



Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input type="checkbox"/>
Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	<input type="checkbox"/>
Stevens Fuels Treatment Funds	<input type="checkbox"/>
Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	<input type="checkbox"/>
Emergency Supplemental Funds (a.k.a.: ESF)	<input checked="" type="checkbox"/>

☐ Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/>

Name: Ron Smart

Address: 181 Sawmill Road
Loveland, CO 80537

The above named has submitted a project application that has been reviewed and approved by the Colorado State Forest Service for funding from Federal Assistance.

Grant Number: 5308420 Cooperator Match: \$ 1,000

Approved Funding: \$ 1,880⁰⁰ Total Project: \$ 2,880⁰⁰

CSFS Account Number: 5308420-6693-FL Amount of Payment: \$ 1,880⁰⁰

Circle one: 1st Payment 2nd Payment 3rd Payment Final Payment

Approved by _____ Date: _____
 (Program manager signature)

**EMERGENCY SUPPLEMENTAL FUNDS
LANDOWNER ASSISTANCE PROGRAMS
ACCOMPLISHMENT REPORT FOR REIMBURSEMENT (Page 1)**

Project No. 530 8420-12

(For Official Use Only-

No. from original application)

Applicant name (please print): Ron and Kim Smart

	Total Contracted Services¹	Total Landowner Services²	Totals
Labor Cost (Actual)	2,880 ⁰⁰	—	A Labor Cost= 2,880 ⁰⁰
Operating Exp ^{3,*} (Actual)			B Oper. Exp.= —
Project Cost			C Total Project (A+B) = 2,880 ⁰⁰
			Amount Originally Approved = 1,880 ⁰⁰
			Amount to be Reimbursed not to exceed \$470 Per Acre 1,880 ⁰⁰

¹ Any contracted services where payment was made for services.² Use up to \$ 20.25/hour for Landowner time. This is the maximum allowable.³ Equipment rental, supplies, etc. needed to complete project. (Tools and Equipment purchases are not reimbursable.)⁴ Reimbursement amount cannot exceed amount approved. Requests for partial payments will be considered on a case by case basis.⁵ Reimbursement amount cannot exceed \$470/acres for Emergency Supplemental Funds.

* Attach receipts, Cost Documentation Form D-ES (contractor costs, your time ledger, gas, oil, etc). Keep copies for your files.

Landowner Signature: Ron A. SmartDate: 05/07/10

All expenses are true and accurate and all cost share is true and accurate.

Mailing Address: 181 Sawmill RoadCity: Love landCounty: Larimer State: CO Zip: 80537Phone: 970.667.3591

Practice certified by:

CSFS forester

Payment Approval:

CSFS program manager

Amount:

Date:

Return this form, along with your completed Cost Documentation Form to your local **Colorado State Forest Service District Office**. Retain documentation such as receipts and payment for six (6) years. The IRS considers reimbursable funds as ordinary income. Please consult your tax advisor.

01/19/10



Form A-ES

**EMERGENCY SUPPLEMENTAL FUNDS
LANDOWNER ASSISTANCE PROGRAMS
APPLICATION****PROJECT NUMBER:** 5308420-12

(For Official Use Only)

NAME: Ron and Kim Smart**MAILING ADDRESS:** 181 Sawmill Road**City:** Loveland**State:** CO**Zip code:** 80537**TELEPHONE NO:** 970-667-3591/970-290-2411**PROJECT ADDRESS/LEGAL DESCRIPTION:****PRACTICES TO BE COMPLETED BY:** 3/31/2011

Date

*Landowner and CSFS forester:**CSFS forester:*

Practice No. & Component Title	Quantity Requested	Quantity Approved
LOA 9- Fire risk reduction	\$1,880	\$1,880
		Total: \$1,880

Request for financial assistance under the Emergency Supplemental LOA program is to meet the objective stated in the management plan. I will not receive more than the actual cost up to \$470 per acre. **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. Requests for partial payments will be approved on a case by case basis.

LANDOWNER SIGNATURE:**DATE:** 03/27/10*To be completed by CSFS forester:***CSFS FIELD REVIEW SIGNATURE:****DATE:**

(Additional USFWS guidelines addressed)

PROGRAM:**ESF:****Funding Allocated:****AMOUNT:\$****DATE:***CSFS District Forester*

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.

01/19/10

Colorado State Forest Service

Emergency Supplemental

2010 Grant Application

DISTRICT'S: Please Complete

District Submitting Project:	
Forester Submitting Project:	
District Priority Number:	
Date Submitted:	
FOR REVIEWER'S USE ONLY:	
Rating:	

1	Applicant Information	
	Applicant:	Ron & Kim Smart
	Contact Person:	Donna Moore
	Address:	181 Sawmill Road
	City/Zip Code:	Loveland, CO 80537
	Phone (Work/Cell):	970.667.3591 / 970.290.2411
	Email:	smartkiro@aol.com
	Fax:	

2	Community At Risk Information			
	Name of Project:		Smart Mitigation Project	
	Community Name(s):		Pole Hill Road Community Wildfire Protection Group	
	County:	Larimer	Congressional District:	4th
	Latitude (decimal degrees):	W40.38	Longitude (decimal degrees):	N105.21.00
	Threat Description (check all that apply)			
	Homes:	<input checked="" type="checkbox"/>	Number of:	62
	Businesses:	<input type="checkbox"/>	Number of:	
Watersheds:	<input checked="" type="checkbox"/>	Number of:		
Other (Describe):				

3	Requested Grant Amount / Project Description	
	All information for the project must fit into the space provided below. The review committee will not consider attachments.	
	Dollar Amount Requested May Not Exceed \$470 x Number of Acres Proposed For Treatment	
	Dollar Amount Requested	\$1,880.00
	Will this Project be conducted as a Pass-Through Grant? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	Provide a brief overview of the project and the project area. (If applying for a fuels reduction project, identify vegetation types)	
<p>Ponderosa pines, some Doug fir, mountain mahogany, alpine currant, and native grasses north and east of the house need to be thinned and trimmed to mitigate fire danger below the house and barn.</p> <p>A fuel break will be cut along the northwest easement this spring under an Anchor Point Group project. This new project would greatly enhance that work and continue the landowners' previous efforts to improve the protection of this and surrounding property.</p>		

Scope of Work / Project Timeline

All information for the project must fit into the space provided below. Attachments will not be considered by the review committee.

Provide a brief scope of work that clearly describes how grant funds will be spent. (This should be more specific than the project description)

A contractor will be hired to do most of the work with any firewood to be left for the homeowners. Chipping will be included in the contractor's fees.

Describe all planned long-term maintenance (grant funded or other).

This property has been occupied since the buildings were erected in 1990 and has had ongoing limbing and tree removal done with landowner labor since that time. It has always been a goal to provide for fire safety and proper forest maintenance.

What is the duration of this project? (check one) ☒ 1 Year ☐ 2 Years ☐ 3 Years ☐ 4 Years

Is this a continuing project from previous year/s? (check one) ☒ Yes ☐ No

Provide a timeline for the project

This work would begin as soon as possible and continue until completed. Maintenance would continue, as needed. If necessary, the work will be extended upon recommendation of foresters. Completing this particular improvement will lead to future work.

Interagency Collaboration

Specify the private, local, tribal, county, state, federal and/or non-governmental (501c3) organizations that will contribute to or participate in the completion of this project. Describe briefly the contributions each partner will make (i.e. – donating time/equipment, funding, etc.).

Community work before and since the PHRCWPG Plan has included cooperation with the CSFS, LCES, and USFS. USFS work is being done on land just west of Quillan Gulch Road in the CWPP area. Western Area Power Administration has begun clearing vegetation under transmission lines in the area. Anchor Point Group is beginning a project on Sawmill Road and Saddle Notch Road (north from Pole Hill Road) this spring. Many local landowners, including several members of Larimer County Tree Farm Association, work continually toward the long-term health and safety of the forest. Anchor Point Group will be working adjacent to the proposed work. Other landowners south and west of the property have and continue to work on wildfire and healthy forest concerns.

