



COLORADO'S  
**FLEP** FOREST LAND  
ENHANCEMENT PROGRAM  
APPLICATION FOR COST-SHARE

PROJECT NUMBER: \_\_\_\_\_

NAME: MATT GLASCOTT - GLASCOTT LAND TREE FARM  
(For Official Use Only)

MAILING ADDRESS: P.O. Box 6

City: Bellvue State: CO

Zipcode: 80512

TELEPHONE NO: 970-214 2411

PROJECT ADDRESS/LEGAL DESCRIPTION: 2530 W HARE ROCK

PRACTICES TO BE COMPLETED BY: owner/contractor - 9-15-07

Practice No. & Component Title	Quantity Requested	Quantity Approved	Maximum C/S Amount	C/S Amount Requested	C/S Amount Approved
<u>3179-6661</u>	<u>4 Acres</u>		<u>2000</u>	<u>2000</u>	
<u>9-666-302</u>			<u>1200</u>	<u>1200</u>	

Total: 3200

Request for cost-share assistance under this program is to meet the objective stated in the management plan. If cost-sharing is approved for the practice requested, I agree to cover expenses at the time of implementation, knowing I will be receiving cost-share funds not exceeding 50% of actual cost. I understand that I will not be reimbursed for any expenses incurred prior to approval of my application. Work must be completed according to approved plan and application, and must meet the standard set for each component. Practices must be maintained for a minimum of 10 years. There are no partial payments.

LANDOWNER SIGNATURE: [Signature]

DATE: 5-24-07

CSFS FIELD REVIEW SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Additional USFWS guidelines addressed)

C/S APPROVED: [Signature] AMOUNT: \$ 1000<sup>00</sup> DATE: 6/8/07

Program eligibility is without regard to race, color, religion, national origin, age, gender, sexual orientation, veteran status or disability. For more information contact your local Colorado State Forest Service District Office.

