FIRESMART COMMUNITY RECOGNITION APPLICATION FORM



Complete and submit this form to your Local FireSmart Representative no later than December 31. FireSmart Community Recognition Program participants are given credit for work completed during the calendar year. Copies of the 1) Assessment Report, 2) FireSmart Community Plan, 3) FireSmart Event documentation and, 4) \$2 / capita investment documentation must be submitted with the application form.

recognition in the FireSmart C	in the province/territory of hereby applies for official Canada Community Recognition Program for the year 20 munity Recognition Program application criteria (items $1-5$ below).
1. FORMED A FIRESMART BOAR	D
Local FireSmart Representative:	
Date Board Established:	Board President:
Board Meeting Dates:	Address:
Board Members:	Address:
	Prov:Postal Code:
	Phone:
2. COMPLETED A COMMUNITY A	ASSESSMENT REPORT
Completed by – Name:	
Date of Assessment:	
5. INVESTED AT LEAST \$2/CAPIT Total FireSmart expenditures, including	Event documentation supplied to LFR:Yes No cation:
PLEASE PROVIDE THE FOLLOWING	CONTACT INFORMATION:
Fire Chief:	Addt'l Fire Advisor:
Fire Department:	Agency:
Phone:	Phone:
Email:	Email:
APPLICATION SUBMITTED BY: (Rec	ognition materials will be sent to this person on approval of application)
Name:	Phone:
Address:	City/Province:
Postal Code:	Email:

FIRESMART COMMUNITY RECOGNITION APPLICATION REVIEW FORM



This form provides a checklist and comment summary for official review of initial applications for FireSmart Community recognition status. Upon review by 1) Local FireSmart Representative (LFR) and 2) Provincial / Territorial FireSmart Liaison (PTFL) this form with completed application on reverse and all supporting documentation is to be forwarded to FireSmart Canada.

SECTION 1: LOCAL FIRESMART REPRESENTATIVE REVIEW		
LFR to complete the following checklist:		
1. COMMUNITY FORMED A FIRESM	ART BOARD	
Comments:		
2. COMMUNITY COMPLETED A COMMUNITY ASSESSMENT REPORT - ACCEPTED BY BOARD		
Completed by – Name:	Agency:	
Date Assessment Prepared:	Date Assessment Accepted by Board:	
Comments:		
3. COMMUNITY CREATED A FIRESMART COMMUNITY PLAN - SIGNED BY BOARD		
Comments:		
4. COMMUNITY HELD A FIRESMART EVENT		
Date of FireSmart Event(s):		
Comments:		
5. COMMUNITY INVESTED AT LEAST \$2/CAPITA IN FIRESMART EVENTS		
Comments:		
RECOMMENDATION: I, the Local FireSmart Representative (name)		
SECTION 2: PROVINCIAL/TERRITORIAL FIRESMART LIAISON REVIEW		
RECOMMENDATION: I, the Provincial/Territorial FireSmart Liaison (name),		
for the Province/Territory of	have reviewed this application and supporting materials and hereby:	
Approve application	Award Community Protection Achievement Certificate	
Return application for further documentation (see attached memo)		
Signature of Provincial/Territorial Liaison:	Date:	
SECTION 3: FIRESMART CANADA / PARTNERS IN PROTECTION		
Approved Application Received – Date:	Recognition Materials Ordered - Date:	
PIP Representative:	Recognition Materials Sent - Date:	
Comments:		