

AD-245 (09-11-95) U.S. DEPARTMENT OF AGRICULTURE REQUEST FOR COST-SHARES ST. & CO. & C/D 08 013 6 CONTROL NO. (F/Y & NO.) 96 0012

(AD-245 replaces ACP-245 and SIP-245)

Table with 7 columns: FARM NO., NAME AND ADDRESS, FARMLAND, PROGRAM CODE, FUND CODE, CONTRACT/LTA & ITEM NO., PRIMARY PURPOSE, OTHER FARMS. Includes farm details for Douglas R Spence in Berthoud, CO.

DESCRIPTION OF PRACTICE OBJECTIVE CONTROL EROSION PRACTICE LOCATION Part of NW1/4; 6-3N-69W

FOR USE BY THE APPROVING OFFICIAL

Table with 7 columns: Number, Practice Title, Extent Requested, Extent Approved, Rate, C/S Approved, I plan to start the practice. Includes handwritten 'Total: \$613' and 'I plan to complete the practice 08-30-97'.

CONSERVATION PLAN: Farm Plan By NRCS, Forest Plan By FS, Other Plan, PARTNERSHIP, Joint Venture

APPLICANTS REQUEST

I request cost-share assistance under the program to meet the objective described above. This practice would not be performed without Federal cost-sharing. If cost-sharing is approved for the practice requested, I agree to refund all or part of the funds paid to me as determined by the Approving Official...

SIGNATURE: [Signature] DATE: 1/19/96 Estimated \$ C/S Value 613 C/S Willing to Approve \$

APPROVAL ACTION The Approving Official approved the extent shown in BLOCK D above and the cost-shares shown in BLOCK F above for this practice.

FOR THE APPROVING OFFICIAL [Signature] DATE: 3/29/96 Practice Expiration Date

REMARKS

For SIP and FIP Only: I certify that I /do / do not own more 1000 acres of eligible forestland in the United States or any territory or possession of the U.S. SIGNATURE: [Signature] DATE: 1/19/96 Acres if more than 1,000 Date Waiver Approved



A. REFERRAL INFORMATION

1. Farm No. 1110	Name and Address DOUGLAS R SPENCE 4617 W COUNTY RD 2 BERTHOUD, CO 80513-8620	2. Telephone Number 303-772-9611	3. Contract Id.
Tract No. 9368		4. Practice to Begin 03-01-96	5. Referral Expires 03-01-96
6. Practice Location Part of NW1/4; 6-3N-69W		7. Needs Statement	

Practice Description		Extent Requested	Extent Needed
SIP4 Agroforestry estab/main/renovate (AS)		1.0	
FFW FARMSTEAD & FEEDLOT WINDBREAK	AC	.5	
MUL MULCHING - WEED BARRIER FABRIC	AC	.5	

The practices shown in item A8 with the units shown in item A10 are needed and practical for the farm.

11. Signature \_\_\_\_\_ Date \_\_\_\_\_

B. GENERAL INFORMATION

1. Primary Purpose G	2. Program SIP	3. Program Practice No. SIP4	4. VC/SL N	5. Fund Code	6. Estimated Total Cost	7. Est. Cost-Share 613
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8. Practice Extents Number	9. Land Capability Class & Subclass	10. Soil Loss Tolerance	11. Land Cover/Use Before	11. Land Cover/Use After	12. Technical Practices Applied		
					Technical Practice a	Cost-Shared? b	Units Planned/ Applied c

C. EROSION CONTROL

1. Sheet & Rill Erosion	a. Before (Tons/Ac./Yr.)	b. After (Tons/Ac./Yr.)	c. Acres to which Rate Applies			
2. Wind Erosion	a. Before (Tons/Ac./Yr.)	b. After (Tons/Ac./Yr.)	c. Acres to which Rate Applies			
3. Other Erosion	a. Problem Type	b. Before (Tons/Yr.)	c. After (Tons/Yr.)	d. Acres Affected		
4. Range Condition	a. Condition Code Before	b. Condition Code After	c. Trend Cond. Before	d. Trend. Cond. After	13. Endangered Species	14. Hydrologic Unit Code

D. WATER CONSERVATION

1. Irrigation Water Conservation	a. Irrigation Situation	b. Water Applied (Ac.-in./Ac.) Before After	c. System Efficiency (%) Before After	d. Water Cons. Acres
2. Increased Water Storage	a. Primary Use	b. Capacity (Acre-Inches) Before After		3. Soil Moisture Measures?