Community Wildfire Protection Plan (CWPP)

Does this community have a wildfire protection plan that follows the Healthy Forest Restoration Act CWPP guidelines? (check one) ☒ yes ☐ no

Is this project part of the plan? (check one) ☒ yes ☐ no

6	Project Category (check all that apply and answer related questions)			
	Hazard Fuels Reduction <input checked="" type="checkbox"/> Other Forest Management Treatment <input type="checkbox"/>			
	Number of acres to be treated: 4		Estimated cost per acre: \$1,880	
	Project Type (check all that apply)			
	Defensible Space	<input checked="" type="checkbox"/>	Thinning w/o Product	<input type="checkbox"/>
	Fuelbreak	<input checked="" type="checkbox"/>	Mastication	<input type="checkbox"/>
	Thinning w/ Product	<input checked="" type="checkbox"/>	Other	<input type="checkbox"/>

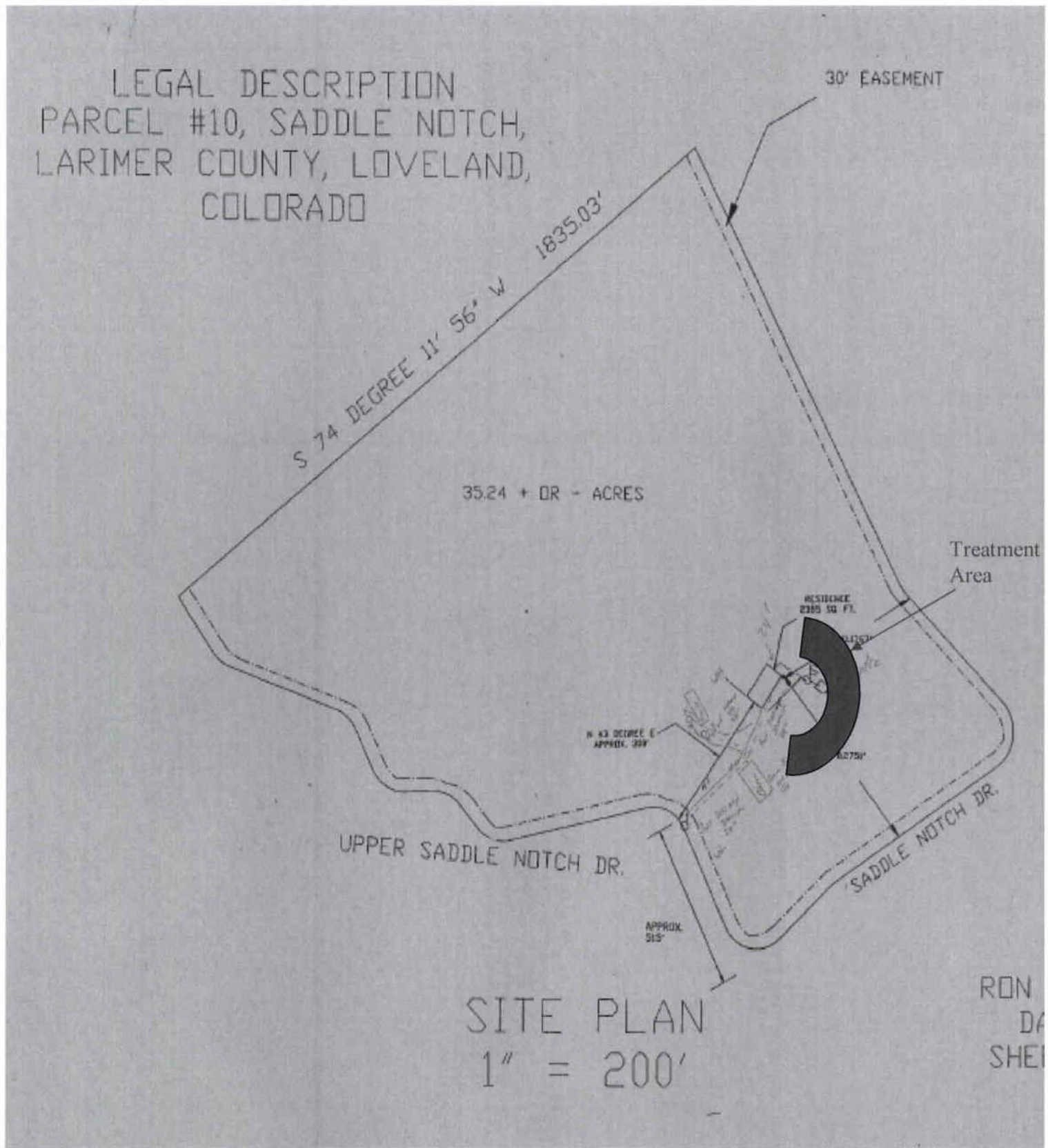
7	Total Project Expense (Pass Through)		
	<i>Please fill all fields</i>	Grant Share (\$ Amount Requested)	TOTAL
	Contractual Services:	\$1,880	\$ 1,880
	TOTAL:	\$0	\$ 1,880

Grant funding may only be used for Contractual Service.

8	Total Project Expense (Non-Pass Through)		
	<i>Please fill all fields</i>	Grant Share (\$ Amount Requested)	TOTAL
	Contractual Services:		\$ 0
	Indirect Costs:		\$ 0
	TOTAL:	\$0	\$ 0

Grant funding may only be used for Contractual Service and Indirect.

Attach Project Map Showing Specific Treatment Areas





Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input type="checkbox"/>
Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	<input type="checkbox"/>
Stevens Fuels Treatment Funds	<input type="checkbox"/>
Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	<input type="checkbox"/>
Emergency Supplemental Funds (a.k.a.: ESF)	<input checked="" type="checkbox"/>

☒ Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/>

Name: Bruce Contini

Address: 9116 Cypress Lane
Louisville, CO 80027
~

Approved for Payment
C.S.F.S.
1030588
10-29-10
ke

The above named has submitted a project application that has been reviewed and approved by the Colorado State Forest Service for funding from Federal Assistance.

Grant Number: 5308420-13-FC Cooperator Match: \$ 872.¹² ~

Approved Funding: \$ 1880 ~ Total Project: \$ 2752.¹² ~

CSFS Account Number: 5308420 • 6693 ~ Amount of Payment: \$ 1880.¹⁰ ~
'09 SUP HAZ FUELS FR FC

Circle one: 1st Payment 2nd Payment 3rd Payment Final Payment ~

Approved by 
 (Program manager signature)

Date: 10/25/10

**EMERGENCY SUPPLEMENTAL FUNDS
LANDOWNER ASSISTANCE PROGRAMS
COST DOCUMENTATION**

I have incurred the following expenses for completion of the LOA Program practice for which I have been funded. These expenses are itemized below. Labor rate to be used if landowner is doing the work is \$20.25/hr. Separate expenses by component (activity). Attach receipts.

Landowner Signature
Bruce R. Contini

Date	By Whom:	Activity/Expense:	Hours	Expenses
5/19/10	Contini	Fire Mitigation/NE corner (fallen cottonwood tree) (2)	6	121.50
5/19/10	7-11	Fuel		2.97
5/22/10	Contini	Fire Mitigation/NE corner (dogs tail/thin) (2)	5	101.25
5/27/10	Contini	Fire Mitigation (complete NE corner to driveway) (3)	10	202.50
6/1/10	Lowes	Buy chain oil and grease, (replace 2-chains*)		14.68
6/16/10	Contini	Fire Mitigation (North property line to fire break) (2)	6	121.50
7/14/10	Contini	Fire Mitigation (N property line to outcropping) (2)	8	162.00
7/14/10	Lowes	Replace 20" bar for Husky chainsaw		32.32 *
7/28/10	Contini	Fire Mitigation (North property line to fire break) (1)	3.5	70.88
8/11/10	Contini	Fire Mitigation (chip slash piles) (3)	24	486.00
8/12/10	Contini	Fire Mitigation (chip slash piles) (3)	18	364.50
8/12/10	Grand Sta.	Rental of chipper x 2 days		440.96
8/26/10	Contini	Infestation control (removal 2 beetle infected trees) (1)	2	40.50
9/01/10	Lowes	Replace 1-chain		25.66 *
9/11/10	Contini	Fire Mitigation (N property line to outcropping) (1)	2	40.50
9/15/10	AAA	Chains sharpening (8 chains)		84.00
9/16/10	Contini	Fire Mitigation and Mistletoe management (1)	2	40.50
9/25/10	Contini	Fire Mitigation (removal 1 beetle infested tree) (3)	18	364.50
9/30/10	Contini	Fire Mitigation (N property line between outcroppings and fire break) (1)	2	40.50
6/09/10	AAA	Chain sharpening (5 chains)		50.00
7/3/10	7-11	Fuel		2.88
			TOTAL	2,752.12
		() Number of people working		
		* Cost not included		

