2011 Free Vegetation Clearance for Seniors and Disabled in El Dorado County

Requirements: The clearing work must be on your primary residence that is owned by you in El Dorado County. There are no financial qualifications required for this program. However, this program has limited funds; please use this service only if you are financially unable to afford vegetation removal on your property and physically unable to do the work.

Here's how the program works: Complete and sign the form on the back of this paper and submit it to the Fire Safe Council. It may take up to two weeks for someone from the Fire safe Council to contact your regarding this application. Depending on the type and amount of work that is needed on your property and if all of the information needed is correct on your application you will either be scheduled for a residential evaluation or assigned to a contractor for the clearing work.

The purpose of the work is to create defensible space around your home and to provide safe access along your driveway. The crew will rake, weed-eat grass, remove brush and limb trees from around your structure. Trees that are recommended for removal are the homeowner’s responsibility. The crews will not clean roofs or gutters.

Cost: The Senior and Disabled Clearing program is a grant funded program and the funding is limited. This program is on a first come, first served basis. The clearing work expense is paid for by the El Dorado County Fire Safe Council.

Please read and complete the form on the back of this paper. Mail the completed form to the El Dorado County Fire Safe Council at P.O. Box 1011 Diamond Springs, CA 95619.

If you have questions please call the Fire Safe Council office: (530) 647-1700
This program is funded by grants through El Dorado County Fire Safe Council (EDCFSC), a non-profit organization serving El Dorado County. The goal of this program is to help homeowners who are physically and financially unable to perform the clearance to meet California Public Resources codes to create proper fire clearance around their residence.

The clearance provided through this program is the minimum required by California State law (Public Resources Code 4291) The State requires clearance of 100 feet from a structure or to the property line and is the minimum required to protect your home in the event of a wildland fire. In some cases, based on the fuel type, topography, and weather conditions, 100 feet of clearance may not be sufficient to protect your home. The clearance provided by EDCFSC will focus on the 30 feet immediately surrounding your structure so; in some cases this clearing will not meet the State clearance requirements. It is still the homeowner’s responsibility to comply with California state regulations.

Hold Harmless: I/we understand that the EDCFSC is helping me/us clear around my/our home and outbuildings to comply with Public Resources Codes. I/we, the landowner(s), shall not hold the EDCFSC or our contracted service providers responsible for any damage to property or injury to persons that may arise out of the work performed or that may result from a wildland or other fire. I/we shall defend and hold EDCFSC, their designated contractor(s), their officers, boards and commissions, and members thereof, and their employees harmless against and from any and all claims, suits, losses, damages and liability for damages of every name, kind and description, including attorney’s fees and costs incurred, brought for, or on account of damage to property, or any economic or consequential losses which are claimed to, or in any way arise out of or are connected with EDCFSC’s service, operations, or performance hereunder, regardless of the existence or degree of fault or negligence on the part of the EDCFSC, or employees of any of these, except as expressly prohibited by statute.

By signing this agreement you affirm that you are both financially and physically unable to do the work yourself. All owner(s) listed on the deed must sign below

________________________________________ Date: _______________________

________________________________________ Date: _______________________

________________________________________ Date: _______________________

Contact Information and location of where work is to be done:

Name: ____________________________ Senior Disabled

Address: ____________________________ City: __________________ Zip: ________

Day Phone: __________________________ Evening Phone: __________________

Parcel Number: __________________________

Mail the completed form to: EDCFSC Senior and Disabled Assistance

P.O. Box 1011 Diamond Springs, CA 95619