



STATE OF CALIFORNIA  
THE NATURAL RESOURCES AGENCY  
DEPARTMENT OF FORESTRY AND FIRE PROTECTION

AAMS/GSA PPMS SCREENER REQUEST FORM  
**PROPERTY SEARCH ONLY**  
FOR LOCAL COOPERATORS IN FEPP PROGRAM

PLEASE READ AND COMPLETE ONLY APPLICABLE FIELDS

NEW ☐

SCREENER ID (Update Only) ☐

DATE OF REQUEST:

LFC FEPP AGREEMENT #:  
(To be completed by State)

SCREENER INFORMATION - STEP 1

NAME (First, Last):

TITLE:

FIRE COOPERATOR NAME:

STREET ADDRESS (NO P.O. BOX):

MAILING ADDRESS (If different from above):

CITY AND STATE:

ZIP CODE:

TELEPHONE NUMBER (ex. (555)-555-5555):

CELL PHONE NUMBER (ex. (555)-555-5555):

EMAIL ADDRESS:

ACCESS LEVEL REQUESTED:

AAMS/GSA PPMS - PROPERTY SEARCH ONLY ☐

AUTHORIZING SIGNATURES - STEP 2

BY (Fire Chief or Authorizing Signature):

DATE SIGNED:

BY (State FEPP Coordinator):

DATE SIGNED:

THE SECTION BELOW IS FOR USE BY SACRAMENTO FEPP PROGRAM OFFICE AND THE USFS

GSA PPMS LOGIN INFORMATION:

LOGON ID:

TEMPORARY PASSWORD:

USDA FOREST SERVICE

BY (Forest Service Property Management Officer):

DATE SIGNED: