Coalition for the Upper South Platte/ARRA

Application for Community Wildfire Protection Plan Assistance and Funding

NEW CWPP DEVELOPMENT

Date Submitted:	
Community and Location:	County:
Community Contact:	
Name	Phone
Mailing Address	email
City, St. Zip	
Type of Application: New CWPP	Phoneemailew CWPP
s this area covered by a large scale (county or fire district) CWPP? Plan name?	
What wildland fire fuel hazards have been ide	entified in the community?
What is the predominate fuel type in the com	munity?
Number of structures to be covered by this pl	an?
Number of residents May to Oct. during fire s	eason?
Overall acreage to be covered by this plan?	
Is there an opportunity to combine this plan v	with a neighboring subdivision or HOA? Which one?
Do you have a core team (including of at least	2 interested residents) selected and ready to begin this process?
Has this community discussed plans to fund ir approved CWPP?	nplementation of priority projects identified in the completed and