

For Office Use

Application Number: _____ Date Received: _____



Hazardous Fuels Reduction Program – Application



**MAIL TO: Gallatin County Extension
201 W. Madison, Ste. 300
Belgrade, MT 59714
PHONE (406) 388-3213
FAX (406) 388-3243 (call before faxing)**

APPLICANT INFORMATION

Name:			
Email Address:			
Mailing Address:			
City:	State:	Zip:	Phone:
Physical Address of Property:			
Contact Person:			
I would like to receive paperwork through _____ (check one) <input type="checkbox"/> mail <input type="checkbox"/> email			

PROJECT INFORMATION

Legal Description:	1/4	1/4	Section	Township	Range
Total Acres to Treat:			Total Acres of Land Owned:		
Brief Project Description:					

Would you be doing the thinning, pruning and slash disposal yourself or would you hire the work out to be done by a contractor? _____

Neighborhood/Landowners involved or interested in doing similar work on their lands: _____

Community or neighborhood you live in: _____

Are you willing to meet the treatment specifications necessary to reduce the fire risk of your property by thinning to an average of 10 feet between crowns of trees, pruning up to 8 feet or 1/3 the height of the tree, whichever is less and treating all of the slash? _____

Are there any special considerations we need to know about on your land that may limit the ability to meet the treatment specifications (i.e., conservation easement, special landowner desires, etc.)? _____

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Signature of Applicant

Date

Please sketch a map, or provide a map, of the property. Delineate general land use areas such as pastures, timbered areas, and burned areas. Include approximate locations of structures and other features (streams, fences, bridges, other improvements, etc.). Identify area of proposed project work area.