E. WATER QUALITY

1. Problem Type
2. Type of Water Body Treated/Protected
3. Pollution Severity

F. WOOD PRODUCTION

1. Site Description a. Site Index	b. Poten. Prod.	2. Stand Condition a. Forest Cover Before After	b. Stocking Level Before After	3. Site Preparation a. Acres	b. Cost-Share	4. Trees Pr/Ac
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G. OTHER ASSISTANCE

Purpose \_\_\_\_\_

H. ACTUAL COST AND PERFORMANCE DATA

1. Total Install. Cost	2. Cost-Share	3. Date Performed
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I. PERFORMANCE REPORT

This practice has been performed to the extent shown in item B12c and meets program requirements. If the practice does not meet practice specifications or if additional work is required, explain in item I.

Signature \_\_\_\_\_ Date \_\_\_\_\_



AD-245 (09-11-95) U.S. DEPARTMENT OF AGRICULTURE REQUEST FOR COST-SHARES ST. & CO. & C/D 08 013 6 CONTROL NO. (F/Y & NO.) 96 0011

(AD-245 replaces ACP-245 and SIP-245)

FARM NO. 1110	NAME AND ADDRESS DOUGLAS R SPENCE 4617 W COUNTY RD 2 BERTHOUD, CO 80513-8620	FARMLAND 30.0	PROGRAM CODE SIP	FUND CODE	CONTRACT/LTA & ITEM NO.	PRIMARY PURPOSE  OTHER ASSISTANCE	OTHER FARMS / /YES /X/No
TRACT No. 9368		CROPLAND					
Telephone No. 303-772-9611							

DESCRIPTION OF PRACTICE OBJECTIVE  
CONTROL WILDFIRE HAZARD AND IMPROVE STAND  
PRACTICE LOCATION Part of NW1/4; 6-3N-69W

FOR USE BY THE APPROVING OFFICIAL

Number A	Practice Title B	Extent Requested C	Extent Approved D	Rate E	C/S Approved F	I plan to start the practice G	I plan to complete the practice H
SIP8	Wildlife habitat enhancement (Ac)	20.0				03-01-96	
PB1	PRESCRIBED BURNING	20.0		30.000	600		08-30-97

CONSERVATION PLAN: Farm Plan By NROC / /Yes /X/No Forest Plan By FS / /Yes /X/No Other Plan / /Yes /X/No PARTNERSHIP / /Yes /X/No Joint Venture / /Yes /X/No

APPLICANTS REQUEST

I request cost-share assistance under the program to meet the objective described above. This practice would not be performed without Federal cost-sharing. If cost-sharing is approved for the practice requested, I agree to refund all or part of the funds paid to me as determined by the Approving Official, if, before expiration of the specified practice lifespan I, (a) destroy the approved practice, or (b) voluntarily relinquish control or title to the land on which the approved practice has been established and the new owner and/or operator of the land does not agree in writing to properly maintain the practice for the remainder of its lifespan. I have not yet started this practice, and except for ECP requests, I understand that if I begin the practice before receiving written approval I may be denied funding. I authorize a representative of USDA to have access to the practice site area. I understand that form "CONTINUATION FOR AD-245" is by reference incorporated herein.

SIGNATURE: *Douglas R Spence* DATE: 1/19/96 Estimated \$ C/S Value 600 C/S Willing to Approve \$

APPROVAL ACTION The Approving Official approved the extent shown in BLOCK D above and the cost-shares shown in BLOCK F above for this practice.

