



## Volunteer Fire Capacity Grant Application

Montana Department of Natural Resources  
and Conservation  
Fire Protection Bureau



**Application Period April 1, 2026 – June 1, 2026**

This application shall be completed by the County Fire Warden, Chairperson of the Rural Fire Council or Rural Fire Department, Authorized Representative. All responses subject to verification

<b>Organization Information</b>					
What is the OFFICIAL Name of the Organization					
Address				<b>Required</b> Tax ID #	
				<b>Required</b> Active UEI #	
City	State	Zip	County	Website	
Project Manager - Name			Project Manager - Title		
Project Manager - Phone			Secondary Phone		
Project Manager - Email Address					
Authorized Representative					
The Authorized Representative is the person who has legal authority to enter into an agreement with DNRC and will sign any agreement documents.					
DNRC utilizes the DocuSign electronic signature service for agreement execution. The Authorized Representative will receive any agreement for signature at the email address provided.					
Authorized Representative - Name			Authorized Representative - Title		
Authorized Representative - Phone			Secondary Phone		
Authorized Representative Address			Authorized Representative - Email		
Name of Person Completing Application			Title		
Primary Phone			Secondary Phone		
Email Address					

### County and Fire Department Information

Are all fire service organizations contained within this application, organized, funded, and operated under Montana Code Annotated Title 7, Chapter 33?

Yes  No

Please list the community's serviced by this application:

Is the County/Fire Department reporting all wildland fire occurrences on State or Private land to the local DNRC office?

Yes  No

Does the County /Fire Department have an active Rural Fire Council or Chiefs Meeting?

Yes  No

How often does the organization meet?

When was the County CWPP last updated (including a wildfire update to the County All-Hazard Mitigation Plan)?

Has the County identified and mapped the Wildland Urban Interface?

Yes  No

### Fire Departments Participating in and Requesting Funds Under This Application

Fire Department Name	FDID	Individual Project Cost Estimates (From Appendix A)	Appendix A and Appendix B Completed and Attached?
County-Wide/Fire Department Estimated Total Project Costs\$			

**Appendix A and Appendix B form must be included for each Department listed on this application.**

# Volunteer Fire Capacity Grant Application

## Appendix A

**Application Period April 1, 2026 – June 1, 2026**

To be completed by any organization requesting VFC funds and attached to main application.

**Due to the USDA Forest Service purchase requirements and five-year monitoring process, the cost of a single item may not exceed \$9,999.00 total.**

Fire Department Name \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

Category	Eligible Cost-Share Item	Quantity	Unit Cost	Total Cost
<b>Fire Equipment and Hand Tools</b>	<i>(Please clearly circle items to be purchased)</i>			
	5 gal. Backpack Bladder Bags			
	Fire Rake / Collapsible Fire Rake			
	Fire Swatter / Fire Broom			
	(Hand tool) Shovel / McLeod/ Pulaski Tool			
	Chain Saws and Basic Saw Accessories			
	Fire Belt Weather Kit / Kestrel Weather Meters			
	Fusees / Drip Torch			
	GPS Units			
	Other (Fill in Item)			
			Total \$	
<b>Wildland Personal Protective Equipment</b>	<i>(Please clearly circle items to be purchased)</i>			
	Nomex Shirts			
	Nomex Pants			
	Nomex Coveralls / Brush Coats			
	Nomex Neck Shrouds			
	Goggles / Safety Glasses (wildland fire safe)			
	Gloves (wildland fire safe)			
	Helmets: (wildland fire safe)			
	Headlamps (wildland fire safe)			
	Safety Equipment / Safety Vest / Earplugs			
	Chain Saw Chaps			
	Fire Packs / Web Gear			
	Radio Harness			
	New Generation Fire Shelters			
	Training Shelters			
Gear Bags				
Other (Fill in Item)				
			Total \$	
<b>Communications Equipment</b>	Base Radios <i>(Must be P25 Compliant)</i>			
	Handheld/Programmable Radios <i>(Must be P25 Compliant)</i>			
	Mobile Radios <i>(Must be P25 Compliant)</i>			
	Pagers			
	Batteries (for radios)			
	Other <i>(Must be P25 Compliant)</i> (Fill in Item)			
			Total \$	

