



Fire department and emergency medical services application

Mail **FIVE** completed applications and supporting materials to:

Butler Rural Community Connection
3888 Stillwell Beckett Road
Oxford, Ohio 45056

Butler Rural Community Connection is made possible by Butler Rural Electric Cooperative members and employees who voluntarily contribute to the program. A five-person volunteer board of trustees meet twice a year to choose grant recipients. Board members are Butler Rural Electric Cooperative members, which ensures the grant decisions are made in the best interest of the community.

Keep in mind:

- One grant may be awarded to your fire department or emergency medical service within a 12 month period. If you are denied a grant, you may apply the following grant application round. For example, if you are awarded in March, you cannot reapply for a grant until the following March. If you are denied in March, you may reapply in September.
- The maximum grant amount is \$5,000, but no request is too small.
- You may attach up to two additional pages with the application if necessary. Do not exceed five pages total.
- Include a list of itemized costs for the project. A portion of the amount requested may be awarded if the Community Connection board does not fund the entire grant.
- If you are requesting a specific type of equipment, include a picture or description of the item. Many groups include advertisements from vendors that list the price and description of the item. This will not commit you to a specific vendor.
- Grants for Apple devices must be purchased by the organization or grant recipient. Butler Rural Community Connection will reimburse your organization or the purchaser.
- Funds are awarded in March and September. Grant application deadlines, Community Connection board of trustee meeting dates, and grant recipients are available at butlerrural.coop > Community > Community Outreach > Community Connection.
- Five printed, completed applications and supporting materials must be submitted to Butler Rural Electric Cooperative by 4:00 p.m. on the day of the grant application deadline. Applications must be received at the cooperative's office by the deadline, not postmarked or emailed by this date.
- Grant applicants will be contacted by letter after the Community Connection board of trustees meeting.
- Questions can be directed to Andy Denny by calling 513-867-4409 or by e-mail, andyd@butlerrural.coop.

FIRE DEPARTMENT/EMERGENCY MEDICAL SERVICE INFORMATION

Fire department/emergency medical service name: _____

Cities/townships served: _____

Contact person: _____

Title: _____

E-mail: _____

Phone: _____

Mailing address: _____

GRANT INFORMATION

Does your organization function as a local government entity? ☐ Yes ☐ No

Grant amount requested: _____

What percentage, if any, is generated by levies and/or tax dollars? _____

If the request for funds is not fully-funded by Butler Rural Community Connection, do you have other sources of funding available? ☐ Yes ☐ No

If yes, what are the other funding sources? _____

Briefly describe the project, program, or item for which funding is being requested:

Description must be confined to the text box below. Do not submit attachments with additional wording.

Briefly describe the people who would benefit from this project or what type of impact it would have:

Description must be confined to the text box below. Do not submit attachments with additional wording.

How do you plan to evaluate the success of the project/program?

Should this award be granted, it is expected that all funds be used within one year of the award date. If special circumstances prevent the use of the funds by the deadline, contact Andy Denny by calling 513-867-4409 or by e-mail, andyd@butlerrural.coop.

Butler Rural Electric Cooperative does not endorse or recommend any of the products or services purchased through the Community Connection grant process.

The application must be signed by the entity's chief officer and by the contact person for future questions and correspondence.

Chief officer signature: _____

Printed name: _____

Date: _____

Contact person signature: _____

Printed name: _____

Date: _____

To ensure the township officials are aware of this grant request, a township trustee or fiscal officer's signature is required.

Township trustee/fiscal officer signature: _____

Printed name: _____

Date: _____

Do not submit application until the following items have been included:

- Five completed applications
- Itemized list with costs (per unit) involved
- Photo of the item(s) or project, if available
- Chief officer, contact person, and township trustee/fiscal officer signature

Application deadline

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