



FireSmart Project Application

Proponent Organization Name: _____

Contact/Applicant Name: _____

Mailing Address: _____

Telephone (867) _____ Fax (867) _____

E-Mail: _____

Type of Organization

- Registered non-profit organization*
- Community association*
- Municipal government
- First Nation Government
- Other: _____

*Attach Certificate of Good Standing from Corporate Affairs

Proposed treatment location (Geographic Description): _____

Land Tenure/Designation: _____

Size of proposed treatment area (ha): _____

Briefly describe existing stand: _____

Briefly describe proposed treatment: _____

Will >1000m³ be removed: Y N

Describe the values at risk that the project would be protecting:

Amount of funding being requested: \$ _____

Who will conduct the treatments? _____

Declaration of applicant

We are submitting this application for the purpose of obtaining financial assistance from the Government of Yukon. The statements herein regarding this application are, to the best of our knowledge, true and correct. We submit that, to the best of our knowledge, all aspects of this proposed project will be in compliance with existing municipal, territorial, federal codes, guidelines and laws. We agree to allow representatives of the Government of Yukon access to the site and premises of the project described in this application, to inspect the books and records, to make inquiries and credit checks, and to obtain all pertinent information necessary to evaluate this application.

We understand that all or part of this application may be made available to the public in accordance with the **Access to Information and Protection of Privacy Act**.

Signature of Applicant _____ Date: _____

Signature of RPM _____ Date: _____