

California Department of Forestry and Fire Protection (CAL FIRE) SRAFPF & TM Grant Application Fiscal Year 2016-17 Funding Opportunity



Please fill out this form completely. Be sure to save a copy of this form for your records. Submit 1 printed copy with original signature(s) and 1 electronic copy and all supporting materials to: California Department of Forestry and Fire Protection, Attention: Grants Management Unit - SRAFPF & TM Grant, P.O. Box 944246, Sacramento, CA 94244-2460. E-mail an electronic copy to CALFIRE.Grants@fire.ca.gov. Be sure to include all attachments.

Please complete the project identification information. Is your project tree mortality related? Yes (No Is your project in the State Responsibility Area? **O**Yes No 1. Project Tracking #: 16-AEU-0005 CalMapper ID: Project Name/Title: El Dorado County - Dead Tree Service Gap CAL FIRE Unit/Contract County: AEU - Amador-El Dorado Unit El Dorado County: naming (see questions 5 & 14) 2. Sponsoring Organization: County of El Dorado If Other, Please specify: Organization Type: |County Government Project Manager Title: Principal Administrative Analyst First Name: Creighton Last Name: Avila Address 1: 330 Fair Lane Address 2: Zip Code: 95667 City: Placerville State: California Secondary Phone Number: 530-621-5567 Phone Number: 530-621-6511 Fax Number: **Email Address:** creighton.avila@edcgov.us 3. For which activity is funding being requested? Removal of Dead or Dying Trees If Other, Please specify 4. Grant Period: Please provide the estimated start date and completion date for your project. Projects MUST be completed by March 15, 2019. Note that final billing is due 30 days after project completion. Please use MM/DD/YYYY format.

Tracking #: 16-AEU-0005

Project Start Date: 1/1/2017

Project Name: El Dorado County - Dead Tree Service Gap

Project Completion Date: 03/15/2019

5. Project Location: Identify a central point that identifies the general area of project activities. Enter the information in NAD 83 - degrees, minutes and seconds in whole numbers. Enter Longitude as a positive number.

Latitude N

38

45

40

Longitude

120

31

49

Latitude must be between 32 and 42 degrees. Longitude must be between 114 and 125 degrees. Latitude and Longitude minutes and seconds must be between 0 and 60. For planning or public education projects, use a central point in the SRA for the general area covered by the project.

Please attach a Project map in PDF format with geographic information describing your project location. The map should show the surrounding area in relation to the project. **File naming convention:** Features should be named with the Tracking # and Feature Type. *Example: 16-UUU-XXXX-MAP.pdf*

"Project Area" is the general area where project activities will reduce wildfire risk and/or damage. All projects must have a project area. For planning or public education grants or other projects that don't have well-defined boundaries, provide a map that generally covers the area. For example, for a county-wide public education project, the map should identify the populated portion of the SRA in the county.

6. Project Area Statistics:

For all projects, give an estimate of the project area size and include an estimate of the number of habitable structures impacted by the project. Provide the size of the treatment area for projects that include fuels treatment.

Habitable Dwellings (# of dwellings):

8,828

Project Area (acres):

215,129

Fuels Treatment Area (acres):

42

7. SRA Fire Hazard Severity Zones (FHSZ):

What SRA Fire Hazard Severity Zones (FHSZ) are in the project area? SRA Fire Hazard Severity Zone ratings are available at: http://calfire.ca.gov/fire_prevention/fire_prevention_wildland_zones.php

Please provide an approximate number of acres or percentage of the project area in each zone.

FHSZ Rating	Acres	Percent	
Very High	89,569	24.78	%
High	23,852	6.6	%
Moderate	32,854	9.09	%
Non SRA (Federal or Local Area)	215,129	59.53	%
TOTAL	361,40	100	%

Acres Note: Total acres must be the same as Item 6 Project Area (Acres).

Percent Note: Total % must be 100%

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8. Limiting Factors: Are there any existing forest or land management related to zoning; use restrictions, or other factors.			ons (CC&R's); matters			
☐ If checked, describe existing plan(s) and the limitations, if any, in the attached Scope of Work.						
9. Timber Harvest Plans: For fuel reduction projects, is there a timber ha Completion" has not been filed with CAL FIRE?	rvesting document on any po	tion of the proposed project area for v	which a "Notice of			
If checked, provide the THP identification nu	mber and describe the relationsh	p to the project in the attached Scope of \	Work document.			
THP IC	Number:					
10. Community at Risk: Is the project associately in the project as a projec		-				
		mond Springs, El Dorado Hills, George own, Meeks Bay, Omo Ranch, Outingd				
Number	of Communities in the project	area: 22				
11. Project Budget: What is the proposed budget? Please include a Project Budget workbook (.xls).	a discussion of the project buo	get in the Scope of Work and enter th	e amount from the			
	Budget Item	Amount				
	Grant Portion of project (\$)	\$199,998.00				
	Equipment Purchases (\$)	\$0.00				
	Partners (\$)	\$0.00				
	Total Project Budget (\$)	237,671				
12. Local Wildland Fire Risk Reduction P Is the project in, consistent with, or build on a l covered by this project? If so, discuss in the Sco	arger plan that deals with the		structures in the SRA			
CAL FIRE Unit Strategic Fire Plan		Fire Safe Council Action Plan				
		FIREWISE Community Assessmen	nt			
Local Fire Department Plan		Community Wildfire Protection Plan				
☐ Homeowners' Association Plan		Other Local Plan (Identify in Scope of Work)				

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13. CEQA Com _l	pliance:			
			al Quality Act (CEQA) will be achieved in the Scope of Work. Is there an existing	
			I to meet CEQA requirements? For planning, education and other projects that	
Please indicate th	he CEQA docu	ment type: Will File	are exempt from CEQA, select "Not Applicable".	
Document Identi	ification Numl	oer		
requested inform Note: Replace XXXX ir	ANT: If you mon nation, your apon the file name wi	odify the language contained oplication <u>will</u> be rejected. ith the project's ID Number.	in any part of this document, other than to fill in the blanks, or to provide where the project is located. Unit identifiers are listed in the instructions for this application form.	
US Mail	Email	Attachments	File Name	
		Application Form (.pdf)	16-AEU-0005-Application.pdf	
		Scope of Work	16-AEU-0005-SOW.doc	
		Project Budget	oject Budget 16-AEU-0005-Budget.xls	
		Project Map (.pdf)	16-AEU-0005-MAP.pdf	
		Articles of Incorporation (.pdf)	on (.pdf) 16-AEU-0005-AOI.pdf	
		ached information is true and	·	
Origina	al Signature R	equired: Grantee's Authorized	d Representative Date Signed	
Printed Na	ame Don A	shton	Title Chief Administrative Officer	
Executed	on: Da	at Placerville	City	

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Print Form

If you would like to mail the hard copy via expedited/overnight mail, please E-mail <u>CALFIRE.Grants@fire.ca.gov</u> for the physical mailing address.

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