Lane County Community Wildfire Risk Reduction Grant Program



Interest Form

The Lane County Land Management Division has received wildfire hazard mitigation funding from the Oregon State Fire Marshal to assist low income **and/or** vulnerable homeowners who are at least 55 years of age in rural communities across Lane County. This funding will be used to hire licensed contractors to perform removal of hazardous vegetation within 50 feet of selected households. The Land Management Division is partnering with rural fire districts and social service agencies to connect residents to this opportunity.

If you are interested in seeing if you qualify to participate in this program, please fill out this form and mail it or drop it off in person to Lane County Land Management Division, 3050 N. Delta Highway, Eugene, OR 97408 by February 29th, 2024. You may also contact County staff at 541-682-6702 for assistance.

Name:			
Homeowner Name (if different):			
Property Address:			
Homeowner Mailing Address (if different):			
Phone Number:			
Email Address:			
To help us determine if you qualify for this funding, please answer th	ne questions	below.	
Are you or someone in your household at least 55 years of age or older?	Circle One:	Yes	No
Are you or someone in your household a veteran?	Circle One:	Yes	No
Are you or someone in your household currently participating in or accessing social services such as OHP , SNAP , TANF , SSI , SSDI , etc.?	Circle One:	Yes	No
Do you believe your property is at risk from wildfire?	Circle One:	Yes	No
Please explain your concerns with the vegetation on your property:			
Selected homeowners will be contacted by Lane County staff to schedule a site value incensed contractor. After the initial site visit, the homeowner or their designated a participation in the program and agree to have the work performed by the license inspect the project at completion and document the work by taking photos of the used in media, print, and outreach efforts. By signing below, the homeowner or terms of service and that the information provided has been true to the best of the	agent will have ed contractor. process. Tho lesignated age	e 14 da County se pho ent agre	ys to acce staff will tos may be
Printed Name:	_		
Signature:	_ Date:		