

# Assistance to Firefighters Grant Program (AFG)



# FEMA

## AFG Application Checklist

### Are you planning to apply to the Assistance to Firefighters Grant program?

Completing this checklist will help you prepare your AFG grant application. Collecting this information beforehand will reduce the time and energy needed to complete your application when the next grant cycle opens.

<input type="checkbox"/> Is your System for Award Management (SAM) registration current?		<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> What is the expiration date for your SAM registration?		
<input type="checkbox"/> Dun & Bradstreet Number		
Search the SAM.gov website to confirm this DUNS Number matches your SAM.gov registration. You will also find your expiration date through this search.		
<input type="checkbox"/> Square mileage of first-due response area?		sq mi
<input type="checkbox"/> Percentage of first-due area covered by hydrants?		%
<input type="checkbox"/> Critical infrastructure protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Percentage of land used for:		
<b>a.</b> Agriculture, wild land, open		%
<b>b.</b> Commercial/Industrial		%
<b>c.</b> Residential		%
<input type="checkbox"/> Permanent resident population of first-due response area?		#
<input type="checkbox"/> Do you have a seasonal increase in population?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
a. If yes, what is the increase in population?		#
<input type="checkbox"/> Are you compliant with the National Incident Management System?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> What is your FDIN/FDID number?		#
<input type="checkbox"/> Is your department currently reporting to NFIRS?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Number of active firefighters who perform firefighting duties?		#
<input type="checkbox"/> How many of your active firefighters are trained to FF1?		#
<input type="checkbox"/> How many of your active firefighters are trained to FF2?		#
<input type="checkbox"/> If less than 100% to either question above, are you requesting funds to bring 100% of your firefighters in compliance to NFPA 1001?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

What services does your organization provide?

- Structural Fire Suppression
- Haz-Mat Operational Level
- Basic Life Support
- Airport Rescue Firefighting (ARFF)
- Rescue Operational Level
- Maritime Operations/Firefighting
- Emergency Medical Responder
- Wildland Fire Suppression
- Haz-Mat Technical Level
- Advanced Life Support
- Occasional Fire Prevention
- Rescue Technical Level Program
- Community Paramedic

### Department Characteristics II

	2015	2014	2013
<input type="checkbox"/> Number of fire-related civilian fatalities in your first-due jurisdiction for each of the past three years?			
<input type="checkbox"/> Number of fire-related civilian injuries in your first-due jurisdiction for each of the past three years?			
<input type="checkbox"/> Number of on-duty member fatalities in your jurisdiction for each of the past three years?			
<input type="checkbox"/> Number of on-duty member injuries in your jurisdiction for each of the past three years?			
<input type="checkbox"/> Your average operating budget for the past three years? (whole dollars)			
<input type="checkbox"/> How much of your total budget is dedicated to personnel cost?			%
<input type="checkbox"/> Does your department have any rainy day reserves, emergency funds, or capital outlay?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
a. If yes, what is that amount set aside?			
<input type="checkbox"/> The percentage of your budget derived from: (whole percentage)			
<b>a.</b> Taxes	%	%	%
<b>b.</b> Bond issues	%	%	%
<b>c.</b> EMS billing	%	%	%
<b>d.</b> Grants	%	%	%
<b>e.</b> Donations	%	%	%
<b>f.</b> Fund drives	%	%	%
<b>g.</b> Fee for service	%	%	%
<b>Total percentage must equal 100%</b>			
<i>Use the information above in your financial narrative. It is important that your application remain consistent throughout. When breaking down the budget, be sure to account for all funding received. (Budget breakdown should account for 100% of budget.)</i>	%	%	%