Colorado State Forest Service

Emergency Supplemental

2010 Grant Application

13

DISTRICT'S: Please Complete	
District Submitting Project:	
Forester Submitting Project:	
District Priority Number:	
Date Submitted:	
FOR REVIEWER'S USE ONLY:	
Rating:	

Applicant Information	
Applicant:	Bruce R. Contini
Contact Person:	Bruce R. Contini or Donna Moore
Address:	916 Cypress Lane 212 Sawmill Road
City/Zip Code:	Louisville, CO 80027 Loveland, CO 80537
Phone (Work/Cell):	303/665-5749 970/669-9844
Email:	brucecontini@gmail.com don2ran@lpbroadband.net
Fax:	

Community At Risk Information	
Name of Project:	Saddle Notch Ridge, 1104 Skinner Gulch Road
Community Name(s):	Pole Hill Road Community Wildfire Protection Group
County:	Larimer
Latitude (decimal degrees):	40.383
Congressional District:	4th
Longitude (decimal degrees):	105.300
Threat Description (check all that apply)	
Homes:	<input checked="" type="checkbox"/> Number of: 62
Businesses:	<input type="checkbox"/> Number of:
Watersheds:	<input checked="" type="checkbox"/> Number of: 1+
Infrastructure:	<input checked="" type="checkbox"/> Estimated value of:
Economic Viability:	<input type="checkbox"/> Estimated value of:
Historic Structures:	<input checked="" type="checkbox"/> Number of:
Other (Describe):	

Requested Grant Amount / Project Description	
All information for the project must fit into the space provided below. The review committee will not consider attachments.	
Dollar Amount Requested May Not Exceed \$470 x Number of Acres Proposed For Treatment	
Dollar Amount Requested	\$2,800 1,880
Will this Project be conducted as a Pass-Through Grant?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Provide a brief overview of the project and the project area. (If applying for a fuels reduction project, identify vegetation types)	
45 acres in Section 24, Township 5 North, Range 71 West, Larimer County, CO. Fire mitigation/fuel reduction by opening dense pockets of Ponderosa pine and understory currant and various grass species. Continued control of mistletoe. Harvesting wood products.	

Scope of Work / Project Timeline

All information for the project must fit into the space provided below. Attachments will not be considered by the review committee.

Provide a brief scope of work that clearly describes how grant funds will be spent. *(This should be more specific than the project description)*

- 4 Provide a fuelbreak, as well as room for a stage area for timber harvest. Fire mitigation thinning, chipping for managing slash disposal. Purchase of equipment fuel, oil, etc. Continue removal of mistletoe trees and any MPB trees.

Describe all planned long-term maintenance (grant funded or other).

Continue to improve and maintain forest health through insect, disease, and fire hazard reduction on the property.

What is the duration of this project? (check one) ☒ 1 Year ☐ 2 Years ☐ 3Years ☐ 4 Years

Is this a continuing project from previous year/s? (check one) ☐ Yes ☐ No

Provide a timeline for the project

Expect 2-4 years to complete work on southern 5-10 acre area. An ongoing project to continue through full 45 acres.

Interagency Collaboration

Specify the private, local, tribal, county, state, federal and/or non-governmental (501c3) organizations that will contribute to or participate in the completion of this project. Describe briefly the contributions each partner will make (i.e. – donating time/equipment, funding, etc.).

- 5 Community work, before and since the PHRCWPG plan, has included cooperation with the CSFS, LCES, and USFS. USFS work is being done on land just west of Quillan Gulch Road in the CWPP area. Western Area Power Admin. has begun clearing vegetation under transmission lines in the area. Anchor Point Group is beginning a project on Sawmill Road and Saddle Notch Road (north from Pole Hill Road) this spring. Guidance and work from and with all agencies will continue, even past the period of this grant.

Community Wildfire Protection Plan (CWPP)

Does this community have a wildfire protection plan that follows the Healthy Forest Restoration Act CWPP guidelines? (check one) ☒ yes ☐ no

Is this project part of the plan? (check one) ☒ yes ☐ no

6	Project Category (check all that apply and answer related questions)			
	Hazard Fuels Reduction X Other Forest Management Treatment X			
	Number of acres to be treated:	4	Estimated cost per acre:	\$470
	Project Type (check all that apply)			
	Defensible Space	X	Thinning w/o Product	<input type="checkbox"/>
	Fuelbreak	X	Mastication	<input type="checkbox"/>
	Thinning w/ Product	X	Other	<input type="checkbox"/>

7	Total Project Expense (Pass Through)		
	<i>Please fill all fields</i>	Grant Share (\$ Amount Requested)	TOTAL
	Contractual Services:	\$1,880	\$ 1,880
	TOTAL:	\$1,880	\$ \$1,880

Grant funding may only be used for Contractual Service.

8	Total Project Expense (Non-Pass Through)		
	<i>Please fill all fields</i>	Grant Share (\$ Amount Requested)	TOTAL
	Contractual Services:		\$ 0
	Indirect Costs:		\$ 0
	TOTAL:	\$0	\$ 0

Grant funding may only be used for Contractual Service and Indirect.

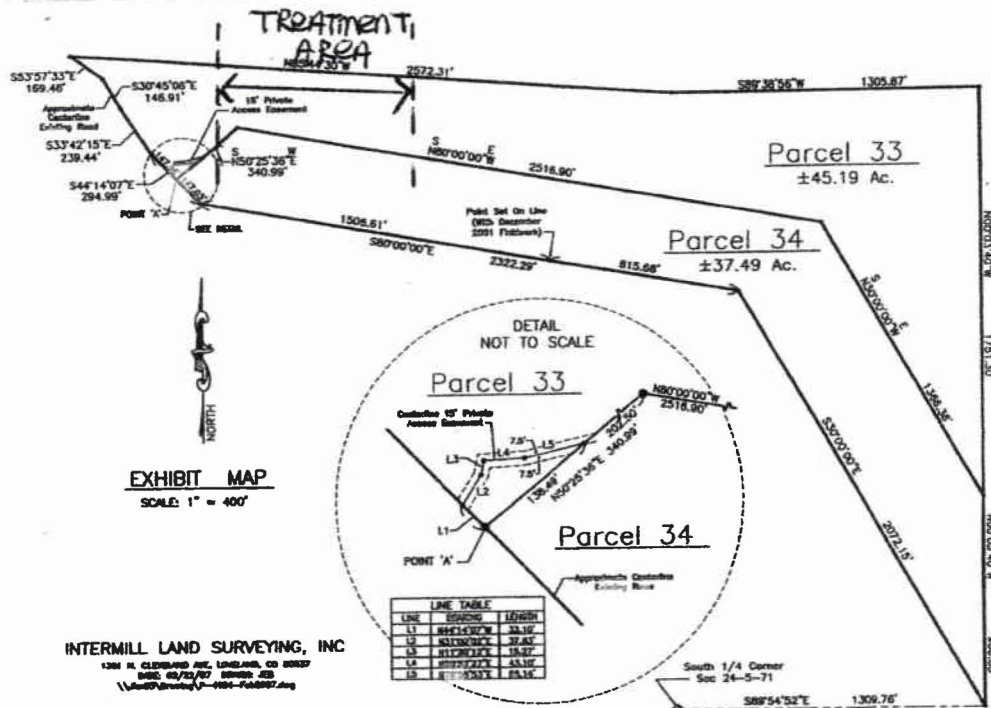
Attach Project Map Showing Specific Treatment Areas

