

LOUISIANA DEPARTMENT OF AGRICULTURE & FORESTRY 2021 VOLUNTEER FIRE ASSISTANCE GRANT APPLICATION

PLEASE PRINT

1. Official Name of Fire Department: _____
2. LA. State Fire Marshal's Fire Department Identification Number (FDID) _____
3. Employer Identification Number (EIN) a.k.a. Federal Tax I.D. Number: _____
4. Mailing Address: _____
(Street or P. O. Box) (City/Town) (Zip Code)
5. Parish: _____
6. Business Telephone number: (_____) _____
Area Code Phone Number
7. E-mail address (departmental): _____
8. Fire Chief's name: _____
9. Is this an incorporated community? **Yes** **No**
10. Population of community served: _____
11. Estimate of the population for entire area(s) protected: _____
12. What is your PIAL rating? Inside: _____ Outside: _____
13. Has your department received V.F.A. funding in previous years? **Yes** **No**

FIRST TIME APPLICANTS FOR V.F.A GRANT

Mandatory: Attach a copy of the ordinance or resolution officially establishing the fire department. This does not refer to Certification by the Louisiana Secretary of State as a nonprofit corporation; Articles of Incorporation are not acceptable.

Mandatory: Attach a map of the protection area served by your department. Map should clearly delineate protection area boundaries with community name(s), road names, water body names, etc. Map should also include: Fire Department Official Name, Dispatch Contact Number excluding 911.

14. Is this a Multi-Community fire department? **Yes** **No** (A department or fire district is considered to be “multi-community” if within the official area served there exists two or more recognized communities, each of which contributes financial support toward, and which combine other resources for the operation of a single department serving all communities involved.)

If yes, list the names and estimated population of the communities served:

Community Name: _____ Estimated Population _____

Community Name: _____ Estimated Population _____

Community Name: _____ Estimated Population _____

15. Provide the number of fire responses by the department during the **2020** calendar year:

STRUCTURAL FIRES _____

WILDLAND FIRES _____

16. Is your department reporting “service runs” under the LFIRS or NFIRS system? **Yes** **No**

Only departments submitting their “fire responses” under either of these two systems are eligible for cost-share consideration.

17. How many active members are in your department? _____

PAID _____ **VOLUNTEER** _____

18. List **TWO INDIVIDUALS** who are knowledgeable regarding your departmental needs and operations that we may contact for information regarding your VFA grant:

NAME	RANK/TITLE	TELEPHONE NUMBER

WILDLAND FIRE SECTION

Rural Fire Departments are the “first line” of defense with regards to the majority of fires occurring in Louisiana, including wildland fires. Based on submitted surveys, 94% of all applying departments respond to more wildland fires than structural fires, on average.

19. Does your department provide Wildland Firefighting PPE’s i.e., Nomex coveralls, wildland hardhats, neck shrouds and eye goggles for your personnel on wildland fires? **YES NO**

NOTE: To be eligible for cost-share consideration, a department **MUST** have available at minimum 4 sets of wildland fire personal protective equipment (PPE’s) for their personnel **OR** have listed wildland PPE’s for purchase under the current VFA application.

Structural firefighting gear was designed to keep personnel safe from external threats e.g. thermal, mechanical and liquids hazards, while engaged in suppression operations. The greatest threat associate with utilizing structural gear in wildland operations is cardiovascular strain (heat stress and dehydration) both of which can be dangerous for personnel. Wildland firefighting PPE’s (NFPA 1977) are designed for wildland fire threats and are a safer option for personnel engaged in wildland suppression operations. Wildland PPE’s have been designed to release heat due to thermal activity while protecting that person from radiant and convective heat.

20. Does your department provide Wildland Firefighting Training? **YES NO**

Numerous wildland firefighting training videos, regarding Command, Operations and Logistics, etc., can be found online at: WFSTAR – Wildland Fire Safety Training Annual Refresher.

21. Does your department worked with the Office of Forestry wildland firefighting crews, on occasions.
YES NO

22. Does your department have prearranged communication channels or communication procedures outlined between Office of Forestry personnel and your fire department **YES NO**

LDAF “Fire Department Mutual Aid Channel.” This VHF channel shall only be used by “on-scene” local fire departments assisting LDAF firefighters with wildfire suppression operations.

