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## SDG&E - Safety Partners FSC and CERT Grant Application

Before getting started,

- SDG&E is pleased to invite your organization to apply for a grant through the SDG&E SAFE San Diego Initiative
- The SDG&E SAFE San Diego Initiative grant application must be complete by the May 31st deadline.
- Please complete this form and submit to the Burn Institute by email at [Grants@burninstitute.org](mailto:Grants@burninstitute.org) or by fax to 858-541-7179.

If you have any questions pertaining to this grant program, please contact Penney Newell by email at [pnewell@semprautilities.com](mailto:pnewell@semprautilities.com) or by phone at (619) 696-2188.

### Proposal Narrative

**Name of Fire Safe Council or CERT:**

Click here to enter text.

**Title**

Click here to enter text.

**First Name:**

Click here to enter text.

**Last Name:**

Click here to enter text.

**Email**

Click here to enter text.

**Office Phone**

Click here to enter numeric value.

**FSC or CERT program name:**

**(Limited to 10 words or less)**

Click here to enter text.

**If you received a grant from SDG&E last year, did you use all the funds?  
(yes/no) If no, please explain.**

Click here to enter text.

**Total project budget:**

Click here to enter text.

**Please explain how the program/project budget is allocated:**

Click here to enter text.

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**If the program/project is funded by grants, private donations and/or through Fire Department budget, please list them:**

[Click here to enter text.](#)

**Description of the program, project or event that focuses on emergency preparedness and safety and the population served (i.e. disadvantaged, low income, unincorporated area):**

**(Response is limited to 100 words or less)**

[Click here to enter text.](#)

**Will you be collaborating with other organizers? If so, please list these organizations and their role in the specified program and indicate whether or not each of these is a non-profit organization. If no other organizations are associated with the program, please indicate so.**

**(Response is limited to 100 words or less)**

[Click here to enter text.](#)

**If this program is new (three years or less in operation), describe the strategy for the long term sustainability of the program. If established (more than three years in operation), describe the strategic next steps for your established program.**

**(Response is limited to 100 words or less)**

[Click here to enter text.](#)

**Describe how this program will be promoted to the audience served. Identify outreach and communication methods that will be used to increase awareness of the program.**

**(Response is limited to 100 words or less)**

[Click here to enter text.](#)

**Please list all major events throughout the next twelve months that your organization sponsors and/or administers (e.g. Training, Safety Fairs/Expos, Annual Gala, Awards Banquets, etc. If no events, please indicate none.**

**(Response is limited to 100 words or less)**

[Click here to enter text.](#)

**Describe or list benefits to the community that may result from support of the proposed grant:**

**(Limited to 100 words or less)**

[Click here to enter text.](#)

**Primary geographic area to be served by program or project: San Diego County or Orange County**

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Click here to enter text.

**List the name of the community(s) or zip codes your program serves:**

Click here to enter text.

**Does your organization use Facebook?**

Click here to enter text.

**Link to organization's Facebook page:**

Click here to enter text.

**Number of Facebook fans:**

Click here to enter numeric value.

**Does your organization use Twitter?**

Click here to enter text.

**Organization's Twitter handle:**

Click here to enter text.

**Number of Twitter followers:**

Click here to enter numeric value.

**Does your organization use Instagram?**

Click here to enter text.

**Instagram Username:**

Click here to enter text.

**Number of Instagram followers:**

Click here to enter numeric value.

**Do you send out a newsletter?**

Click here to enter text.

**If yes, please indicate frequency: weekly, monthly, quarterly, etc.**

Click here to enter text.

**If yes, what is the number of subscribers?**

Click here to enter numeric value.

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## Impact and Measurement

**Is the organization willing to provide a year-end report on how funding was spent?  
(yes/no)**

Click here to enter text.

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**If the organization provides safety trainings, workshops or basic training academies, how many offered annually?  
(Please enter as a numerical value)**

[Click here to enter numeric value.](#)

*REQUIRED FIRE SAFE COUNCIL RESPONSES: (CERT organizations, skip this section and complete required responses for CERT's below)*

**Are you an approved Fire Safe Council (FSC)?  
(yes/no) If no, please explain.**

[Click here to enter text.](#)

**Provide the zip codes for the areas that your FSC manages.**

[Click here to enter text.](#)

**Is the project in a wildland-urban interface (WUI) area?  
(yes/no)**

[Click here to enter text.](#)

**Has your FSC developed an approved Community Wildfire Protection Plan (CWPP)?  
(yes/no)**

[Click here to enter text.](#)

**Does the FSC offer defensible space programs, if so, how many per year?  
(Please enter as a numerical value)**

[Click here to enter numeric value.](#)

**What was the estimated number of structures/residences protected by the program/project for last year?  
(Please enter as a numerical value)**

[Click here to enter numeric value.](#)

**How many communications relevant to fire safety are generated each year?**

[Click here to enter numeric value.](#)

**List the types of fuel treatments offered (i.e. chipping, weed whacking, hand clearing, other):**

[Click here to enter text.](#)

**What is the estimated number of acreage that will be treated through fuel treatment projects this year?  
(Please enter as a numerical value)**

[Click here to enter numeric value.](#)

**Does the program provide signage?**

[Click here to enter text.](#)

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**If signage, how many?**

**(Please enter as a numerical value)**

[Click here to enter numeric value.](#)

**What type of signage was provided to the community during the past 12 months?**

[Click here to enter text.](#)

***REQUIRED CERT RESPONSES (FSC organizations, skip this section):***

**Is your CERT program sponsored by the County Office of Emergency Services?**

**(yes/no) If no, please explain**

[Click here to enter text.](#)

**Does your CERT program participate in Disaster Service Worker Volunteer (DSWVP) Program? (yes/no)**

[Click here to enter text.](#)

**What is the estimated population of the entire CERT area/jurisdiction:**

**(Please enter as a numerical value)**

[Click here to enter numeric value.](#)

**Provide information about the types of basic disaster response skills and disaster preparedness programs the organization offers:**

**(Limited to 50 words or less)**

[Click here to enter text.](#)

**How many active CERT members are in the CERT program?**

**(Please enter as a numerical value)**

[Click here to enter numeric value.](#)

**How many CERT drills offered annually?**

**(Please enter as a numerical value)**

[Click here to enter numeric value.](#)

**Does your CERT program offer supplemental or any Continuing Education Units (CEU's) or additional training programs?**

**yes/no) If yes, please describe**

[Click here to enter text.](#)

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