

FOR INTERNAL USE ONLY					
Rating:					
Case:					
Routing:	FEPP	FFP			

## APPLICATION FOR FIRE DEPARTMENT ASSISTANCE

FEDERAL PROPERTY: FEPP & DoD FFP

Name of Fire D	epartment:					
Physical Addres	SS:					
		(Street)	(Ci	ty)	(Zip Code)	
Mailing Addres	S:					
E mail Address	<u>.</u> .	(Street or P.O. Box)	(Ci	ty)	(Zip Code)	
E-mail Address	5.		Descentes out Talaches			
County:			Department Telephone:			
			Fax Number			
Fire Departm	ent Officers (Contact Info	rmation)				
	Name	Title	Telephone Number	Cell N	umber	
		Fire Chief				
	<b>.</b>					
	Charter Number (Require a city government, please print	·	Fire Departme	nt Created	(Year)	
		·			(rear)	
Membership:	Number of Volunteers					
	Number of Paid Full-	Time Positions:				
	Number of Paid Part-	Time Positions:				
Federal Tax Ide	entification Number (Requi	red)				
Do you have a	Do you have a designated protection area under a 911 Public Service Answering Point? Yes No					
What is the size	e of the 911 Protection A	rea? (Do not include the i	mutual aid response area):			
Attach a map of your Primary 911 Protection Area if a map has not been previously submitted.				(Squa	(Square Miles)	
What is the pop	oulation of your 911 Prote	ection Area? :				
What is the dist	ance to the nearest viab	le Mutual-Aid Departr	ment? (Station to Station):			
		·	. , ,		(Miles)	
Name of the Mu	utual-Aid Department:					

## FEPP (Equipment on Loan)

Please describe the requested equipment, including the transfer details. Attach additional sheet if needed.

## FFP (Equipment Ownership)

Please choose <u>ONE</u> vehicle per application.	Submit additional applications for additional vehicles
Truck Cargo 1Ton or 5/4 Ton 4X4	Truck Tanker
Truck Cargo 2.5 Ton	Truck Van
Truck Cargo 5 Ton	Truck Fire
Truck Tractor (5th Wheel)	
High Mobility Multi-purpose Wheeled Humvee or Multi-purpose There is no guarantee that the Texas A&M Forest Service will I	Wheeled Vehicles <b>are not available</b> under the DoD-FFP Program. be able to provide the requested vehicle.
<b>Slip-on Unit</b> I wish to apply for a Slip-on Unit in conjunction with	this FFP application. Yes No
Cost-share Rate: 100% of the actual cost not to exceed \$20,00 NOTE: Only available for 2.5 Ton cargo, 5 Ton cargo and tract	-
POINT OF CONTACT: The Point of Contact should be	e an individual who may be easily reached to coordinate with TFS.
Name: E-mail:	Home Phone: Work Phone: Cell Phone:
Authorization: This document requires authentication by I certify that the information entered on this applica authorized by the	y the department's highest-ranking official. tion is true and accurate and that I, the undersigned am Fire Department
to represent their interests in acquiring funds and e	equipment for the Department.
What is your preferred method of communication v E-mail	with Texas A&M Forest Service? Fax Direct Mail
Name:	Title:
(Print) Signature:	Date:
Submit via Mail, E-mail or Fax:	Important Notes:
Federal Property Programs         Texas A&M Forest Service         Capacity Building Department         2127 S. First St.         Lufkin, Texas 75901-0310         E-mail       fepp@tfs.tamu.edu         ffp@tfs.tamu         Fax: (936) 639-8138         Call (936) 639-8100 to confirm it was received	Send both pages of the application with each submission. IRS Form W-9 is required for applicants applying for a Slip-on Unit The application and IRS Form W-9 <b>MUST</b> be signed and dated.