

APPLICATION FOR FIRE DEPARTMENT ASSISTANCE

DEPARTMENT OF DEFENSE FIREFIGHTER PROPERTY PROGRAM

Name of Fire Department:

Physical Address:

street address

city

zip code

Mailing Address:

if different

mailing address

city

zip code

County:

E-Mail Address:

Department Phone Number:

Fax Number:

Point of Contact:

Contact Phone Number:

Fire Department Officers:

Name	Title	Phone:	Cell:
	Fire Chief		
	Assistant Chief		
	President		

Do you provide fire protection services to a designated primary protection area, identified by the county?

State of Texas Charter Number:

If operating under a local government entity, please type "Under City, County, ESD"

Federal Tax Identification Number:

Year Department was Created:

Membership:

Paid Positions include:
Firefighters, EMS,
Fire Marshals, etc.

Number of Active Volunteers:

Number of Volunteer Admin/Staff:

Number of Paid Full-Time:

Number of Paid Admin/Staff:

Number of Paid Part-Time*:

****Do not include part time members used in a pool to backfill other paid positions.***

Population of the 911 Protection Area:

Please provide the following information regarding the nearest viable mutual-aid department.

Name of Mutual Aid Department:

Distance, in miles, to the nearest viable mutual aid department (station to station):

Size of Primary 911 Protection Areas are acquired from governmental entities responsible for maintaining local map data. To learn how to verify the size of your protection area, or how to update this information, please visit [TexasFD.com/ProtectionAreas](https://www.texasfd.com/ProtectionAreas).

FFP APPARATUS SELECTION

Please choose **ONE** vehicle per application.

Available options: 1 ton, 2.5 ton, 5 ton, tractor truck chassis, tanker, van, fire truck

There is no guarantee that Texas A&M Forest Service will be able to provide the requested vehicle.

Slip-on Unit

Yes

No

(Available to volunteer and combination departments with 20 or fewer paid members)

I wish to apply for a slip-on unit in conjunction with this FFP application.

Cost-share rate: 100% of the actual cost of components, not to exceed \$20,000 in grant assistance (with or without CAFS.)

NOTE: Only available for 1-2 ton, 2.5 ton cargo, 5 ton cargo, and tractor style DoD firefighting conversions.

IRS FORM W-9: A completed IRS Form W-9 must accompany this application. Please ensure completeness to assist in the timely processing of your application.

(Required)

(This section must be certified by authorized Chief Officer or President)

APPLICANT CERTIFICATION: I certify that the information contained in this application is true and accurate to the best of my knowledge and that I am duly authorized to certify this application on behalf of the fire department. I understand that knowingly making false or fraudulent statements or representations may result in program sanctions and/or criminal penalties.

(Required)

Name: (print)

Title:

Chief Officer or President

Date:

To submit electronically:

Press the **Submit Form** button or download and email this PDF form to: ffp@tfs.tamu.edu

To submit by mail or fax: Press the **Print Form** button. Be sure to attach your supporting documents before sending.

*For questions, please contact us at:
ffp@tfs.tamu.edu or by phone:
(936) 639-8100*

Mail or Fax to:

FFP Program
Texas A&M Forest Service
Capacity Building Department
481 Texas Forest Service Loop
Lufkin, Texas 75904
Fax: (936) 639-8138