

**BRADFORD COUNTY VOLUNTEER FIRE AND EMS GRANT  
APPLICATION**



PROJECT TITLE: \_\_\_\_\_

APPLICANT ORGANIZATION: \_\_\_\_\_

APPLICANT ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ EMAIL: \_\_\_\_\_

FEDERAL ID# OR SOCIAL SECURITY #: \_\_\_\_\_

TOTAL AMOUNT REQUESTED: \$\_\_\_\_\_ TOTAL AMOUNT OF PROJECT: \$\_\_\_\_\_

COMPLETION DATE: \_\_\_\_\_

NUMBER OF RESPONSE CALLS FOR 2010 : \_\_\_\_\_

NUMBER OF NATURAL GAS WELLS IN YOUR DISTRICT: \_\_\_\_\_

NUMBER OF NATURAL GAS RELATED INCIDENTS 2010: \_\_\_\_\_

Project Description: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROJECT NARRATIVE:** *Please address all questions in the space allotted.*

1. How will the Project address an unmet need for your department?
  
  
  
  
  
  
  
  
  
  
  
  
  
  
2. Who is the Project targeting and how will it benefit the general public?
  
  
  
  
  
  
  
  
  
  
  
  
  
  
3. What is the number of people that will be served by the Project – both directly and indirectly?

# BRADFORD COUNTY VOLUNTEER FIRE AND EMS GRANT *APPLICATION*

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**Please attach a detailed design/drawing of the layout of the proposed project (up to 3 sheets)**

# BRADFORD COUNTY VOLUNTEER FIRE AND EMS GRANT APPLICATION



PROVIDE PROJECT OBJECTIVE(S) AND TIMELINE

OBJECTIVE: \_\_\_\_\_

WORK ITEM	WHO RESPONSIBLE	COMPLETION DATE

### \*PROJECT BUDGET

\*Items not fundable through grant allocation includes food, salaries, consultants and legal fees

# BRADFORD COUNTY VOLUNTEER FIRE AND EMS GRANT APPLICATION



## BRADFORD COUNTY VOLUNTEER FIRE AND EMS PROJECT APPLICATION INSTRUCTIONS

*Project Proposal Applications **MUST** be limited to the space provided in the application. Electronic submission is desired and must arrive before or at the deadline for application.*

**PROJECT TITLE:** *Insert a brief descriptive title for your proposed project*

**APPLICANT ORGANIZATION:** *Enter the name of the organization applying for the grant. Any school, business, organization or group may apply for the grant as long as the project's primary purpose is the education of Bradford County residents. Individuals are not eligible and must apply through an organization.*

**APPLICANT ADDRESS:** *Insert the address of the applicant organization*

**PHONE:** *Enter the phone number of the applicant organization's contact person for the proposed project*

**FAX:** *Enter the fax number of the applicant organization's contact person for the proposed project*

**CONTACT PERSON:** *Enter the contact person for the proposed project*

**EMAIL:** *Enter the contact person's email for the proposed project*

**FEDERAL ID#** *Enter the Federal ID number of the organization or the. This information may be used to report income to taxing agencies*

**TOTAL AMOUNT REQUESTED:** *Enter the total amount requested from the grant for the project*

**TOTAL AMOUNT OF PROJECT:** *Enter the total amount of the project including match contributions*

**COMPLETION DATE:** *Insert Estimated completion date of the project. Please note that all Projects are due to be completed within 1 year of grant award unless extended.*

*Note; if designated project is not completed and final report not submitted within the one year agreement all monies received will be returned in full to the Bradford County Commissioners. Exceptions to this will approved by the Bradford County Commissioners.*

**2 to 3 Sentence Project Description:** *Provide a short description of the Project that may be used for publicity or Project summary.*

**PROJECT NARRATIVE:** *Please address all questions in the space allotted. The first four questions are requirements for all grant applications. The last four will be utilized to score and rank the projects. Please be complete and concise. The information you provide to answer these questions will be utilized to rank project proposals.*

### **How will the Project address a unmet needs for your department?**

*Every project must address some type of unmet need in your department. Discuss how your project will do this either directly or indirectly.*

**\*What is the number of people that will be served by the Project – both directly and indirectly.**  
*Provide estimates of how many people will be served by the proposed project.*

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**\*Who will operate and maintain the projects and where will the budget come from?**

*Explain how the project is to be maintained and operated. List who is responsible for the operation and maintenance. Attach a letter(s) of commitment from those identified as responsible verifying that they will accept those responsibilities.*

**PROVIDE PROJECT OBJECTIVE(S) AND TIMELINE**

*Provide a concise objective for your project. On the application list the work elements involved in chronological order, identifying who is responsible for implementing the work element and when it is anticipated to be accomplished.*

**PROJECT BUDGET**

*Provide a breakdown of the total budget detailing the source of the funds*

*For assistance in preparing project proposals or for more information,  
as well as project application submittals*

*Contact*

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