



Circle Oaks Homes Association

Mail to P.O. Box 4151, Napa, 94558
or put in COHA Box on Country Club Lane
or email to: theoffice@circleoaks.org

Documentation of Services-In-Kind Circle Oaks Homes Association Fire Safety Program

Your Name: _____

Address: _____
Address or Lot # where you did this work

Check what was done:

- Excess, overgrown or dead vegetation removed, brush clearing
- Dead tree or branches removed
- Limbing-up tree(s)
- Weed whacking, mowing
- Other fire safety activity: _____

Where was the work done:

- Cleared Vegetation from my own lot _____%
- Cleared Vegetation from adjacent greenbelt _____%

Date you did this work (month/year): ____/____.

Number of Hours you personally worked: _____ Hrs.

Did you report these hours on a Napa Firewise Chipping Request? Yes No

Did you pay someone else to do fire safety work? Yes No

What amount was paid? \$ _____

Please provide a copy of your receipt to the Homes Association

Attached Sorry, I have no receipt.

Thank You for your Help !