

# 2023 Truckee North Tahoe Forest Management Program Application

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*Tahoe Truckee Community Foundation*

## *Applicant Information*

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### **Project Name\***

Name of Project. To be supplied by TTCF Staff during the due diligence process with standard nomenclature. e.g. TNTFMP\_Entity Name\_ APN#

*Character Limit: 100*

### **Applicant Type\***

Please indicate which of the following legal entity type describes your applicant status. You may only select one.

#### **Choices**

501c3 Nonprofit Corporation  
B Corporation  
C Corporation  
Individual  
Limited Liability Company  
Partnership  
S Corporation  
Sole Proprietorship

### **Description of Project Support\***

Please indicate what type of funding you are seeking; option is single select only.

#### **Choices**

Develop a management plan or project on my property  
Go through the CEQA environmental compliance process  
Implement a project with completed environmental compliance

### **Statement of Need\***

Please describe the current conditions of the property. You may additionally provide context to surrounding area (i.e. proximity to populated areas, adjacent property work, etc.).

*Character Limit: 2500*

### **Management Plan\***

Does your property have a management plan written by a qualified resource professional?

#### **Choices**

No  
Yes

**Proposed Project Location\***

Is the proposed project location the same as your mailing address?

**Choices**

No

Yes

**Property Acreage\***

What is the total acreage of your property?

*Character Limit: 5*

**Project Acreage\***

What is the total acreage of the proposed project?

*Character Limit: 5*

**Project Location - APN\***

Please enter the Assessor's Parcel Number (APN) for your project location. You may only include one APN for the purpose of the LOI. This should be where the majority of your project acreage is located. Please do not use dashes.

If you need assistance locating your APN please reference County Maps & Parcel Data at the following external websites:

- El Dorado County
- Nevada County
- Placer County
- Sierra County

When inputting your street address to the county database, if you encounter a challenge try looking it up by number only.

*Character Limit: 12*

**W-9\***

Please upload a copy of your W-9 here. If awarded, this information will serve as Payee Data for the applicant.

*File Size Limit: 1 MB*

## *Additional Information*

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**Project Location - Street Address**

Please enter the street name and number

*Character Limit: 50*

### Project Location - City

*Character Limit: 40*

### Project Location - State

To be entered internally, standard CA

*Character Limit: 2*

### Project Location - Postal Code

Please enter the 5 digit postal code

*Character Limit: 5*

## *Application for planning or project development*

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### Technical Assistance Project Request Amount\*

What is the total amount of funding requested for your project?

*Character Limit: 20*

### Description of Project Goals

Please briefly describe your intended end-goals for this project. This could include a range of outcomes from seeking consultation services to developing a Management Plan.

*Character Limit: 2000*

### Site Pre-work\*

Have you completed any forest management, tree removal or wildfire resilience work on your property prior to completing this application?

#### Choices

No

Yes

### Community Partnerships\*

Have you worked with any local fire districts, resource conservation districts, public utility districts or other agencies or nonprofit organizations to plan or make improvements to the forest health on your property?

#### Choices

No

Yes

### Community Partnerships Description

If you answered yes please provide the name(s) of partner agencies and organizations and a description of the improvements to forest health on your property.

*Character Limit: 1000*

## *Implementation or CEQA Application*

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### **Project Overview\***

Please describe the proposed work to be conducted and desired post-project stand conditions. Include Management Plan units work that will be conducted, if it is available.

*Character Limit: 2000*

### **CAL FIRE Approved Activities\***

Please indicate which of the following activities is part of your project plan. Check all that apply

#### **Choices**

Follow-up to previous work  
Pruning  
Site Preparation  
Timber Stand Improvement  
Tree Planting  
Tree Protection

### **Follow-up to previous Work**

If you selected Follow-up to previous work in the CAL FIRE approved activities list, please provide a short description of the work that will take place.

*Character Limit: 200*

### **Alignment to Regional Efforts**

Please describe how your project will support existing regional wildfire resilience efforts, if applicable.

*Character Limit: 2000*

### **Internal Review of Alignment to Regional Efforts**

Following submission of application and review of eligibility criteria, project location will be compared by TTCF Staff during due diligence process to determine its alignment to regional wildfire resilience efforts.

*Character Limit: 5000*

## *Additional Funding Following CEQA*

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### **Additional Funding\***

Would you be seeking project implementation funding through this program following completion of the CEQA Process?

#### **Choices**

No  
Yes

## *Project Financial Information*

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### **Total Project Cost\***

What is the total cost to complete this project?

*Character Limit: 20*

### **Request Amount\***

What is the total amount of financial support you are requesting for the proposed project?

*\*Note this should match the funding request in your attached Budget File Upload.*

*Character Limit: 20*

### **Request Amount Budget Upload\***

Using the provided standard Budget File Template, please provide financial details on your Funding Request. When complete, upload the file here.

*File Size Limit: 1 MB*

### **Budget Narrative\***

Please briefly provide a justification for the expenses provided in your budget form.

*Character Limit: 1000*

### **Financial Capacity\***

Would you have the financial resources to implement this project or complete CEQA without financial support from this program? Please explain.

*Character Limit: 1000*

### **Match Amount\***

What is the total dollar amount of available matching funds for your project (if any?). Please enter "0" if you do not have matching dollars available.

*Character Limit: 20*

### **In-Kind Match**

Please indicate any in-kind match you would bring to the project.

*Character Limit: 250*

## *California Environmental Quality Act (CEQA)*

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Environmental compliance under the California Environmental Quality Act (CEQA) must be met to use funding through this program to implement a project. Support to meet the CEQA requirements is available through this program.

If you already have met these requirements, please answer the following questions and attach your compliance documentation in the Maps and Additional Documents section.

If you have **not** already met these requirements, please answer the following questions indicating there is a Lead Agency supporting the project you are proposing and attach a letter of support from said Lead Agency in the Maps and Additional Documents section.

### **CEQA Status\***

Has environmental compliance under the California Environmental Quality Act been completed for this proposed project?

#### **Choices**

No  
Yes

### **CEQA Lead Agency\***

Has a CEQA Lead Agency been identified for this project? Please attach your letter of support from the Lead Agency in the Maps & Additional Documents section below.

#### **Choices**

No  
Yes

### **Name of Lead Agency**

Please provide the name of your confirmed lead agency.

*Character Limit: 40*

## *Maps & Additional Documents*

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### **Property Map**

*File Size Limit: 1 MB*

### **Project Map**

*File Size Limit: 1 MB*

### **CEQA Compliance**

Documentation that environmental compliance has been completed under CEQA.

*File Size Limit: 1 MB*

## Letter of Support from CEQA Lead Agency

*File Size Limit: 1 MB*

## Management Plan Upload

Please provide a copy your Management Plan for the property

*File Size Limit: 1 MB*