



APPLICATION FOR FUELS REDUCTION WORK

Applicant Name

Property Owner Name

Job Address

Home Phone

Cell Phone

Type of Work Requested:

Conditions of Fuels Reduction Work:

The purpose of the Central Lyon County Fire District's Fuels Reduction Program is to reduce the danger to homeowners from the effects of wildfire. The high-risk areas identified in the 2004 Nevada Community Wildfire Risk/Hazard Assessment Project, conducted for the Nevada Fire Safe Council, will be the high priority areas and receive attention first. As these are completed, other areas will be attended to. The scope of the work to be completed will consist of creating defensible space around your home. It will consist of cutting and/or removal of vegetative material, pruning of shrubs and trees, and removal of the debris. This will be completed at no cost to the homeowner.

The FUELS REDUCTION AGREEMENT for defensible space work must be signed prior to any work being started. It shall be understood that the receiving party of the fuels reduction work agrees to all of the conditions outlined in the FUELS REDUCTION AGREEMENT.

Fax completed form to (775) 246-6204 or mail to 246 Dayton Valley Rd, Ste 106, Dayton, NV 89403. Once received, a representative will contact you and schedule an appointment to make an assessment of work to be completed.

CENTRAL LYON COUNTY FIRE PROTECTION DISTRICT FUELS REDUCTION AGREEMENT

1. SCOPE OF WORK. PROPERTY OWNER recognizes that the proposed scope of work has been designed by fire suppression personnel to decrease the risk of catastrophic loss due to wildfire, but does not in any way guarantee that structures and/or lives will not be lost in such an event. PROPERTY OWNER(s) hereby agree to the following scope of work:

PROPERTY LOCATION: _____

2. RELEASE AND HOLD HARMLESS. For value and consideration received PROPERTY OWNER(S) designated above jointly and severally give our permission to enter said property and conduct fuels management, modification, and reduction work, as described in SCOPE OF WORK, on property designated above. PROPERTY OWNER hereby agrees to hold harmless The Central Lyon County Fire District, it's employees, volunteers, officers or agents, from any and all claims, action, liability, loss, damage, or suit arising from or incurred in connection with or relating to vegetation pruning, cutting, thinning, removal or any other combustibles from the aforementioned property, and any actions described in the SCOPE OF WORK described above. This includes any damage related to property damage, personal injury, or other claim or damages whatsoever that may occur as a result of or in conjunction with the acts or omissions of the aforementioned persons or organizations. This agreement is unlimited as to the amount or duration, but shall not extend to any claim for which there is adequate insurance. It is understood and agreed upon, by and between PROPERTY OWNER and the Central Lyon County Fire District that this agreement is entered into without undue influence, fraud, coercion, or misrepresentation for any reason not herein stated. Each party acknowledges that they have read this agreement and that it is entered into voluntarily. This agreement shall be construed and governed in accordance with the laws of the State of Nevada. A facsimile (FAX) signature shall be deemed to be an original signature for purposes of this agreement. Any portion of this agreement held to be invalid or unenforceable shall be severed from this agreement and shall not affect the validity of any other portion of this agreement.

3. DELEGATION OF AUTHORITY (FOR ABSENTEE HOMEOWNERS ONLY). Property owner hereby grants permission to _____ to enter my property on my behalf for the purpose of obtaining a defensible space evaluation, if necessary, from the appropriate fire protection district, fire department, or other appropriate fire personnel. The designated representative has my authority to make decisions on my behalf regarding the selection of trees and/or brush on my behalf.

Signature of property owner(s)

Date

Signature of authorized representative (if required)

Date

Witnessed:

Printed name(s)

Signature

Print Name

Mailing Address

THIS SIGNED FORM MUST BE RETURNED TO THE CENTRAL LYON COUNTY FIRE DISTRICT FUELS MANAGEMENT OFFICE PRIOR TO PROJECT COMMENCEMENT. FAX NUMBER: 775-246-6204