RX Frequency	154.280	TX Frequency	154.280
Tone	No tones	Tone	No tones

LDAF has established a “24-hour” Emergency Hotline for requesting assistance from the Office of Forestry fire crews or other support functions. The hotline number is 855-452-5323.

23. LIST ALL FIRE EQUIPMENT/SUPPLIES/ETC. THAT YOUR DEPARTMENT PROPOSES TO PURCHASE WITH V.F.A. GRANT FUNDING, IF AWARDED.

PLEASE READ CAREFULLY...THESE REQUIREMENTS ARE MANDATED FOR FUNDING.

- A) All purchases **MUST** be made during the 2021 calendar year. Purchases made prior to the date listed on the “2021 Award Letter” will not be eligible for funding.
- B) Only items benefiting the firefighting capabilities of the department will be approved. This includes nozzles, hoses, training equipment or the purchase of PPE’s for firefighters.
- C) Each common item must be listed separately; for example: (5) Bullard wildland helmets.
- D) Should a department wish to modify the submitted type of equipment or to purchase equipment not listed, prior approval is required. Any request of this type shall be made by either an e-mail or letter. Notification of determination will follow shortly. This will provide documentation for both parties.
- E) Any single item costing \$5,000 or more is not eligible for cost-share assistance.

2021 Volunteer Fire Assistance Grant

FIRE DEPARTMENT NAME: _____

VFA Grant Personnel Only

QUANTITY & NAME OF ITEM	ESTIMATED COST	<u>APPROVED</u> <u>This item is “approved” for purchase under the program’s guidelines.</u>	<u>DISAPPROVED</u> <u>This item is NOT allowed under the program’s guidelines. Cost-share assistance is not available.</u>
TOTAL ESTIMATED COST			

If additional sheets are required, please copy this page and attach to this sheet.

I, _____, of the _____
(print name of fire department's representative) (print official name of fire department)

have READ and UNDERSTAND the purchasing guidelines as outlined in the Volunteer Fire Assistance DeskGuide. To view all federal VFA Guidelines, please visit:

www.fs.fed.us/fire/partners/vfa/help/table_of_contents.htm

The person who filled out this application shall provide the following information:

Name: _____ Phone#: _____

Address: _____ Zip Code: _____

Title/Organization Affiliation: _____

Signature: _____ Date: _____

The Grantee gives the Grantor agency (Louisiana Department of Agriculture and Forestry) through any authorized representative the access and right to examine all records and documents related to the V.F.A. grant. The Grantee shall hold harmless the Grantor and their employees for any liability or injury suffered through the use of property or equipment acquired under this grant. The Grantee, by their signature below, certifies that V.F.A. guidelines and requirements have been reviewed and agreed to for the purpose of grant consideration.

GRANTEE NAME (please print)

SIGNATURE

TITLE

DATE

United States Department of Agriculture, Forest Service Civil Rights Compliance

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. (Not all prohibited bases apply to all programs.)

To file a complaint of discrimination, write:

USDA, Director
Office of Civil Rights
1400 Independence Avenue, Room 326-W
Washington D.C. 20250-9410

Or call (202) 720-5964.

USDA is an equal opportunity provider and employer.

“As an applicant to the USDA, Forest Service Volunteer Fire Assistance grant, I hereby acknowledge that the Fire Department is an “Equal Opportunity Provider and Employer.”

Fire Department Name: _____

Representative Name: _____

Position: _____

Signature: _____

Date: _____

CHECK LIST:

- All questions answered?
- All required documents provided?
- Civil Rights Compliance sheet completed?
- Telephone numbers supplied?
- Proper signatures and dates where required?
- Federal Tax I.D. # provided?
- LA. FDID # provided?
- Audit Compliance Form completed and attached?
- W-9 completed and attached?
- Application double-checked before mailing?

IMPORTANT INFORMATION

**COMPLETED APPLICATIONS MUST BE RECEIVED AT THE OFFICE OF
FORESTRY HEADQUARTERS BY JULY 1, 2021.**

Please mail to: LDAF - Forestry
 attn: 2021 VFA Grant
 5825 Florida Blvd., Suite 6000
 Baton Rouge, LA. 70806

Any questions please contact:

Bret Lane work # 225-925-4500 email: bret_1@ldaf.state.la.us

TIME LINE

Sept. 1, 2021: Applicants will be notified of their grant proposal determination. Please allow two weeks following this start date. If you have not received your “notification” letter by Sept. 20th, please contact the Office of Forestry, BRHQ.

