



FIRESAFE Marin Chipper Day Award Application

Please mail completed application to: 555 Northgate Drive, San Rafael, CA 94903 or fax 499-4246

Neighborhood Contact Information – Neighborhood Location

Name	
Street Address	
City ST ZIP Code	
Phone	
E-Mail address	
Funds Requested	\$
Matching Funds	\$

Why is your neighborhood a good candidate for “Chipper Day” funding?

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What is your local fire agency?

Department Name	
Contact Person	
Phone	

What actions have you taken already to improve fire safety at your homes & neighborhood? Do you have a long term maintenance plan?

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Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted for this award, any false statements, omissions, or other misrepresentations made by me on this application may result in withdrawal of the award.

INDEMNIFICATION: Upon signing this document the below stated applicant hereby assumes and agrees to protect, hold harmless and indemnify FIRESafe Marin and its officers, agents and employees from all legal liability for property damage, injury to or death of all persons whomsoever resulting from the FIRESafe Marin Chipper Day Award Program.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of FIRESafe Marin to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. Thank you for completing this application form and for your interest our award program.