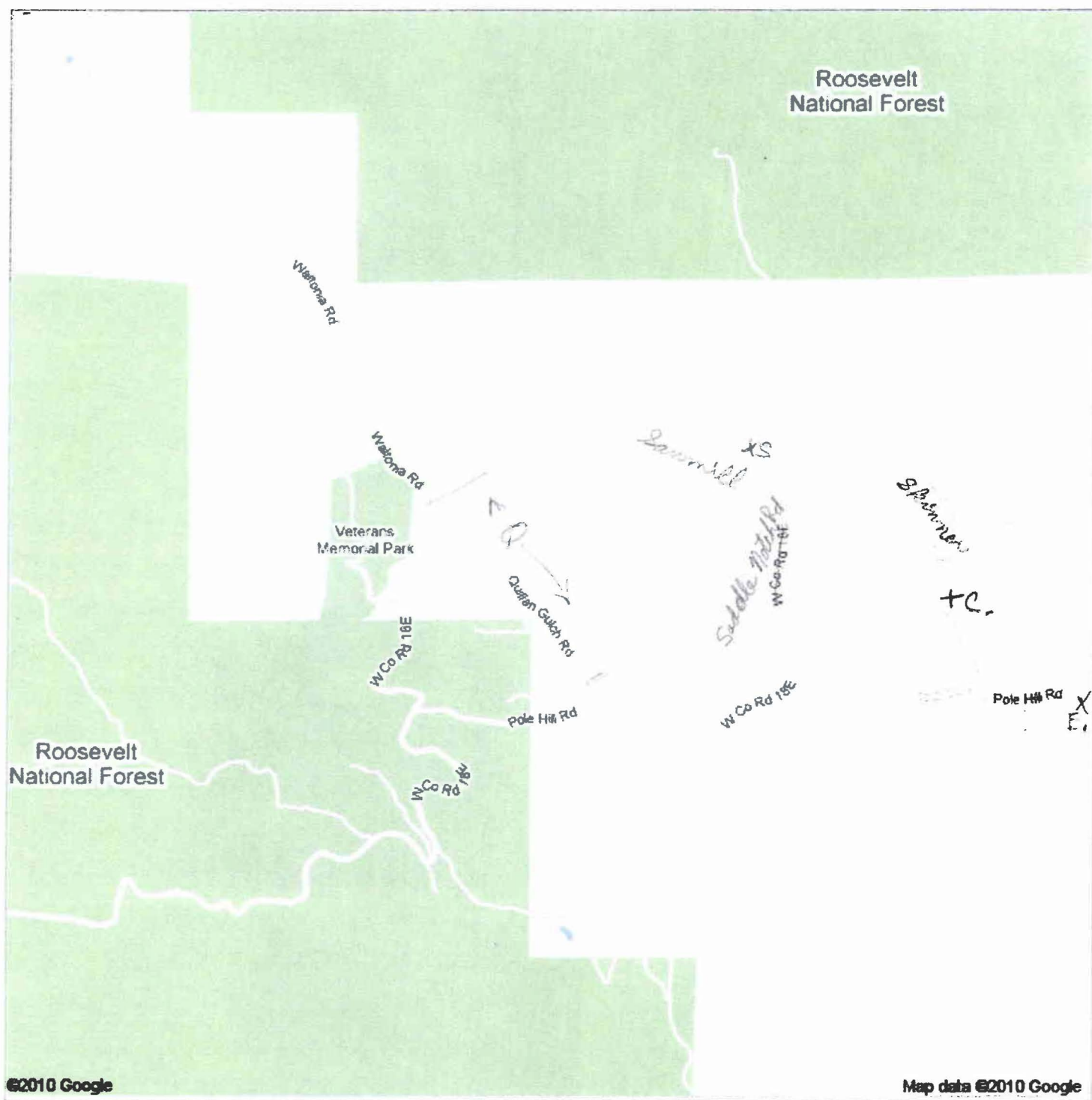
Proc. Continues FS Grant map

	<i>all fields</i>	(\$ Amount Requested)	TOTAL
8			
	Contractual Services:		\$ 0
	Indirect Costs:		\$ 0
	TOTAL:	\$0	\$ 0

Grant funding may only be used for Contractual Service and Indirect.

Attach Project Map Showing Specific Treatment Areas





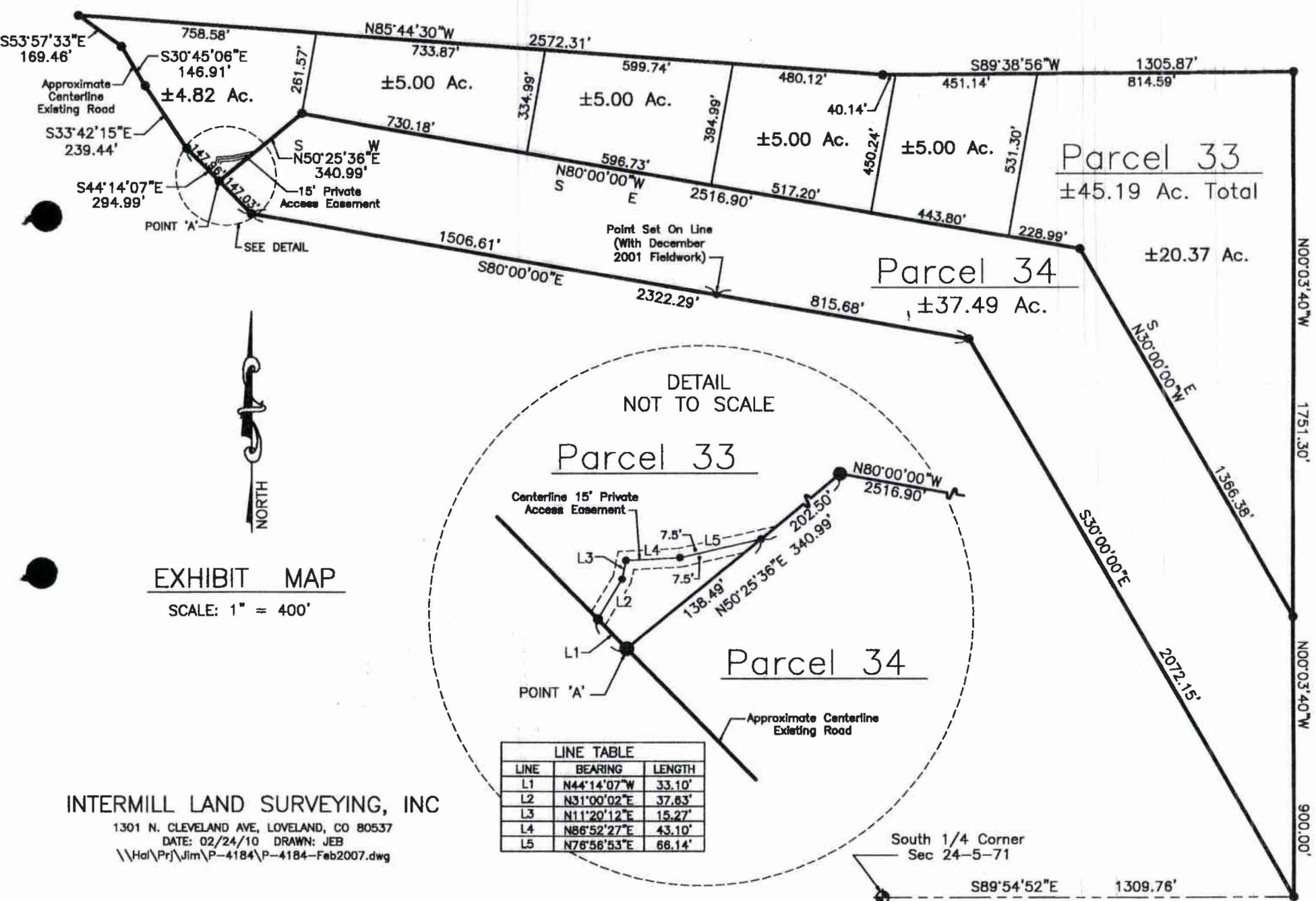


EXHIBIT MAP

SCALE: 1" = 400'

INTERMILL LAND SURVEYING, INC

1301 N. CLEVELAND AVE, LOVELAND, CO 80537

DATE: 02/24/10 DRAWN: JEB

\\Hal\Prj\Jlm\P-4184\P-4184-Feb2007.dwg



Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Bureau of Land Management Task Order Program	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Forest Land Enhancement Program (a.k.a.: FLEP)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input type="checkbox"/>
Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	<input type="checkbox"/>
Stevens Fuels Treatment Funds	<input type="checkbox"/>
Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	<input type="checkbox"/>
Emergency Supplemental Funds (a.k.a.: ESF)	<input checked="" type="checkbox"/>

☐ Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/>

Name: Donna Moore

Address: 212 Sawmill Road

Loveland, CO 80537

The above named has submitted a project application that has been reviewed and approved by the Colorado State Forest Service for funding from Federal Assistance.

