

2024 Fire Season Wildfire Assistance Application

Application Submittal Deadline to ICA Office by October 15, 2024

| Contact Information: Applicant Name: | | | | ICA Member: Yes () No () | |
|--------------------------------------|--|--------|---------|----------------------------|--|
| Contact Name: | | | | | |
| Address: | | | | | |
| City: | | State: | County: | Zip: | |
| Phone: | | | E-Mail: | | |
| Assistance Fund Request Amount: | | | | | |

2024 Fire Season Wildfire Assistance Application Instructions:

• Wildfire Assistance Applications are due into the ICA Office by October 15, 2024

Mail to: Idaho Cattle Association 21120 W Airport Way 83715; or email to: info@idahocattle.org

• Qualifying Entities or individuals: ICA members and Local Associations, Cattle producers, RFPA's, volunteer fire departments or organizations, individuals or others that provided assistance, resources or funds to fight 2024 Wildfires that caused losses or threatened cattle producers livestock, property or resources. Funds were received by ICA as private donations for Wildfire Assistance (no public funds).

• Most wildfire assistance funds will be awarded at levels between \$1,000 and \$4,000.

Assistance applications (with supporting documentation) will be considered for reimbursement of expenses or losses incurred by individuals or entities as a
direct result of wildfires in Idaho counties for claims which have not been or are not expected to be covered by the reimbursement of another program or source
such as: Property Insurance or the FSA Emergency Conservation Program (ECP) cost share program.

• Assistance applications will be considered for incurred expenses or losses suffered from: A) Emergency Feed, Transport or Pasturing; B) Fencing Loss; C) Infrastructure Loss; D) Seeding Cost; E) Assistance provided to producers or related wildfire costs; F) Supplies and materials used to be replaced; G) Other losses or expenses as described by applicant.

• The format for reviewing received assistance applications, reviewing applicant's supporting documentation, and issuing disbursements to applicants will be determined by the ICA Board of Directors. This committee will determine if the application meets the program criteria and the amounts, if awarded. The wildfire fund may not be sufficient to meet all requests and may be prorated between applicants at the committee's discretion. If you have any questions please contact: Cameron Mulrony, Executive Vice President, Idaho Cattle Association (208)343-1615 or cameron@idahocattle.org

Assistance Claim:

* On the back of this form please provide a brief description of how the assistance funds requested were or will be utililized.

| A. Emergency Feed, Transport or Pasturing for Displaced Livestock: | : \$ (attach supporting documents) | | | | |
|-----------------------------------------------------------------------------------------|------------------------------------------------|--|--|--|--|
| B. Permanent or Temporary Fencing: | | | | | |
| 1. Supplies and Materials : | <pre>\$ (attach supporting documents)</pre> | | | | |
| 2. Labor Costs or Contracted Services: | <pre>\$ (attach supporting documents)</pre> | | | | |
| 3. Other Costs - describe: | \$ (attach supporting documents) | | | | |
| Please indicate length or number of miles of fence related to the above listed expenses | | | | | |
| | | | | | |
| C. Other Infrastructure Loss (structures, water improvements, etc.) |) \$ (attach supporting documents) | | | | |
| D. Seeding Cost for acres burned: | \$ (attach supporting documents) | | | | |
| E, G. Other Losses, Costs or Expenses Incurred Fighting Wildfire \$ | (attach documents and describe on back) | | | | |
| F. Equipment, Supplies or Materials Losses, Used or to be Replaced | \$ (attach documentation and describe on back) | | | | |
| Fire Name(s) Role and Description of Assistan | tance (additional detail or describe on back) | | | | |

Please provide a brief description of how the assistance funds requested were or will be utililized:

The undersigned certifies that:

- Assistance funds requested on this form have or will be spent according to the terms outlined within the agreement.
- Assistance funds requested have not been reimbursed or are not expected to be reimbursed by another program or source.
- To the best of my knowledge the information provided within this Assistance Claim is true and accurate.
- I understand and agree that the Idaho Cattle Association may request additional information or documentation.
- I am authorized by the Assistance award recipient to execute this document and legally bind the recipient by this signed execution.

| Signature: | Date: |
|-----------------------------------|--------|
| Printed Name: | Title: |
| Any additional needs or comments: | |
| | |
| | |

| For ICA office use only: | |
|-----------------------------|-------------------------------|
| Assistance Award Number: | Date of Application Received: |
| Date of Application Review: | |
| Project Location: | |
| Payment Amount: | Payment Date: |