<input type="checkbox"/> <b>Vehicle Inventory</b> <i>List the number of:</i>	<b>Front Line</b>	<b>Reserve</b>	<b>Seated Positions</b>
a. Engines or Pumpers			
b. Ambulances			
c. Tankers or Tenders			
d. Aerial Apparatus			
e. Brush/Quick Attack			
f. Rescue Vehicles			
g. Additional Vehicles			
<b>Total</b>			
<input type="checkbox"/> <b>Call Volume for Emergency Medical Service:</b> <i>* How many responses per year by category? (Enter whole number only. If you have no calls for any of the categories, Enter 0)</i>	<b>2015</b>	<b>2014</b>	<b>2013</b>
a. Fires			
b. How many EMS-BLS Response Calls			
c. How many EMS-ALS Response Calls			
d. How many EMS-BLS Scheduled Transports			
e. How many EMS-ALS Scheduled Transports			
f. Vehicle Extrications			
g. How many Community Paramedic Calls			
h. Other Rescue			
i. Hazardous Condition/Materials Calls			
<b>Total</b>			
<input type="checkbox"/> <b>Call Volume for Emergency Medical Service:</b> <i>* How many responses per year by category? (Enter whole number only. If you have no calls for any of the categories, Enter 0)</i>	<b>2015</b>	<b>2014</b>	<b>2013</b>
a. Total calls requiring transport, exclusive of scheduled transport\declared above			
b. All Other Calls and Incidents not declared above, including fire, good-intent, etc.			
<b>Total</b>			
<input type="checkbox"/> <b>Call Volume for Fire Department:</b> <i>* How many responses per year by category? (Enter whole number only. If you have no calls for any of the categories, Enter 0)</i>	<b>2015</b>	<b>2014</b>	<b>2013</b>
a. Fires - NFIRS Series 100			
b. Overpressure Rupture, Explosion, Overheat (No Fire) - NFIRS Series 200			
c. Rescue & Emergency Medical Service Incident - NFIRS Series 300			
d. Hazardous Condition (No Fire) - NFIRS Series 400			
e. Service Call - NFIRS Series 500			
f. Good Intent Call - NFIRS Series 600			
g. False Alarm & False Call - NFIRS Series 700			
h. Severe Weather & Natural Disaster - NFIRS Series 800			
i. Special Incident Type - NFIRS Series 900			
<b>Total</b>			

<input type="checkbox"/>	<b>Call Volume for Fires:</b> <i>* How many responses per year by category? (Enter whole number only. If you have no calls for any of the categories, Enter 0)</i>	<b>2015</b>	<b>2014</b>	<b>2013</b>
	a. Of the NFIRS Series 100 calls, how many are "Structure Fires" (NFIRS Codes 111-120)			
	b. Of the NFIRS Series 100 calls, how many are "Vehicle Fires" (NFIRS Codes 130-138)			
	c. Of the NFIRS Series 100 calls, how many are "Vegetation Fires" (NFIRS Codes 140-143)			
	d. What is the total acreage of all vegetation fires?			
	<b>Total</b>			
<input type="checkbox"/>	<b>Call Volume for Rescue and Emergency Medical Service Incidents:</b> <i>* How many responses per year by category? (Enter whole number only. If you have no calls for any of the categories, Enter 0)</i>	<b>2015</b>	<b>2014</b>	<b>2013</b>
	a. Of the NFIRS Series 300 calls, how many are "Motor Vehicle Accidents" (NFIRS Codes 322-324)			
	b. Of the NFIRS Series 300 calls, how many are "Extrications from Vehicles" (NFIRS Code 352)			
	c. Of the NFIRS Series 300 calls, how many are "Rescues" (NFIRS Codes 300, 351, 353-381)			
	d. How many EMS-BLS Response Calls			
	e. How many EMS-ALS Response Calls			
	f. How many EMS-BLS Scheduled Transports			
	g. How many EMS-ALS Scheduled Transports			
	h. How many Community Paramedic Response Calls			
	<b>Total</b>			
<input type="checkbox"/>	<b>Call Volume for Mutual and Automatic Aid:</b> <i>* How many responses per year by category? (Enter whole number only. If you have no calls for any of the categories, Enter 0)</i>	<b>2015</b>	<b>2014</b>	<b>2013</b>
	a. How many times did your organization receive Mutual Aid?			
	b. How many times did your organization receive Automatic Aid?			
	c. How many times did your organization provide Mutual Aid?			
	d. How many times did your organization provide Automatic Aid?			
	e. Of the Mutual and Automatic Aid responses, how many were structure fires?			
	<b>Total</b>			



**Equipment Inventory**

If you are requesting PPE (any PPE other than SCBA), what is the ages of your PPE in years?

Years Old	# of items
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16 or more	

**Number of Members Without PPE**

*Combined total should equal total PPE in your inventory.*

If you are requesting SCBA, to which edition(s) of the NFPA standard are your SCBA compliant?

Year	Current Inventory			Edition Being Replaced		
	SCBA	Cylinder	Face Piece	SCBA	Cylinder	Face Piece
2013 Edition						
2007 Edition						
2002 Edition and older						