Grant Number: 5308420

Approved Funding: \$940.⁰⁰

Total Project: \$1,223.⁵⁰

CSFS Account Number: 5308420-6643-FC Amount of Payment: \$940.⁰⁰

Circle one: 1st Payment 2nd Payment 3rd Payment Final Payment

Approved by _____
(Program manager signature)

Date: _____

**EMERGENCY SUPPLEMENTAL FUNDS
LANDOWNER ASSISTANCE PROGRAMS
ACCOMPLISHMENT REPORT FOR REIMBURSEMENT (Page 1)**

Project No. 5308420(For Official Use Only-
No. from original application)Applicant name (please print): DONNA MOORE (EDMONDS)

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	<u>\$940</u>	<u>14 hrs. @ \$20.25</u> <u>\$283.50</u>	A Labor Cost= <u>\$940 + 283.50 = \$1,223.50</u>
Operating Exp ^{3,*} (Actual)	<u>—</u>	<u>—</u>	B Oper. Exp.= <u>—</u>
Project Cost	<u>\$940</u>		C Total Project (A+B) = <u>\$940 \$1,223.50</u>
			Amount Originally Approved = <u>\$940</u>
			Amount to be Reimbursed not to exceed \$470 Per Acre <u>\$940</u>

¹ Any contracted services where payment was made for services.² Use up to \$ 20.25/hour for Landowner time. This is the maximum allowable.³ Equipment rental, supplies, etc. needed to complete project. (Tools and Equipment purchases are not reimbursable.)⁴ Reimbursement amount cannot exceed amount approved. Requests for partial payments will be considered on a case by case basis.⁵ Reimbursement amount cannot exceed \$470/acres for Emergency Supplemental Funds.

* Attach receipts, Cost Documentation Form D-ES (contractor costs, your time ledger, gas, oil, etc). Keep copies for your files.

Landowner Signature: Jerry Edmonds/Donna MooreDate: 4/13/10 (Ck. to Donna Moore)

All expenses are true and accurate and all cost share is true and accurate.

Mailing Address: 212 Sawmill RoadCity: LovelandCounty: Larimer State: CO Zip: 80537Phone: 970/669-9844Practice certified by: Dan Chilly
CSFS foresterPayment Approval: _____ Amount: _____ Date: _____
CSFS program manager

Return this form, along with your completed Cost Documentation Form to your local **Colorado State Forest Service District Office**.
Retain documentation such as receipts and payment for six (6) years. The IRS considers reimbursable funds as ordinary income.
Please consult your tax advisor.

01/19/10

**EMERGENCY SUPPLEMENTAL FUNDS
LANDOWNER ASSISTANCE PROGRAMS
ACCOMPLISHMENT REPORT (page 2)**

Project No. 5308420

To be completed by CSFS forester:

PROGRAM:

WUI Incentives D-space: _____ *I & D Prevention and Suppression – Bark Beetle:* _____

FRFTP: _____ *STEVENS' Fund:* _____ *SFA:* _____ *ESF:* ☒ *Forest
Restoration Grant (SB71 and HB1199):* _____

WUI D-space Accomplishment:

No. of D-spaces = _____ Acres slash disposal = _____ Acres fuel breaks = _____

Acres thinned = 2 Acres pruned = _____

I & D Prevention and Suppression Accomplishment:

No. of infested trees treated: _____

Acres inspected and treated: _____

Acres thinned: _____

Accomplishment (Not included above) – LOA Practice Number:

#1 Plan Acres = _____	#5 Acres = _____	#9 Acres treated = _____
#2 Acres tree planting = _____	#6 Acres treated = _____	#10 Acres of restoration = _____
Acres treated = _____	#7 Acres treated = _____	#11 Acres = _____
#3 Acres treated = _____	#8 Acres treated = _____	
#4 Acres planted/ renovated = _____		



Summit Forestry
5201 Greenview Dr.
Fort Collins CO 80525

Invoice

Date	Invoice #
4/13/2010	1174

Bill To
Jerry and Shar Edmonds c/o Donna Moore 212 Sawmill Rd. Loveland CO 80537

Item	Quantity	Description	Rate	Amount
Active Forest Management		Work completed 4/6/10. Active Forest Management and forest thinning. Thinning along roadside, focusing on removal of Narrow Leaf Cottonwoods. Chipping of all slash and branches. Logs bucked into firewood and stacked along roadside. Assistance with Randy and Donna Moore. Fixed rate at \$940.00.	940.00	940.00

CR. # 3023
4/13/10
Donna Moore

We appreciate your business. Thank you!

Total \$940.00

Terms

Subject to 1.25% after 30 days

Jerry Elmonds Donna Moore
Landowner Signature

[illegible]



Form A-ES

**EMERGENCY SUPPLEMENTAL FUNDS
LANDOWNER ASSISTANCE PROGRAMS
APPLICATION****PROJECT NUMBER:** 5308420-11

(For Official Use Only)

NAME: Donna Moore**MAILING ADDRESS:** 212 Sawmill Road**City:** Loveland**State:** CO**Zip code:** 80537**TELEPHONE NO:** 970-669-9844**PROJECT ADDRESS/LEGAL DESCRIPTION:**15814 C.R. 18E, Loveland, CO
80537**PRACTICES TO BE COMPLETED BY:** 3/31/2011

Date

Landowner and CSFS forester:

CSFS forester:

Practice No. & Component Title	Quantity Requested	Quantity Approved
LOA 9- Fire risk reduction	\$940	\$940
		Total:\$940

Request for financial assistance under the Emergency Supplemental LOA program is to meet the objective stated in the management plan. I will not receive more than the actual cost up to \$470 per acre.

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. Requests for partial payments will be approved on a case by case basis.

LANDOWNER SIGNATURE:**DATE:** 4-1-10

To be completed by CSFS forester:

CSFS FIELD REVIEW SIGNATURE:**DATE:**

(Additional USFWS guidelines addressed)

PROGRAM:**ESF:****Funding Allocated:****AMOUNT:\$****DATE:**

CSFS District Forester

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.

01/19/10

Colorado State Forest Service

Emergency Supplemental

2010 Grant Application

DISTRICT'S: Please Complete	
District Submitting Project:	
Forester Submitting Project:	
District Priority Number:	
Date Submitted:	
FOR REVIEWER'S USE ONLY:	
Rating:	

1	Applicant Information	
	Applicant:	Jerry & Shar Edmonds
	Contact Person:	Donna Moore
	Address:	212 Sawmill Road
	City/Zip Code:	Loveland, CO 80537
	Phone (Work/Cell):	970/669-9844
	Email:	don2ran@lpbroadband.net
	Fax:	

2	Community At Risk Information			
	Name of Project:		Edmonds Fuel Break	
	Community Name(s):		Pole Hill Road Community Wildfire Protection Group	
	County:		Congressional District:	4th
	Latitude (decimal degrees):		Longitude (decimal degrees):	N105.19
	Threat Description (check all that apply)			
	Homes:	<input checked="" type="checkbox"/>	Number of:	62
	Businesses:	<input type="checkbox"/>	Number of:	
Watersheds:	<input checked="" type="checkbox"/>	Number of:	2	
Other (Describe):				

3	Requested Grant Amount / Project Description	
	All information for the project must fit into the space provided below. The review committee will not consider attachments.	
	Dollar Amount Requested May Not Exceed \$470 x Number of Acres Proposed For Treatment	
	Dollar Amount Requested	\$940
	Will this Project be conducted as a Pass-Through Grant? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>Provide a brief overview of the project and the project area. (If applying for a fuels reduction project, identify vegetation types)</p> <p>Narrow leaf cottonwoods/willows along and in the creek at 15,184 WCR 18E, where the creek crosses 18E from south to north, need to be trimmed and some removed. Ponderosa pines need to be thinned and ladder fuels removed on a section adjoining a previous grant-funded fuelbreak project on Pole Hill Road. Landowners and others from the Pole Hill Road Association would thin and remove vegetation along and to the south of the Pole Hill Road easement to complete the existing fuelbreak work. The vegetation includes native grasses and shrubs.</p>		

Scope of Work / Project Timeline

All information for the project must fit into the space provided below. Attachments will not be considered by the review committee.

Provide a brief scope of work that clearly describes how grant funds will be spent. *(This should be more specific than the project description)*

4

The two acres in this application are along the south side of Pole Hill Road (W. County Road 18E) from the drive at 15,184 WCR 18E to where the road inclines steeply to the property at 16,200 W. County Road 18E where fuelbreak work has been done under the demonstration fuelbreak started in 2008. The original, unoccupied, log buildings for the PY Saddle Notch Ranch stand at 15,184 WCR 18E. Cutting and chipping was done southwest of the buildings in the past year. The property to the north of 16,200 W. 18E has a completed fuelbreak as the result of the same demo grant. The present grant will be used to fund some hired labor and chipping, but much of the labor will be done by the landowners in conjunction with members of the Pole Hill Road Association. A similar thinning without as much organization and knowledge was done in the mid-to-late 1990's. This project will greatly improve the safety of the entire community covered under the PHRCWP plan which is on file with the CSFS. It will also help protect the historic ranch headquarters.

