**Application Questions**

**County/Organization Information**

1. Which County do you represent?

2. Please select your application type: Please note: if you are an organization or agency designated by the county to apply and receive funds on their behalf, you must attach a letter of support from your county's Board of Supervisors in the "Documents" section of this application.

* County Board of Supervisors or county employee
* An organization or agency designated by the county to apply

3. Please describe your county or organization's history, structure, and notable projects or accomplishments.

4. List key individuals from the applicant county or organization who will be involved in submitting the application, designing the project, and designating the County Coordinator. Please identify: 1) Name and title, 2) Roles and responsibilities 3) Whether they are paid or volunteer.

5. Describe any prior experience applying for and/or managing private, federal, or state grants.

6. Briefly summarize your county's current efforts to coordinate the various wildfire mitigation groups, programs, and projects taking place within the county's borders. You may include: successes and failures, future plans, and coordinated projects.

7. How many wildfire mitigation groups exist within your county? This may include but is not limited to: Fire Safe Councils, Firewise Communities, fire protection agencies, Resource Conservation Districts, and HOA groups actively engaged in wildfire mitigation projects.

8. What is the relationship between the various wildfire mitigation groups in your county?

9. How are your county's designated emergency services staff and/or wildfire mitigation groups currently funded?

10. Does your county have a county-wide emergency preparedness or protection plan? Please only answer this question for county-wide plans, not regional or local plans.

* Yes
* No

11. Does your county have a county-wide fire mitigation group, such as a county Fire Safe Council or Resource Conservation District? Please only answer this question for groups who perform county-wide services, not local or regional groups.

* Yes
* No

**Project Information**

12. Executive Summary/Abstract. Provide a brief summary (2-3 sentences) of your proposed project.

13. How will a County Coordinator benefit the county's efforts to encourage county-wide wildfire mitigation, outreach, and coordination?

14. Provide a narrative of the anticipated roles and responsibilities of the County Coordinator within your county. Please include an outline of their daily/weekly/monthly activities as well as anticipated hours worked per week.

15. How will funds be used to support a County Coordinator? A project budget will also be required in the following section.

16. How many wildfire mitigation groups, agencies, and community partners do you anticipate working in partnership with the County Coordinator? Describe how the County Coordinator will work to build relationships and encourage collaboration among all groups.

17. Will the individual filling the County Coordinator role be a new hire, existing employee, or a contract position?

* New hire
* Existing employee
* Contract position

18. If an existing employee will fill the role of the County Coordinator, describe this position’s current job functions and why they are best suited to fill the role.

19. Describe the process for hiring and selecting the County Coordinator. Include hiring/selection criteria and a timeline to situate the individual in the County Coordinator role.

20. Who will oversee the County Coordinator position? Please list name, organization/agency, title, contact information, and supervisory responsibilities.

21. Will any other positions or roles provide regular support to the County Coordinator? This includes volunteers, contractors, or additional support staff.

22. Will funds from the County Coordinator Grant Program be used to supplement the administrative costs of additional employees, such as a supervisor or support staff? If yes, please describe the need: If no funds will be used to supplement additional employees, outside of the County Coordinator, please put N/A as your answer.

23. Location. Enter the latitude and longitude of your county's administration building. Your response must be in decimal format to six places, for example: 39.375097 Latitude and -122.54454 Longitude.

**Project Outcomes and Evaluation**

24. Please describe the anticipated outcomes of the County Coordinator Grant Program:

25. How will you measure the success of the County Coordinator Grant Program?

26. How will your county or organization work to sustain efforts toward county-wide collaboration and coordination following the close of the grant term?

**Workplan**

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| **Task #** | **Activity** | **Timeline** | **Responsible Party** | **Expected Outcome/Result** |
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