



Membership Application

Plumas Underburn Cooperative



“Citizens helping citizens to promote healthy, resilient forests and communities through the use of good fire.”

Name: _____

Mailing Address: _____

City, State, Zip Code: _____

Phone: _____ Email address: _____

Physical Address: _____

City, State, Zip Code: _____

Our membership is a one time fee of \$50.

Please make out check to Plumas County Fire Safe Council.

Please return Membership Application and \$50 membership payment to:

Hannah Hepner

Plumas County Fire Safe Council

PO Box 1225

Quincy, CA 95971

Please check all that apply:

- I cannot assist with prescribed burns but wish to be a member to support PUC
- I would like to help with prescribed burns
- I am a landowner interested in doing prescribed burns on my property (see back for more information)
- I am interested in helping at a leadership level

How did you hear about this program?

- Firewise Community communication or event
- Living with Fire publication
- Plumas News ad
- Neighbor/word of mouth
- Social media (Facebook, Instagram, etc.)
- Other: _____

Membership fees and donations fund the procurement of new equipment to assist in managing your land.



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Prescribed Fire Costs

Expected costs for a landowner hosting PUC volunteers on a prescribed fire:

- Beverages and food for all volunteers
- Air Quality permit if burn is greater than 1 acre: \$79.60 +\$1.33 per acre
- Donation for volunteer fire department participation: \$250 per day suggested
- A burn boss chosen by the landowner: varying costs
- Donation to PUC: \$20 per acre
- Fuel used during burn day: varying costs

Burn projects will be prioritized based on participation by the landowner in previous PUC activities and how prepared their unit is.

All PUC burns will require:

- Basic burn plan (California Standardized Prescribed Fire Burn Plan recommended)
- Complete PUC Process
- Prepared unit
- Necessary permits
- Agency and neighbor outreach

As a host of a planned PUC prescribed burn, I have read and acknowledged the above requirements and recommended reimbursement rates.

Signature

Date