Describe all planned long-term maintenance (grant funded or other).

This property is the original PY Saddle Notch Ranch headquarters and has a record of maintenance of the creek and other areas in the vicinity of this project, without grants. Landowners are careful to keep grasses mowed around vacant buildings, have done thinning, have financed chipping of slash, and have authorized community work in this area. The Western Area Power Admin. is currently clearing trees and vegetation under transmission lines that cross part of this property, as well as properties to the west and north.

What is the duration of this project? *(check one)* X ☐ 1 Year ☐ 2 Years ☐ 3 Years ☐ 4 Years

Is this a continuing project from previous year/s? *(check one)* X ☐ Yes ☐ No

Provide a timeline for the project

This work would be done this spring or early fall. Work will continue, as needed, to maintain the fuelbreak and provide safer access to properties beyond this property.

Interagency Collaboration

Specify the private, local, tribal, county, state, federal and/or non-governmental (501c3) organizations that will contribute to or participate in the completion of this project. Describe briefly the contributions each partner will make *(i.e. – donating time/equipment, funding, etc.)*.

5

Community work before and since the PHRCWPG Plan has included cooperation with the CSFS, LCES, and USFS. USFS work is being done on land just west of Quillan Gulch Road in the CWPP area. Western Area Power Admin. has begun clearing vegetation under transmission lines in the area. Anchor Point Group is beginning a project on Sawmill Road and Saddle Notch Road (north from Pole Hill Road) this spring. Many local landowners, including several members of Larimer County Tree Farm Association, work continually toward the long-term health and safety of the forest.

Community Wildfire Protection Plan (CWPP)

	Does this community have a wildfire protection plan that follows the Healthy Forest Restoration Act CWPP guidelines? (check one) X <input type="checkbox"/> yes <input type="checkbox"/> no		
	Is this project part of the plan? (check one) X <input type="checkbox"/> yes <input type="checkbox"/> no		

6	Project Category (check all that apply and answer related questions)			
	Hazard Fuels Reduction X <input type="checkbox"/> Other Forest Management Treatment <input type="checkbox"/>			
	Number of acres to be treated:	2	Estimated cost per acre:	\$940
	Project Type (check all that apply)			
	Defensible Space	X <input type="checkbox"/>	Thinning w/o Product	X <input type="checkbox"/>
	Fuelbreak	X <input type="checkbox"/>	Mastication	<input type="checkbox"/>
	Thinning w/ Product	X <input type="checkbox"/>	Other	<input type="checkbox"/>

7	Total Project Expense (Pass Through)		
	<i>Please fill all fields</i>	Grant Share (\$ Amount Requested)	TOTAL
	Contractual Services:	\$940	\$ 940
	TOTAL:	\$940	\$ 940

Grant funding may only be used for Contractual Service.

8	Total Project Expense (Non-Pass Through)		
	<i>Please fill all fields</i>	Grant Share (\$ Amount Requested)	TOTAL
	Contractual Services:		\$ 0
	Indirect Costs:		\$ 0
	TOTAL:	\$0	\$ 0

Grant funding may only be used for Contractual Service and Indirect.

Attach Project Map Showing Specific Treatment Areas



Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input type="checkbox"/>
Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	<input checked="" type="checkbox"/>
Stevens Fuels Treatment Funds	<input type="checkbox"/>
Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	<input type="checkbox"/>
Emergency Supplemental Funds (a.k.a.: ESF)	<input type="checkbox"/>

☐ Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/>

Name: Danna Moore

Address: 212 Sawmill Road

Loveland, CO 80537

The above named has submitted a project application that has been reviewed and approved by the Colorado State Forest Service for funding from Federal Assistance.

Grant Number: 530988 Cooperator Match: \$468.²⁵

Approved Funding: \$6,000 Total Project: \$818.²⁵

CSFS Account Number: 530988-6693-FC Amount of Payment: \$350.⁰⁰

Circle one: 1st Payment 2nd Payment 3rd Payment Final Payment

Approved by _____ Date: _____
(Program manager signature)

EXHIBIT B
GRANT REPORT/REIMBURSEMENT REQUEST
COMPETITIVE GRANTS

Project Number: 530988

In order to receive reimbursement, you must provide documentation supporting your expenditures covered by this initial disbursement and the corresponding match. You may request reimbursement on a monthly basis as you incur expenses, however the final 10% of the award amount will not be released until the final closeout report is received and accepted. Reimbursement requests must be accompanied by receipts for costs incurred and documentation of matching funds. Federal Funds cannot be used as sources for meeting the cost sharing (matching) provisions. **Matching Funds are expenses for goods, services and labor necessary for project implementation and incurred by the applicant which are not reimbursed with Federal Funds.**

1. Project #: 530988	2. Project Funding Amount: \$6,000	3. Community Protected: Pole Hill Road Community																																																							
4. Make Payment To: Name: Donna Moore <i>(Jim Wiegand's)</i> Address: 212 Sawmill Road Loveland, CO 80537		5. Period of Performance: From: 25-april - 09 To: 6-april - 10																																																							
6. What was accomplished? (Quantity or Status of Project. Please provide a description of accomplishments. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of cubic feet or yards of slash collected, number of presentations, number of plans written. Attach additional sheets as necessary.) <div style="font-family: cursive; padding: 10px; border: 1px solid black; margin: 10px 0;"> Work continued on defensible space w/ resulting slash which was chipped along with slash from thinning and limbing from extended polygon. Jim Wiegand collected and removed all resulting firewood, as well as removing additional trees and piling slash for chipping. </div>																																																									
7. Reimbursement Request: Project to Date Reimbursement Request Amount cannot exceed the total Project obligation as identified in the Project Document. The Total Reimbursement Request Amount cannot exceed the Total Matching Funds amount for the period being billed.																																																									
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8. Amount Paid to CSFS for Products and/Or Services : \$ —																																																									
9. I request reimbursement in the amount of \$ 300.00 for the work completed and documented above. I certify that to the best of my knowledge and belief this report is correct and complete and that all outlays reported are for the purposes set forth in the project documents. Signature: Donna Moore Date: April 13, 2010																																																									
All expenses are true and accurate and all cost share is true and accurate.																																																									
10. Certification (To be completed by CSFS District): Work meets minimum standards as set forth by CSFS. Signature: <i>Jim (Silly)</i> Date: 4/15/2010																																																									

EXHIBIT B
GRANT REPORT/REIMBURSEMENT REQUEST
COMPETITIVE GRANTS

Project Number: 530988

In order to receive reimbursement, you **must** provide documentation supporting your expenditures covered by this initial disbursement and the corresponding match. You may request reimbursement on a monthly basis as you incur expenses, however the final 10% of the award amount will not be released until the final closeout report is received and accepted. Reimbursement requests must be accompanied by receipts for costs incurred and documentation of matching funds. Federal Funds **cannot** be used as sources for meeting the cost sharing (matching) provisions. **Matching Funds are expenses for goods, services and labor necessary for project implementation and incurred by the applicant which are not reimbursed with Federal Funds.**

1. Project #: 530988	2. Project Funding Amount: 6,000	3. Community Protected: Pole Hill Road Community																																																				
4. Make Payment To: Name: Donna Moore Address: 212 Sawmill Road Loveland, CO 80537		5. Period of Performance: From: 11-Nov.-08 To: 10-April-10																																																				
6. What was accomplished? (Quantity or Status of Project. Please provide a description of accomplishments. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of cubic feet or yards of slash collected, number of presentations, number of plans written. Attach additional sheets as necessary.) <div style="font-family: cursive; padding: 10px;"> Mike & Gayle Talley have cleared trees from their 18E easement, as well as thinned and limbed defensible space and other parts of their property. </div>																																																						
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8. Amount Paid to CSFS for Products and/Or Services : \$ —																																																						
9. I request reimbursement in the amount of \$ 50.00 for the work completed and documented above. I certify that to the best of my knowledge and belief this report is correct and complete and that all outlays reported are for the purposes set forth in the project documents. Signature: Mike Talley/Donna Moore Date: 4/14/10																																																						
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10. Certification (To be completed by CSFS District): Work meets minimum standards as set forth by CSFS. Signature: [Signature] Date: 4/15/2010																																																						



Colorado State Forest Service

Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	
Insect and Disease Prevention and Suppression Program	
State Fire Assistance (a.k.a.: SFA)	
Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	✓
Stevens Fuels Treatment Funds	
Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	
Emergency Supplemental Funds (a.k.a.: ESF)	

☐ Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/>

Name: Donna Moore

Address: 212 Sawmill Road
Loveland, CO 80537

The above named has submitted a project application that has been reviewed and approved by the Colorado State Forest Service for funding from Federal Assistance.

