

CRCD- Eastern Madera Fire Prevention Assistance Program

The Coarsegold Resource Conservation District is excited to accept applications for the Eastern Madera Fire Prevention Assistance program to improve the health and safety of homeowners on social services or in financial need who are unable to afford the costs associated with removing hazardous trees and brush that directly threaten their primary home. Applications must be completed in full to be successfully submitted. Receipt of your completed application does not guarantee funding from this program.

Services will be provided based upon funding availability and when work is being completed in your designated community. Funding for this project provided by the California Department of Forestry and Fire Protection's Fire Prevention Grants Program as part of the California Climate Investments Program. More information on CAL FIRE'S Fire Prevention Grant Program please visit: <https://www.fire.ca.gov/grants/wildfire-prevention-grants/>

Eastern Madera Fire Prevention Assistance, is part of California Climate Investments, a statewide program that puts billions of Cap-and-Trade dollars to work reducing GHG emissions, strengthening the economy, and improving public health and the environment— particularly in disadvantaged communities. The Cap-and-Trade program also creates a financial incentive for industries to invest in clean technologies and develop innovative ways to reduce pollution.

California Climate Investments projects include affordable housing, renewable energy, public transportation, zero-emission vehicles, environmental restoration, more sustainable agriculture, recycling, and much more. At least 35 percent of these investments are located within and benefiting residents of disadvantaged communities, low-income communities, and low-income households across California. For more information, visit the California Climate Investments website at: www.caclimateinvestments.ca.gov.



Program Requirements

Applicant must:

1. Be able to prove financial need or provide proof of enrollment in qualified income assistance program.
2. Be the primary residence in one of the identified program communities: Ahwahnee, Bass Lake, Coarsegold, Oakhurst, North Fork, O'Neals, or Wishon.
3. Complete Application/Self-certification form
4. Complete a Right of Entry permission form
5. Complete an Authorization to Release Information form
6. Provide Photo ID or other verifiable proof of I.D.
7. Provide Photographs of Hazardous Trees to be treated with Program, unless already done.

Please mail or email your completed application form, Right of Entry form, Right of Information Release form, a picture of your photo ID, photos of the trees to be removed, and proof of enrollment in a qualified income assistance program (PGE CARE, Lifeline, SNAP/Food stamps, SDI, FPHA, TANF, etc.) to:

Coarsegold Resource Conservation District

P.O. Box 1306

North Fork, Ca. 93643

Or email to Jon Cottington at coarsegoldrcd@gmail.com.

Once all your documents have been received, you will be contacted and be advised of your application status. If you have any questions, please feel free to contact Jon Cottington at the CRCd at 559-760-6019.



PO BOX 1306
North Fork, CA 93643
559-760-6019
www.crcd.org

CRCD Eastern Madera Fire Prevention Assistance Program Application Checklist

- Application Form
- Right of Entry Permission Form
- Right of Information Release Form
- Photo ID or other verifiable proof of ID
- Photos of hazard trees/brush within 200 feet of primary home
- Proof of enrollment in a Qualified Income Assistance Program (If Applicable)

FOR OFFICE USE:

Receive by: _____

Received Date: _____

Customer Name: _____

Status Notification Date: _____

Status Notification Method (Phone, Email, or Letter): _____

CRCO Eastern Madera Fire Prevention Assistance Program Self-Certification Form

Applicants must meet the financial need requirements or provide proof of enrollment in a qualified assistance program. Please fill out the sections below.

Name: _____

Date of Birth: _____

Address: _____

Parcel Number: _____

Size of Lot: _____

City: _____

State: CA

Zip Code: _____

Phone: _____

Email: _____

Are you the property Owner? Please check one. Yes _____ No _____

Is this your primary residence? Please check one. Yes _____ No _____

What hazards can be identified within the 200' defensible space around your home?

Special Instructions for tree/brush removal – Please indicate if there are fences, specimen plants, or other features that require special care during hazardous tree/brush removal. We will do our best to accommodate but cannot guarantee results.

Please provide proof of enrollment in one or more of the following programs, or a similar program that you participate in:

- Social Security Disability Insurance (SDI)
- Medi-Cal
- PG&E Care Program
- Veterans Benefits
- Supplemental Nutrition Assistance Program (SNAP)
- Temporary Assistance for Needy Families (TANF)

I certify that the above information is correct and that I understand that the information is subject to verification. I also acknowledge that if selected for the program, I will be required to sign a right of entry permit and release of information form (see pages 6-8).