FOR THE APPROVING OFFICIAL: *Douglas R Spence* DATE: 1/20/96 Practice Expiration Date

REMARKS

X For SIP and FIP Only: I certify that I / /do / /do not own more than 1000 acres of eligible forestland in the United States or any territory or possession of the U.S. Acres if more than 1,000 Date Waiver Approved

SIGNATURE: *Douglas R Spence* DATE: 1/19/96

PARTICIPATION IN USDA PROGRAMS IS OPEN TO ALL ELIGIBLE APPLICANTS WITHOUT REGARD TO RACE, COLOR, RELIGION, NATIONAL ORIGIN, AGE, SEX, MARITAL STATUS, OR DISABILITY.



**A. REFERRAL INFORMATION**

1. Farm No. 1110	Name and Address DOUGLAS R SPENCE 4617 W COUNTY RD 2 BERTHOUD, CO 80513-8620	2. Telephone Number 303-772-9611	3. Contract Id.
Tract No. 9368		4. Practice to Begin 03-01-96	5. Referral Expires 03-01-96
6. Practice Location Part of NW1/4; 6-3N-69W		7. Needs Statement <i>Needs to burn 20 ac for wildlife habitat improvement</i>	

Practice Description	Extent Requested	Extent Needed
SIP8 Wildlife habitat enhancement (Ac)	20.0	20
PB1 PRESCRIBED BURNING	20.0	

The practices shown in item A8 with the units shown in item A10 are needed and practical for the farm.

11. Signature: *Richard C. Gray* Date:

**B. GENERAL INFORMATION**

1. Primary Purpose G	2. Program SIP	3. Program Practice No. SIP8	4. VC/SL N	5. Fund Code	6. Estimated Total Cost 600	7. Est. Cost-Share 600
8. Practice Extents Number Ac. Served/Treated 20	9. Land Capability Class & Subclass 2w	10. Soil Loss Tolerance 3	11. Land Cover/Use Before After 5 15	12. Technical Practices Applied 338		

**C. EROSION CONTROL**

1. Sheet & Rill Erosion	a. Before (Tons/Ac./Yr.)	b. After (Tons/Ac./Yr.)	c. Acres to which Rate Applies
2. Wind Erosion	a. Before (Tons/Ac./Yr.)	b. After (Tons/Ac./Yr.)	c. Acres to which Rate Applies
3. Other Erosion	a. Problem Type	b. Before (Tons/Yr.)	c. After (Tons/Yr.)
Condition	Before	After	d. Trend Cond. Before After

**D. WATER CONSERVATION**

1. Irrigation Water Conservation	a. Irrigation Situation	b. Water Applied (Ac.-in./Ac.) Before After	c. System Efficiency (%) Before After	d. Water Cons. Acres
2. Increased Water Storage	a. Primary Use	b. Capacity (Acre-Inches) Before After	3. Soil Moisture Measures?	

**E. WATER QUALITY**

1. Problem Type
2. Type of Water Body Treated/Protected
3. Pollution Severity

**F. WOOD PRODUCTION**

1. Site Description a. Site Index 999	b. Pot. Prod.	2. Stand Condition a. Forest Cover Before After	b. Stocking Level Before After	3. Site Preparation a. Acres	b. Cost-Share	4. Trees Pr/Ac
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**G. OTHER ASSISTANCE**

Purpose: *1*

**H. ACTUAL COST AND PERFORMANCE DATA**

**I. PERFORMANCE REPORT**

1. Total Install. Cost	2. Cost-Share	3. Date Performed
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This practice has been performed to the extent shown in item B12c and meets program requirements. If the practice does not meet practice specifications or if additional work is required, explain in item I.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_





Boulder District  
936 Lefthand Canyon Drive  
Boulder, Colorado 80302  
(303) 442-0428

May 23, 1996

Douglas R. Spence  
4617 County Road#2  
Berthoud, CO 80513

Dear Mr. Spence:

ADDITION TO STEWARDSHIP PLAN  
NW 1/4, SECTION 6, T3N, R69W, BOULDER COUNTY

The additional acreage which you recently purchased will fit into and enhance your overall stewardship operations. This pasture area will be covered by recommendation #3 of your current Stewardship Plan. It will be worked into the currently planned pasture improvement and allow for a better grazing management plan.

If you have any questions, please give me a call.

Sincerely,

A handwritten signature in cursive script that reads "Richard C. Gray".

Richard Gray  
Forester

/mm