

T E X A S
FOREST SERVICE
The Texas A&M University System

CENTRAL
fire

3.2244

April 16, 2009

Case # 968

DEER PARK VFD
P.O. BOX 700
DEER PARK, TX 77536

Dear Chief:

Your Application for Rural Fire Defense Assistance has been received. Your request will be evaluated during our next batching period and we will notify you if the application is "Approved". If your Application includes a training tuition request for a training date that is scheduled before our next batching period, we will evaluate your request immediately and notify you if the training tuition is "Approved".

The application will remain active until it is approved or cancelled. If our program guidelines are changed, we will contact you and ask you to submit another application form.

Thank you for applying and please call 979-458-6505 if you need additional information.

Sincerely,

Texas Forest Service



CENTRAL

FOR INTERNAL USE ONLY
 RATING: 55
 CASE NO: 9108

APPLICATION FOR RURAL FIRE DEFENSE ASSISTANCE

have map

- ① Name of Fire Department: DEER PARK VOLUNTEER FIRE DEPARTMENT ✓
- ② Physical Address: 2211 EAST "X" STREET Deer Park, TX 77536
(Street) (City) (Zip)
- Mailing Address: P O BOX 700, ✓ ✓ Deer Park, TX ✓ 77536 ✓ ✓
(Street or PO Box) (City) (Zip)
- ③ Email Address: spipkin@deerparktx.org
- ④ County: HARRIS Department Telephone: (281) 478-7281 ✓ ✓
 Department Fax: (281) 478-7289

- ⑤ State of Texas Charter Number (REQUIRED): 1413790 ✓ ✓
- ⑥ Year Fire Department was Created: 1950 ✓ ✓
- ⑦ Membership - Number of Volunteers: 80 ✓ ✓
 Number of Paid Full-Time: _____
 Number of Paid Part-Time: _____
- ⑧ Federal Tax Identification Number (REQUIRED): 74-1487821 ✓
 Include completed copy of Form W-9 when returning application for Cost-Share Assistance or Training Tuition only.

MAR 30 '09 3:30PM

- ⑨ Do you have a designated primary protection area under a 911 Public Service Answering Point (PSAP)?
 Yes ☒ No ☐
- ⑩ Size of your Primary 911 Protection Area (DO NOT INCLUDE MUTUAL AID RESPONSE AREA): 17.16 ✓
Attach a map of your Primary 911 Protection area to this application if: (1) a map has not been previously submitted, OR (2) there is a change in the size of the primary 911 protection area. (Square Miles)
- ⑪ Population of your Primary 911 Protection Area: 32000 ✓ ✓
- ⑫ Distance to the Nearest Viable Mutual-Aid Department (STATION TO STATION): 7.5 ✓ ✓
 (Miles)

Name of Department: LAPORTE VOLUNTEER FIRE DEPARTMENT

- ⑬ List the Total Funds Received from Taxing Authorities (such as City, County, Rural Fire Prevention Districts, etc.). DO NOT INCLUDE DONATIONS.
FIRE DEPARTMENT BUDGET 2008 - \$34,000.00



14 COST-SHARE ASSISTANCE (Attach additional sheets if necessary)

Please describe what type of cost-share assistance you are requesting and the total cost of the item:

4 - 1.5" - 125 GPM Task Force Tip Attack Nozzle - 4 - 2.5" - 250 GPM Task Force Tip Attack Nozzle -
 4 - 5" - Stortz to 4.5" NST Coupling - 4 - 4.5" NST Male to 2.5" NST Male - 4 - 4.5" NST Female to 2.5 female
 2 - 4.5" NST Double Male - 2 - 4.5" NST Double Female - 4 - 2.5" NST Double Female - 4 - 2.5" NST to 1.5"
 NST gated wye - 2 - 2.5" NST Siamese adapter - 6 - 1.5" NST Double Female - 6 - 1.5" NST Double Male -
 6 - 2.5" NST Female to 1.5" NST Male - 4 - 6" NST Piston Intake Valves with 5" Stortz - 12 - Brush Fire Paddles
 6 - Forestry Fire Hose - 2 Forestry Fire Hose Nozzles

SEE ATTACHED QUOTE FROM METRO FIRE.

Estimated Total Cost:

\$27,150.00 ✓

Total Cost-Share Amount You Are Requesting:

\$9,000.00

15 HELPING HANDS/FEDERAL EXCESS PROPERTY

(Form W-9 not required for these programs)

Please describe what type of donated equipment you are requesting. For water handling equipment (i.e., connections, hoses, nozzles, etc.), please specify size.

N/A

16 TRAINING TUITION (Attach multiple sheets for additional schools)

Name of School: _____

Number of
Trainees:

Date(s) of Training:

Course Name(s):

Tuition Cost per
Trainee:

| | | | |
|-------|-------|-------|----------|
| _____ | _____ | _____ | \$ _____ |
| _____ | _____ | _____ | \$ _____ |
| _____ | _____ | _____ | \$ _____ |
| _____ | _____ | _____ | \$ _____ |

17 FIRE DEPARTMENT OFFICERS

| Name | Title | Mailing Address | Telephone |
|---------------|--------------|----------------------|----------------|
| GREG BRIDGES | FIRE CHIEF | 2211 EAST "X" STREET | (281) 478-2062 |
| DON DAVIS | Assist Chief | 2211 EAST "X" STREET | (281) 478-7285 |
| GARY VEAZEY | DC - 1 | 1302 Center | (281) 478-2043 |
| JAMES JOHNSON | DC - 2 | 711 E PASADENA BLVD | (281) 478-7271 |
| JASON KARR | DC - 3 | 2211 EAST "X" STREET | (281) 478-7281 |
| BILL GREEN | CAPTAIN 3 | 2211 EAST "X" STREET | (281) 478-7281 |

I certify that the information entered on this application is true and accurate and that I, the undersigned, am authorized by the DEER PARK Volunteer Fire Department to represent their interests in acquiring funds and equipment for the Department.

Name (Print): SAMUEL PIPKINTelephone: (281) 478-7298Signature: (281) 478-7289Title: Director Emergency ServicesDate: 03/30/09Address: 2211 EAST "X" STREETEmail Address: spipkin@deerparktx.orgDEER PARK, TEXAS 77536

**Mail or fax completed application and W-9
to the following:**

**Texas Forest Service
John B. Connally Building
301 Tarrow, Suite 304
Attn: Emergency Services Grants Division
College Station, Texas 77840-7896
Fax (979) 845-6160 -- Tel (979) 458-6505**

Form W-9
(Rev. October 2007)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the
requester. Do not
send to the IRS.

Name (as shown on your income tax return)
Deer Park Volunteer Fire Department

Business name, if different from above

Check appropriate box: ☐ Individual/Sole proprietor ☐ Corporation ☐ Partnership
☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ ☐ Exempt payee
☒ Other (see instructions) ▶

Address (number, street, and apt. or suite no.)
PO BOX 700

City, state, and ZIP code
Deer Park TEXAS 77536

Requester's name and address (optional)

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
:
:
:

or

Employer identification number
741487821

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign
Here

Signature of
U.S. person

[Signature]

Date ▶

3/8/09

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,