



Illinois Department of Natural Resources
 Division of Forest Resources
 Volunteer Fire Assistance Grant Program
 Application 2026

IDNR USE ONLY _____

(* indicates a required field)

SECTION 1 - APPLICANT INFORMATION		
Applicant (FD) Name (*)	Tax ID number (9 digits) (*)	
Description of the Applicant (*)		
Address (*)	City, State, Zip (*)	County (*)
Daytime Telephone(*) : (cell if station is not manned)		Fax (*)
E-Mail (*):		
Applicant Representative (*):		Title:
Applicant Signature (*):		
Date:		
Other Contact Person <i>(Only if different from Applicant Representative)</i> Must be available during business hours.		
Name:		Title:
Daytime Telephone (*):		E-Mail:

SECTION 2 - ELIGIBILITY

1. Is 100% of the total project cost available at the time of application? YES NO
If the answer is NO, the applicant is not eligible for funding.

2. Does your Fire agency serve a rural area? YES NO
Does your Fire agency serve a community with a population under 10,000? YES NO
What is the population of the community served? _____ (From the most recent Census)
(See Section I for eligibility requirements)

3. Does your Fire agency have a written Memorandum of Understanding (MOU) on wildfire control with the Illinois Department of Natural Resources? YES NO
(A signed MOU is required for funding consideration, form included in this package). A MOU older than 3 years must be renewed. (See page vii) (Attach signed copy)

4. Provide a map of your protection area, and include any areas within the boundaries that are not under your protection.
If project includes purchase and installation of a dry hydrant, include a satellite map (such as Google Earth) with GPS coordinates and elevation drawings for the placement of the hydrant. If dry hydrant will be on Private Property attach signed 30 year easement.

SECTION 3 - EVALUATION CRITERIA

5. Is wildland fire training, PPE or equipment being purchased? (Eligible items include National Wildfire Coordinating Group (NWCG) training, wildland PPE, wildland hand tools, chainsaws, drip torches, backpack blowers, slip in units, brush trucks, and GPS units.

6.a. Does your department have National Wildfire Coordinating Group (NWCG) trained and active members? Yes No
S130 & S190, persons trained _____? (i.e. trained by IDNR Forestry, IFSI, or FWS)
S290 _____?
S131 _____?
S211 _____?
S212 _____?
S230 _____?
S231 _____?
S234 _____?

Other NWCG Classes _____?

6.b. Do you have members that hold a Red Card: Yes No If yes, list names.

7. Does your Fire agency protect any Natural Resource public lands or public own facilities, such as State Parks or Forests, Forest Preserve Districts, National Forest lands, County or Township Parks, State or Federal Lodges ?

YES NO If YES, please list. (BE SPECIFIC)
EXAMPLE: Starved Rock State Park (Lodge, Maintenance Building, Site Superintendent Residence, 625 acres)

Name of Facility: _____ Acres Protected: _____
Name of Facility: _____ Acres Protected: _____
Name of Facility: _____ Acres Protected: _____
Name of Facility: _____ Acres Protected: _____

(For more facilities, use additional sheets if necessary)
Highway right-of-ways, City Buildings or City Parks, Community Centers, Schools, Churches, Cemeteries and/or Post Offices and Mutual Aid assistance are **NOT ELIGIBLE** for consideration.

8. What is your approximate annual budget? \$ _____

List the source (s) of your income with its approximate percentage of your total budget.

a. _____ % b. _____ %

c. _____ % d. _____ %

9. What is your present rating from the Insurance Services Office? (ISO)

City: _____ Rural: _____

10. Does your Fire agency use the National Fire Incident Reporting System (NFIRS) to report wildfires to the Illinois State Fire Marshal's office? YES NO

Did your Fire agency report wildland fires to the Department of Natural Resources in 2025 YES NO

IDNR fire reporting website. <https://survey123.arcgis.com/share/ef3e0196ecea4661b86a0b9f384ddf80?open=menu>

If the wildfires have already been reported to IDNR, you will receive credit for each report.

11. In 2025 did your Fire agency suffer a loss (not covered by insurance) of 50% or more of the asset value, not including real estate value, of the fire agency's equipment? YES NO

If yes, attach a copy of the formal report documenting the equipment loss.

12. Do you have a completed GATA and a FY2026 Internal Control Questionnaire (ICQ) Submitted?

YES NO

13. Will this project increase the water supply to your protection area? YES NO

Tankers, tenders, dry hydrants and cisterns are eligible, and other projects will be considered. Permanent installations of dry hydrants or cisterns on private property require written and signed 30 year easements (and must be included with the application) along with all-weather access. Survey and legal fee estimates can be included in your request and must be submitted with the reimbursement request.

14a. Does the proposed project involve the conversion of Federal Excess Property? YES NO

If yes, please include the serial number and equipment description in Section 4 - Project Description.

14b. List and Identify FEPP/FFP equipment to be altered or modified

Serial Number: _____ Equipment Description: _____

Serial Number: _____ Equipment Description: _____

15. Does your community have a Community Wildfire Protection Plan. Yes No *Attach with Application*

Name of Plan: _____ County/Area Covered by Plan _____

Name of Plan: _____ County/Area Covered by Plan _____

SECTION 4 - PROJECT DESCRIPTION

[you may attach additional documentation]

Classification (*): Equipment Purchase Training New Organization

Project Title (*):

Project Description and Comprehensive Justification (*):

Provide a map of the project location with GPS coordinates and elevation drawings if purchase and installation of a dry hydrant is requested. If Hydrant will be placed on private property include a 30 year signed easement with the application.

Click inside the box to insert map into document.

	IDNR FUNDING <i>[Up to 50% of total project cost or 10,000. Whichever is less]</i>	DEPARTMENT FUNDING	TOTAL PROJECT COST
PROJECT FUNDING	\$	\$	\$

SECTION 6 - DETAILED PROJECT BUDGET
(Required for all applications.)

*Attached Itemization is fine**

PERSONNEL

Additional Documents may be attached on back*

Name or Position Title	Hourly Rate	Hours	Total

TRAVEL

Position/Description	Item Rate	Quantity	Total

EQUIPMENT

Description	Price/Item	Quantity	Total

MATERIALS/SUPPLIES

Description	Price/Item	Quantity	Total

CONTRACTUAL SERVICES

Description	Total

OTHER

Description: (i.e. legal description; survey fees)	Total

TOTAL COST OF PROJECT \$

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**Scan and email application
and attachments (all pages)
to: :**

DNR.VFA@illinois.gov

**ONLY ELECTRONIC
APPLICATIONS (EMAIL)
WILL BE ACCEPTED**

Questions - Contact:

Adrian.Walker2@illinois.gov

Matthew.Bernhardt@illinois.gov

Equal opportunity to participate in programs of the Illinois Department of Natural Resources (IDNR) and those funded by other agencies is available to all individuals regardless of race, sex, national origin, disability, age, religion or other non-merit factors. If you believe you have been discriminated against, contact the funding source's civil rights office and/or the Equal Employment Opportunity Officer, IDNR, One Natural Resources Way, Springfield, IL 62702-1271; (217) 782-2662; TTY (217) 782-9175.