**Appendix A**

<b>Category</b>	<b>Eligible Cost-Share Item</b>	<b>Quantity</b>	<b>Unit Cost</b>	<b>Total Cost</b>
<b>Water Handling Equipment</b>	Slide-In Fire Units			
	Foam Units, Foam Mixers and/or Foam			
	Portable Tanks			
	Portable Pumps			
	Hoses, Not to Exceed 3" Diameter			
	Hose Reel			
	Nozzles and Fittings			
	Other (Fill in Item)			
				Total \$
<b>Fire Training</b>				
				Total \$
<b>Organization and Planning</b>				
				Total \$
<b>Community Preparedness</b>	Community Education and Outreach			
	Fuels Mitigation Equipment			
				Total \$
<b>Totals</b>	In-Kind Donation/Match (Time/Labor Calculated at \$32.15/hour)			
				<b>Total Project Cost \$</b>

**Grant Request Narrative**

Briefly describe the need for VFC grant assistance and how it will benefit this department:

# Volunteer Fire Capacity Grant Application

## Appendix B

**Application Period April 1, 2026 – June 1, 2026**

To be completed by any organization requesting VFC Funds and attached to main application---All responses subject to verification.

<b>Fire Department Information</b>						
Fire Dept. ID (FDID)	Fire Department Name					
Fire Department Mailing Address						
City	State	Zip	FD Phone	FD Website		
Fire Chief Name		Primary Phone		Secondary Phone		
Email						
Name of Person Completing Application		Primary Phone		Secondary Phone		
Email						
Population Served	Annual Operating Budget	Funding Mechanisms <i>Tax / Fee / Donation / Other</i>	Number of Stations	ISO Rating		
<b>Fire Response Information</b>						
<i>Please list response statistics from the previous calendar year</i>						
# of Wildland Fires	# of Structure Fires	EMS Calls	Other	Mutual Aid Responses		
Does the Fire Department report all fires to the National Fire Incident Reporting System (NFIRS) as required by Administrative Rule of Montana (ARM 23.12.402)?						
<input type="checkbox"/> Yes <input type="checkbox"/> No						
Is the Fire Department reporting all <b>wildland</b> fires to their County Firewarden and/or local DNRC Office?						
<input type="checkbox"/> Yes <input type="checkbox"/> No						
<b>Department Personnel Information</b>						
Total Department Personnel	Paid Staff	Part Paid/Combo Staff	Volunteer Staff	Auxiliary/Other Staff		
Is the Fire Department National Incident Management System (NIMS) Compliant?						
<input type="checkbox"/> Yes <input type="checkbox"/> No						
<b>Department Equipment Information</b>						
Wildland Engines	Structure Apparatus	Water Tenders	Command/Utility	Other	Mobile (Vehicle) Radios	Portable Radios

*Continued the following page.*

By signing this application, I acknowledge the following:

- I have reviewed this application in its entirety, and the answers are accurate to the best of my knowledge.
- I have completed a detailed description and price quotes for the funds being requested.
- All fire organizations requesting funding have completed an **Appendix A** and **Appendix B** form and it has been included in this application package.
- The VFC grant is reimbursable. This means the fire department must pay the entire invoice for items purchased before submitting paperwork for reimbursement. Federal guidelines prohibit payment to the fire department without proof of the fire department expending funds on awarded items.
- I understand the deadline for reimbursement is **June 30, 2027**.
- If there is a change in leadership, all criteria and deadlines remain in place.
- Purchases must match the application request, Appendix A, otherwise the department will not be reimbursed.
- I understand that I cannot put in for items to be reimbursed unless the purchase date is after the date on the award letter.
- **Funding is conditional upon available allocations to this program.**

SIGNATURES I hereby authorize the proposal for funding submitted for this Volunteer Fire Capacity Grant. I certify that, based on my personal knowledge, the information provided is accurate and true.

Project Manager

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Email: \_\_\_\_\_

Authorized Representative

The Authorized Representative is the person who has legal authority to enter into an agreement with DNRC and will sign any agreement documents.

DNRC utilizes the DocuSign electronic signature service for agreement execution. The Authorized Representative will receive any agreement for signature at the email address provided.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Email: \_\_\_\_\_