Print Name: _____

Signature: _____

Date: _____

FOR OFFICE USE:

Received by: _____

Signature: _____

Date: _____

Right of Entry Permission Form

Property Address: _____

Assessor's Parcel Number (APN): _____

Application Date: _____

I/We, the owner(s) of the above-referenced property (collectively "Owner"), do hereby grant freely, and without coercion, the right of access and entry to said property to the Coarsegold Resource Conservation District (CRCD), and its employees, volunteers, contractors, and sub-contractors subject to all licenses, easements, encumbrances and claims of title affecting premises upon the following terms:

- 1. Grant Right-of-Entry:** Owner hereby grants the CRCD and its contractors, American Tree Medics, a right-of-way ("Permission Form") over the premises for the purpose of inspecting the Premises for dead and/or dying trees, felling of trees, piling of slash or chipping debris subject to the terms and conditions set forth in this Permission Form. It is fully understood that this Permission Form does not create any obligation on the CRCD or its contractors to perform inspection, or tree felling. Owner understands CRCD and its contractors will not undertake any felling of trees or any related action until this Permission Slip is signed and returned.
- 2. Acknowledgement Concerning Liability for Damages:** Owner acknowledges and understands that participation in the Program is voluntary and that the CRCD is offering to assist with costs, but not necessarily pay all the expenses. Upon signing this Permission Form, the homeowner further acknowledges and understands that the Owner's participation in this Program is contingent upon, and the CRCD is relying upon, the Owner's agreement through this Permission Form to release the CRCD from any liability arising out of the work contemplated under this Permission Form. Owner further understands and agrees that, should liability arise out of the work contemplated under this Permission Form, the Owner's sole and exclusive remedy shall be against the contractors performing said work. The CRCD shall endeavor to hire contractors with sufficient insurance levels to cover any such potential liability.
- 3. Hold Harmless:** The CRCD shall not be liable for, and Owner shall indemnify, defend and hold harmless the CRCD and the California Department of Forestry and Fire Protection ("CAL FIRE"), and any of their officers, agents, employees, and volunteers, against any and all claims, deductibles self-insured retentions, demands, liability, judgments, awards, fines, mechanics' liens or other liens, labor disputes, attorneys' fees, and court costs, which arise out of or are in any way connected to the work contemplated under this Permission Form, and hereby release, discharge, and waive any claims and action against same, in law or equity, arising there from. This indemnification and release expressly exclude the contractors, and any subcontractors thereof, performing the work contemplated under this Permission Form.
- 4. CRCD's Agents:** Except as otherwise provided herein, any person, firm, or corporation authorized to work upon the Premises by the CRCD shall be deemed to be the CRCD's



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- agent, included but not limited to, CAL FIRE and shall be subject to all applicable terms hereof.
5. **Authority:** Owner represents and warrants it has full power and authority to execute and fully perform its obligations under this Permission Form pursuant to its governing instruments, as applicable, without the need for any further action, and the person(s) executing this Permission Form on behalf of the Owner are the duly designated agents of the Owner and are authorized to do so, and that fee title to the Premises vests solely in Owner.
 6. **Entire Agreement:** This Permission Form constitutes the entire agreement between the parties with respect to the subject matter hereof, and all prior or contemporaneous agreements, understandings, and representations, oral or written, are superseded.
 7. **Modification:** The provisions of this Permission Form may not be modified, except by written instrument signed by both parties.
 8. **Successors and Assigns:** This Permission Form shall bind and benefit the parties and their successors and assigns, except as may otherwise be provided herein.
 9. **Notices:** Any notice required hereunder shall be provided as follows:

Coarsegold Resource Conservation District
P.O BOX 1306
North Fork, CA 93643
559-760-6019

Owner Contact Information

Your Name: _____

Phone Number: _____

Mailing Address: _____

By their signatures below, Owner and CRCD have executed this Permission Form

Property Owner

Signature: _____

Printed Name: _____

Date: _____

Coarsegold Resource Conservation District

Signature: _____

Printed Name: _____

Date: _____



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Authorization to Release Information

I authorize the Coarsegold Resource Conservation District (CRCD) to disclose to Cal Fire and our Tree Removal contractor. (Note: The contractors will vary per area.)

Check all pertinent items:

(_____) Personal Information such as name, address phone number, parcel number, etc.

(_____) Income Eligibility Information

This information is required for the CRCD, CALFIRE Licensed Tree Contractors and Foresters to provide information to ensure the terms of the grant are fulfilled.

I may revoke this authorization at any time before the information has been released. In any case, the authorization automatically expires two years from the date of this authorization.

- Note: This is a reciprocal agreement for exchange of information.

INITIAL HERE IF YOU DESIRE A COPY OF THIS AUTHORIZATION _____

The following information is needed to assure accurate identification:

Client Signature: _____

Client Name (Print Name): _____

Date of Authorization: _____