

Date Received:

Application Deadline: Sep 8, 2010



**2010-2011 Fire Protection
Cost Share Program**

Applicant Information

Name: _____

Address: _____

Phone: _____ E-Mail: _____

Property Information

Tax Parcel(s): _____

Total Acres: _____

Project Information

Brief description of proposed project: _____

Can this project be completed by October 30, 2011? Yes No

Will this project. . .

- | | Yes | No | Don't Know |
|---|--------------------------|--------------------------|--------------------------|
| 1. Reduce fuels present around your home? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Reduce fuels on a lot without a home? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Involve pruning and thinning? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Include slash disposal? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Treat the entire property? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Cost Estimate*:

Total Project Cost*: _____ Requested Amount*: _____

*if known, may require a site visit before cost can be determined.

2010-2011 Fire Protection Cost Share Program

The KCCD Board of Supervisors will review all applications for this cost share program and make the funding decisions. Those decisions will be shared with each applicant no later than Wednesday, September 15 2010. If your project is selected for funding, KCCD staff will work with you to complete a landowner agreement. Finalization of that agreement will be followed by a written letter authorizing you to proceed with your project.

KCCD staff will conduct a site assessment and review all plans to ensure that fire protection practices are implemented. Upon the completion of this project, KCCD staff will inspect the project.

Your share of the project cost may include cash or in-kind (e.g. your labor or equipment). You should also be aware that the project may necessitate hiring a contractor depending on the scope of the project. This may require you to incur some up front costs and then submit a "Reimbursement Request Form". In addition, this project will require some time of yours, in communicating, corresponding, gathering information, and signing documents as we work through the funding and implementation process.

Attached to this application is a "Permission to Access Agreement". Your signature on that agreement provides the KCCD with a right of entry as needed to investigate the project, gather data, survey, photograph the site, etc. We welcome your presence at any site visit and would, at a minimum, notify you in advance of the visit.

I understand that submitting this application does not guarantee funding for my project. Further I understand that the KCCD's receipt of this signed application does not constitute an authorization to begin work or incur any costs. Any costs incurred prior to receiving written approval and an "authorization to proceed letter" from the KCCD are solely my responsibility.

Name: _____

Signature: _____



**Sign Here and
Return Original
to KCCD**

Address: _____

Phone: _____

E-mail: _____

The cost-share provided for the fire-protection program is on a voluntary basis. KCCD provides recommendations based on the National Firewise Communities Programs and applicable NRCS and DNR standards/practices. This information is provided with the intent to share knowledge to improve fire safety and provide educational programs throughout the county. Further, the Kittitas County Conservation District does not warrant, guarantee or make any representation regarding the implementation of any recommended practice. In addition, no endorsement of any company or product is given or implied.

**Permission to Access Agreement
Between
Kittitas County Conservation District
607 Mountain View, Ellensburg WA 98926
Phone (509) 925-8585 Ext. 4
Fax (509) 925-8591**

And

_____ (*landowner name*)

I, _____, grant access to my property (tax parcel

_____) to the Kittitas County Conservation District (KCCD), its employees, representatives, or contractors for the expressed **purpose of planning a Firewise/Fire protection project**. By signing this form, I certify that I am the legal owner of this property and therefore can grant permission to access to the KCCD. I understand that as the property owner, I have a duty to disclose to the KCCD all defects and safety hazards on the property that are known to or reasonably discoverable by me. I also understand that signing this agreement does not authorize the KCCD to perform or have performed any construction activities.

I understand that the KCCD shall indemnify and hold me harmless from and against any loss, damage, or injury caused by, or on behalf of, or through the fault of the KCCD. I shall indemnify and hold KCCD harmless from and against any loss, damage, or injury caused by, or on behalf of, or through the fault of myself. Nothing in this statement shall require either of us to indemnify the other against either of our own willful or negligent misconduct.

I understand that this agreement becomes effective upon receipt of the signed form and shall terminate 24 months from that date, unless otherwise agreed upon in writing. I may terminate this agreement at any time by submitting a written notification to the KCCD.

Printed Name

Signature

Date

Address

City, State, Zip

Phone Number