



## Ontario Municipal Fire Prevention Officers Association

---

### **2026 FIRE PREVENTION AND PUBLIC EDUCATION GRANT (\$1000.00)**

#### **How to Complete the Application**

Before filling out the application read the entire application. It may be useful to print a copy of the Application to refer to while completing the application. Special attention shall be made to applications that take into consideration public education initiatives such as, but not limited to: Safe cooking practices, home escape planning, fire safety for schools, and senior fire safety.

Name of Fire Department Applying:	
Address:	
Type of Fire Department (Career, Composite, Volunteer):	
Size of Fire Department:	
Name of Person Applying:	

**Applications must be received no later than July 13, 2026.**

Email completed application form with subject line 'Fire Prevention and Public Education Grant' to both of the following email addresses:

**Don Casey, LEL, C.E.T., CFPS**  
don.casey@mississauga.ca

**Taylor McDougall**  
tmcdougall@innisfil.ca

**Answer each of the following questions fully, giving as much detail as possible, attach separate sheets as necessary.**

1. Please describe your Fire Departments overall goal or mission statement.

2. What is the size of your annual budget for Fire Prevention and Public Education?

3. Project Description: Please provide a short description of the proposed project including main objective.

4. Rationale / Need: Describe why your project/event is viable, including steps or measures taken to ensure that your project/event falls within the scope of Fire Prevention and Public Education.

5. Project Beneficiaries: Who will benefit from your project or event and approximately how many individuals will benefit from this.

6. How will your Fire Department acknowledge (or plan to acknowledge) the OMFPOA if selected.

**Should your application be successful, please complete the information below as it will be used to make payments.**

**Payment Address:**

Name of Fire Department	
Street Address	
City	
Province	
Postal Code	

**Payment Organization:**

Payment Name of Fire Department	
Street Address	
City	
Province	
Postal Code	

**Payment Contact:**

Name of Fire Department Contact Person	
Position	
Phone Number (work)	
Phone Number (cell) optional	
Email address	

**This section has been provided should you require additional writing space.**

A large, empty rectangular box with a thin black border, occupying most of the page's width and height. It is intended for additional writing.