Grant Number: 530988 Cooperator Match: \$ 5,550.³⁷

Approved Funding: 6,000 Total Project: \$ 8,200.51

CSFS Account Number: 530988-10693 Amount of Payment: \$ 2,650

Circle one: 1st Payment 2nd Payment 3rd Payment Final Payment

Approved by _____ Date: _____
(Program manager signature)

Coalwell

EXHIBIT B
GRANT REPORT/REIMBURSEMENT REQUEST
COMPETITIVE GRANTS

Project Number: 530988

In order to receive reimbursement, you must provide documentation supporting your expenditures covered by this initial disbursement and the corresponding match. You may request reimbursement on a monthly basis as you incur expenses, however the final 10% of the award amount will not be released until the final closeout report is received and accepted. Reimbursement requests must be accompanied by receipts for costs incurred and documentation of matching funds. Federal Funds cannot be used as sources for meeting the cost sharing (matching) provisions. **Matching Funds are expenses for goods, services and labor necessary for project implementation and incurred by the applicant which are not reimbursed with Federal Funds.**

1. Project #: 530988	2. Project Funding Amount: 6,000	3. Community Protected: Pole Hill Road Community
4. Make Payment To: Name: Donna Moore Address: 212 Sawmill Road Loveland, CO 80537		5. Period of Performance: From: 3 Jan. 09 To: 7 Nov. 09

6. What was accomplished? (Quantity or Status of Project. Please provide a description of accomplishments. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of cubic feet or yards of slash collected, number of presentations, number of plans written. Attach additional sheets as necessary.)

See Attached Word Document

Landowners thinned and limbed northwest corner of 18E and Skinner Gulch Road and on the south side of 18E. Slash and some trees have been chipped while the majority of larger diameter trees were cut into firewood and hauled off site. Work was completed to enhance and increase a fuelbreak on either side of the road along 18E and onto Skinner Gulch Road. Approximately 6 acres were treated. DCS

7. Reimbursement Request:

Project to Date Reimbursement Request Amount cannot exceed the total Project obligation as identified in the Project Document. The Total Reimbursement Request Amount cannot exceed the Total Matching Funds amount for the period being billed.

	Current Period				Project to Date			
	Reimbursement Amount Requested For Out of Pocket Expenses	Matching Funds		Total Costs	Reimbursement Amount Requested For Out of Pocket Expenses	Matching Funds		Total Costs
		Cash (hard match)	Donated (Inkind match)			Cash (hard match)	Donated (Inkind match)	
	\$2,650	\$438.75	\$5,111.62	\$8,200.37	\$5,650	\$6,350.99	\$5,005.44	\$11,356.43
Material**								
Total	\$2,650	\$438.75	\$5,111.62	\$8,200.37	\$5,650	\$6,350.99	\$5,005.44	\$11,356.43

Donated time and materials can only be counted towards the matching component.

* Use actual costs or \$18.77/hour for donated or volunteers' time.

** Use actual costs or fair market value of donated materials, supplies, or equipment use.

8. Amount Paid to CSFS for Products and/Or Services : \$

9. I request reimbursement in the amount of \$ 2,650 for the work completed and documented above. I certify that to the best of my knowledge and belief this report is correct and complete and that all outlays reported are for the purposes set forth in the project documents.

Signature: Gilbert Coalwell/Donna Moore Date: 1/7/09

All expenses are true and accurate and all cost share is true and accurate.

10. Certification (To be completed by CSFS District):

Work meets minimum standards as set forth by CSFS.

Signature: [Signature] Date: 1/11/2010

Wiegand

EXHIBIT B
GRANT REPORT/REIMBURSEMENT REQUEST
COMPETITIVE GRANTS

Project Number: 530988

In order to receive reimbursement, you must provide documentation supporting your expenditures covered by this initial disbursement and the corresponding match. You may request reimbursement on a monthly basis as you incur expenses, however the final 10% of the award amount will not be released until the final closeout report is received and accepted. Reimbursement requests must be accompanied by receipts for costs incurred and documentation of matching funds. Federal Funds cannot be used as sources for meeting the cost sharing (matching) provisions. Matching Funds are expenses for goods, services and labor necessary for project implementation and incurred by the applicant which are not reimbursed with Federal Funds.

1. Project #: 530988	2. Project Funding Amount: 6,000	3. Community Protected: Pole Hill Road Community
4. Make Payment To: Name: Donna Moore Address: 212 Sawmill Road Loveland, CO 80537		5. Period of Performance: From: 11-Nov.-08 To: 25-Apr-09

6. What was accomplished? (Quantity or Status of Project. Please provide a description of accomplishments. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of cubic feet or yards of slash collected, number of presentations, number of plans written. Attach additional sheets as necessary.)

Jim Wiegand and Janet Collins have removed regeneration along W. County Road 18E and part of their property adjacent to their home, but have not used all of their portion of the grant. The attached documentation covers their completed work and expenses.

Trees were thinned, limbed and chipped.

Added to
Gib's reimbursement
request

7. Reimbursement Request:

Project to Date Reimbursement Request Amount cannot exceed the total Project obligation as identified in the Project Document. The Total Reimbursement Request Amount cannot exceed the Total Matching Funds amount for the period being billed.

	Current Period				Project to Date			
	Reimbursement Amount Requested For Out of Pocket Expenses	Matching Funds		Total Costs	Reimbursement Amount Requested For Out of Pocket Expenses	Matching Funds		Total Costs
		Cash (hard match)	Donated (Inkind match)			Cash (hard match)	Donated (Inkind)	
Labor*	\$150	\$150	\$673.10	\$823.10	\$5,650	\$6,500	\$5,678.54	\$17,828.54
Material**				1,018.20				
Total	\$150	\$150	\$673.10	\$823.10	\$5,650	\$6,500	\$5,678.54	\$17,828.54

Donated time and materials can only be counted towards the matching component.

* Use actual costs or \$18.77/hour for donated or volunteers' time.

** Use actual costs or fair market value of donated materials, supplies, or equipment use.

8. Amount Paid to CSFS for Products and/Or Services : \$

9. I request reimbursement in the amount of \$ 150.00 for the work completed and documented above. I certify that to the best of my knowledge and belief this report is correct and complete and that all outlays reported are for the purposes set forth in the project documents.

Signature: Jim Wiegand/Donna Moore Date: 1/7/09

All expenses are true and accurate and all cost share is true and accurate.


10. Certification (To be completed by CSFS District):

Work meets minimum standards as set forth by CSFS.

Signature:

Date:

1951

Landowner Signature


[illegible]

- 27 hrs

Total
34 1/2 hrs

44. 5 now 5

$$= 868 \cdot 20$$

2

My dear friend

EXHIBIT B
GRANT REPORT/REIMBURSEMENT REQUEST
COMPETITIVE GRANTS

Project Number:

In order to receive reimbursement, you **must** provide documentation supporting your expenditures covered by this initial disbursement and the corresponding match. You may request reimbursement on a monthly basis as you incur expenses, however the final 10% of the award amount will not be released until the final closeout report is received and accepted. Reimbursement requests must be accompanied by receipts for costs incurred and documentation of matching funds. Federal Funds **cannot** be used as sources for meeting the cost sharing (matching) provisions. **Matching Funds are expenses for goods, services and labor necessary for project implementation and incurred by the applicant which are not reimbursed with Federal Funds.**

