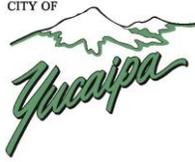




Yucaipa Fire Request Form (Exhibit B)

Attachment to the Community Activity Grant Application/SEP Process



Fiscal Year: 2015-2016

Date Application submitted: _____

SECTION 1 – GENERAL INFORMATION

Name of Applicant / Organization _____

Mailing Address: _____

Phone Number: _____

Contact: _____

Name

Phone Number

E-mail address

Applicant Signature: _____ Title: _____

SECTION 2 – EVENT INFORMATION

Event Name: _____

Event Location: _____

Event Date: _____ Event Time: _____

Estimated Event Attendance Number: _____

SECTION 3 – YUCAIPA FIRE SERVICES REQUESTED

Number of Fire/EMS Requested: _____

Dates Requested: _____ **Times** Requested: _____

Additional Information: _____

TO BE COMPLETED BY YUCAIPA FIRE

Reviewed by:

Signature: _____ Title: _____ Date _____

Total Cost for In-Kind Request: _____