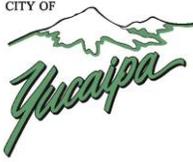




# Yucaipa Fire Request Form (Exhibit B)

Attachment to the Community Activity Grant Application/SEP Process



Fiscal Year: 2016-2017

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:** \_\_\_\_\_