March 1, 2022: Following the purchase of “approved” items, a completed FINANCIAL DISBURSEMENT REPORT along with a copy of all invoices, paid receipts and/or proof-of-purchase i.e., bank statements, cancelled checks, etc. will be required before the LDAF, Office of Forestry will execute the release of funds.

FINANCIAL DISBURSEMENT REPORTS must be received by this office, no later than March 1, 2022.

Contact Name:

Contact Phone #:

Contact Fax #:

Form **W-9**
(Rev. October 2007)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the
requester. Do not
send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)	
Business name, if different from above	
Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code	
List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number : : :
or
Employer identification number : : :

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

Print VFD's Address:

Contact Name:

Contact Phone Number:

I certify that _____ Volunteer Fire Department
has met the requirements of Section 17 (B) (1) of Page 9 Act 18 of 2007, which states:

5 B.(1) No funds appropriated in this Act shall be transferred to a public or quasi-public
6 agency or entity which is not a budget unit of the state unless the intended recipient of those
7 funds presents a comprehensive budget to the legislative auditor and the transferring agency
8 showing all anticipated uses of the appropriation, an estimate of the duration of the project,
9 and a plan showing specific goals and objectives for the use of such funds, including
10 measures of performance. In addition, and prior to making such expenditure, the transferring
11 agency shall require each recipient to agree in writing to provide written reports to the
12 transferring agency at least every six months concerning the use of the funds and the specific
13 goals and objectives for the use of the funds. In the event the transferring agency determines
14 that the recipient failed to use the funds set forth in its budget within the estimated duration
15 of the project or failed to reasonably achieve its specific goals and objectives for the use of
16 the funds, the transferring agency shall demand that any unexpended funds be returned to
17 the state treasury unless approval to retain the funds is obtained from the division of
18 administration and the Joint Legislative Committee on the Budget. Each recipient shall be
19 audited in accordance with R.S. 24:513. If the amount of the public funds received by the
20 provider is below the amount for which an audit is required under R.S. 24:513, the
21 transferring agency shall monitor and evaluate the use of the funds to ensure effective
22 achievement of the goals and objectives.

Signed: _____
(Fire Chief)

Print Name: _____
(Fire Chief)

NEW MANDATORY REQUIREMENTS FOR ELIGIBILITY BEGINNING IN 2021

- 1. Mandatory Reporting of Wildfire Data to LFIRS or NFIRS (UPCOMING):** The U.S. Government Accountability Office has begun using a remodified formula to assist with the distribution of V.F.A. funding to states. Reported wildland fire occurrence (both state and local level) has become an increased portion of this formula.

PLEASE MAKE EVERY EFFORT TO REPORT ALL WILDFIRES INCURRED TO LFIRS or NFIRS. If your department does not collect Latitude/Longitude coordinates for wildland fires, as part of the information requested, you may:

Use www.LatLong.net or www.geoplaner.com to obtain coordinates from a street address

NOTE: Coordinate format "Decimal Degree." Ex: 30.1234 x -91.2345

- 2. Mandatory Availability of Wildland PPE's for Personnel (UPCOMING):** Beginning in 2021 all applying fire departments must have or have listed for purchase, at a minimum, 4 sets of wildland PPE's available for usage by their personnel to be eligible for grant funding consideration.

This minimum standard includes: Wildland coveralls or Wildland pant and shirt combination (NFPA 1977 compliant), Wildland Hardhats (NFPA 1977 compliant), Neck shrouds and eye goggles (NFPA 1977 compliant). Estimated cost per set: \$435 before cost-share assistance. These are approved items for purchase under the VFA grant guidelines. Please plan accordingly before this future requirement becomes mandatory.

I, _____ representing _____,
Print Name Fire Department Name

Signature Date

have read and understand the requirements listed above related to the upcoming 2021 requirements concerning the (1) Reporting of Wildland Fire Responses to LFIRS or NFIRS and (2) The Availability of Wildland Personal Protective Equipment (PPE's) for personnel.