



California Fire Safe Council
Community Fire Safe Council Development Project

Community Name: _____

Location City: _____ County: _____

To be completed by the Local Fire Department Advocate

Approximate Landscape Acreage: _____

Fire Hazard Severity Zone (FHSZ) of the project area:

____ Very High Severity ____ High Severity ____ Moderate Severity

Condition Class: ____ Class 1 ____ Class 2 ____ Class 3

Fire Regime: ____ I ____ II ____ III ____ IV ____ V

Local Fire Department Advocate
or person sponsoring this community:

Name: _____
Phone #: _____ email: _____
Address: _____

Community Size:

Number of Houses and Buildings: _____ Estimated Total Property Value: \$ _____

Number of Community Residents: _____

Critical Infrastructure (Schools, Water District, Sewer Plant, etc.): _____

Any Other Important information: _____

RETURN TO: sgort@cafiresafecouncil.org