valves, Nozzles</i>				
		<i>Foam Pack</i>				
		<i>Nomex Shirts</i>				
		<i>Nomex Pants</i>				
WPP	Wildland PPE	<i>Helmets</i>				
		<i>Gloves, Goggles</i>				
		<i>Fire Shelters, Etc.</i>				
WPT	Wildland Power	<i>Chainsaws</i>				
	Tools	<i>Leafblowers</i>				
WPU	Wildland Pumps	<i>All Types</i>				
WSI	Wildland Water	<i>Slip-In or</i>				
	Unit	<i>Permanent</i>				
WSU	Wildland Support	<i>GPS Units</i>				
	Equipment	<i>Weather Instr.</i>				
		<i>Vehicle</i>				
WTA	Water Tanks	<i>Collapsable</i>				
		<i>Permanent</i>				

Structural fire suppression gear/equipment is not priority for this funding source.

	<b>Equipment</b>	<b>Description</b>	<b>Equipment Requested</b>	<b>\$ per each</b>	<b>Qty</b>	<b>Total \$</b>
		<i>Light Bars</i>				
SAF	Safety	<i>Flash Lights</i>				
		<i>Sirens</i>				
		<i>Hooligan</i>				
SHT	Structural	<i>Axes, Pike Poles</i>				
	Handtools	<i>Ladders</i>				
SPU	Structural	<i>All Types</i>				
	Pumps					
STH	Structural Hose	<i>Hose and Reels</i>				
		<i>Hose Adapters</i>				
STD	Structural Water	<i>Valves, Nozzles</i>				
	Delivery	<i>Foam Packs</i>				
SPT	Structural	<i>Saws, Vent Fans</i>				
	Power Tools	<i>Etc.</i>				
		<i>Bunker Gear</i>				
STP	Structural PPE	<i>Coats/Pants</i>				
		<i>Helmets, Boots</i>				

Equipment Request Grand Total \_\_\_\_\_

*Please use this figure as Total Project Cost on Page 1*