

**Hazardous Fuels Reduction Program
Administered by Forest Lakes Fire District**

Memorandum of Understanding

Applicant Name _____

Applicant Mailing Address _____

Forest Lakes Address _____

Email Address _____

Phone Number _____

Estimated Acreage to Treat _____ acres

I am the recorded owner of the property listed above.

I have read the thinning and defensible space guidelines (<https://flfdaz.com/firewise>) and agree to follow them.

I have the right to opt out of the fuels treatment program prior to a contractor performing work on my property.

I agree to hire an approved contractor to perform the work and I agree to pay the costs of the thinning performed by the hired contractor.

I understand that raking and hauling of pine needles or other ground debris is not included in the grant.

I understand that I will be reimbursed 80% of contractor costs up to \$4000 per acre. (80% of \$4000 = \$3200 maximum reimbursement amount). Reimbursement will come from Forest Lakes Fire District and may take up to 4 weeks after all required documentation has been submitted.

I understand that I am responsible for any contractor costs that exceed \$4000 per acre.

I understand that fuels reduction projects will reduce the severity of wildfire impacts. However, I also understand that there is no guarantee of absolute protection of my property by participation in this program.

I understand that defensible space and fuels reduction work must be maintained to ensure effectiveness of treatment and I am responsible for maintenance activities on my property.

I have read the information above and agree to these terms. I am ready to begin fuels treatment on my property.

Property Owner Signature _____ Date _____

Please email your signed copy to john@inservices.net, or deliver to the Fire Station.

Grant Administrator Approval _____ Date _____