1. Project #:	2. Project Funding Amount: 6,000	3. Community Protected: Pole Hill Road Community
4. Make Payment To: Name: Donna Moore Address: 212 Sawmill Road Loveland, CO 80537		5. Period of Performance: From: 1-Dec-08 To: 23-Mar-09
6. What was accomplished? (Quantity or Status of Project. Please provide a description of accomplishments. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of cubic feet or yards of slash collected, number of presentations, number of plans written. Attach additional sheets as necessary.) A total of 6.3 acres have been treated by Belinda Biddle on the north side of West County Road 18E and the east side of Skinner Gulch Road. These acres are part of the 12 acres identified in the grant		
7. Reimbursement Request: Project to Date Reimbursement Request Amount cannot exceed the total Project obligation as identified in the Project Document. The Total Reimbursement Request Amount cannot exceed the Total Matching Funds amount for the period being billed.		
	Current Period	Project to Date
	Reimbursement Amount Requested Matching Funds Total Costs	Reimbursement Amount Requested Matching Funds Total Costs
	For Out of Pocket Expenses Cash (hard match) Donated (Inkind match)	For Out of Pocket Expenses Cash (hard match) Donated (Inkind match)
Labor*		
Material**		
Total		
Donated time and materials can only be counted towards the matching component. * Use actual costs or \$18.77/hour for donated or volunteers' time. ** Use actual costs or fair market value of donated materials, supplies, or equipment use.		
8. Amount Paid to CSFS for Products and/Or Services : \$		
9. I request reimbursement in the amount of \$ 2,500 for the work completed and documented above. I certify that to the best of my knowledge and belief this report is correct and complete and that all outlays reported are for the purposes set forth in the project documents.		
Signature: <i>Robert P. Cochran</i> Date: 11-24-09		
All expenses are true and accurate and all cost share is true and accurate.		
10. Certification (To be completed by CSFS District): Work meets minimum standards as set forth by CSFS. Signature: Date:		



Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Bureau of Land Management Task Order Program	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Forest Land Enhancement Program (a.k.a.: FLEP)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input type="checkbox"/>
Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	<input checked="" type="checkbox"/>
Stevens Fuels Treatment Funds	<input type="checkbox"/>
Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	<input type="checkbox"/>

☐ Checked for Federal suspension and debarment (State Office) <http://www.epis.gov/>

Name: Donna Moore

Address: 212 Sawmill Road
Loveland, CO 80537

The above named has submitted a project application that has been reviewed and approved by the Colorado State Forest Service for funding from Federal Assistance.

Grant Number: 530988 Cooperator Match: \$10,359.46

Approved Funding: \$6,000 Total Project: \$9,359.46

CSFS Account Number: 530988 Amount of Payment: \$3,000

Circle one: 1st Payment 2nd Payment 3rd Payment Final Payment

Approved by _____
 (Program manager signature)

Date: _____

EXHIBIT B
GRANT REPORT/REIMBURSEMENT REQUEST
COMPETITIVE GRANTS

Project Number: 530988

In order to receive reimbursement, you **must** provide documentation supporting your expenditures covered by this initial disbursement and the corresponding match. You may request reimbursement on a monthly basis as you incur expenses, however the final 10% of the award amount will not be released until the final closeout report is received and accepted. Reimbursement requests must be accompanied by receipts for costs incurred and documentation of matching funds. Federal Funds **cannot** be used as sources for meeting the cost sharing (matching) provisions. **Matching Funds are expenses for goods, services and labor necessary for project implementation and incurred by the applicant which are not reimbursed with Federal Funds.**

1. Project #: 530988	2. Project Funding Amount: 6,000	3. Community Protected: Pole Hill Road Community
4. Make Payment To: Name: Donna Moore Address: 212 Sawmill Road Loveland, CO 80537		5. Period of Performance: From: 1-Dec-08 To: 23-Mar-09

6. What was accomplished? (Quantity or Status of Project. Please provide a description of accomplishments. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of cubic feet or yards of slash collected, number of presentations, number of plans written. Attach additional sheets as necessary.)

Thinning and limbing to CSFS fuelbreak specifications on 6.3 acres.

See Attached Word Document.

This is a partial reimbursement request and the first on submitted.

DCS

7. Reimbursement Request:

Project to Date Reimbursement Request Amount cannot exceed the total Project obligation as identified in the Project Document. The Total Reimbursement Request Amount cannot exceed the Total Matching Funds amount for the period being billed.

	Current Period				Project to Date			
	Reimbursement Amount Requested For Out of Pocket Expenses	Matching Funds		Total Costs	Reimbursement Amount Requested For Out of Pocket Expenses	Matching Funds		Total Costs
		Cash (hard match)	Donated (Inkind match)			Cash (hard match)	Donated (Inkind match)	
Labor*	\$3,000.00	\$8,442.47	47 Hrs/\$19.5		Same as "Current Period"			
Material**								
Total	\$3,000.00	\$8,442.47	\$916.87	\$9,359.46				

Donated time and materials can only be counted towards the matching component.

* Use actual costs or \$19.51/hour for donated or volunteers' time. Note: Revised costs: \$19.51/Hr (Per Diana Selby)

** Use actual costs or fair market value of donated materials, supplies, or equipment use.

8. Amount Paid to CSFS for Products and/Or Services: \$0

9. I request reimbursement in the amount of \$3,000 for the work completed and documented above. I certify that to the best of my knowledge and belief this report is correct and complete and that all outlays reported are for the purposes set forth in the project documents.

Signature: *Donna Moore*

Date: *April 6, 2009*

All expenses are true and accurate and all cost share is true and accurate.

10. Certification (To be completed by CSFS District):

Work meets minimum standards as set forth by CSFS.

Signature:

Diana Selby

Date:

April 9, 2009

Pole Hill Road Fuelbreak Project



— Roads
 ParcelOwnership
 Completed Project Areas

Map Created 04/06/2009
 Diana Selby, CSFS



This is the map of the
 Biddle work, on the right,
 and partial Coalwell work
 on the left.

Belinda has:

\$9,359.46

- 6,000

= 3,359.46 available

for 50/50 cost

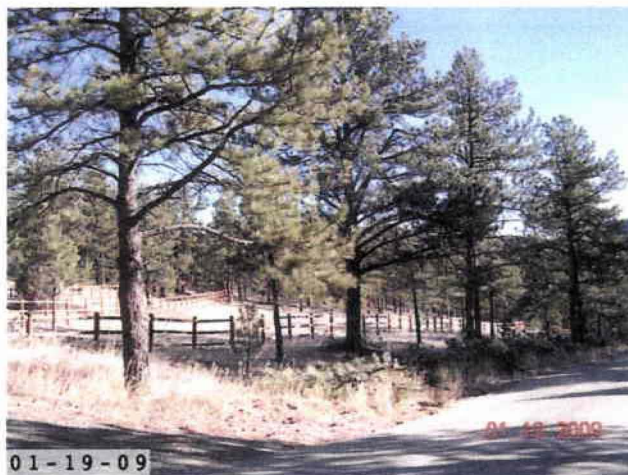
share
for additional
acres treated



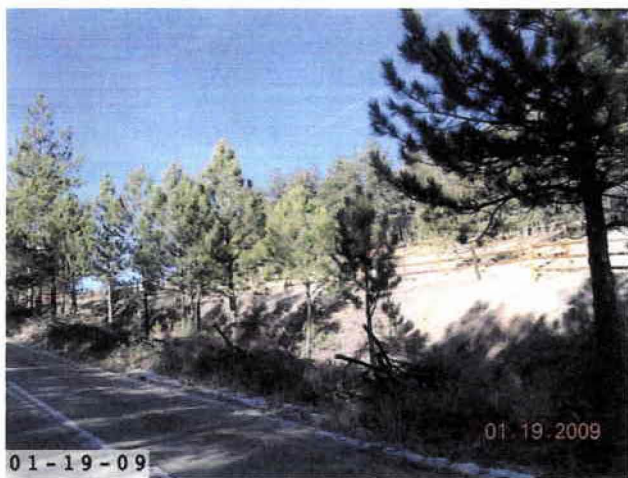
Coalwell's property, west of Skinner Gulch Road on north side of W. County Road 18E

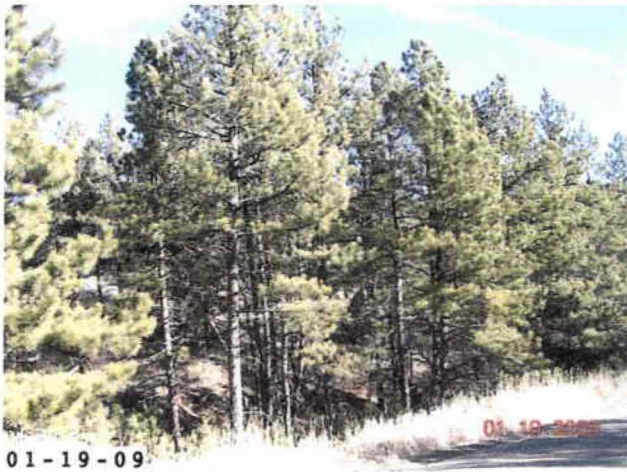
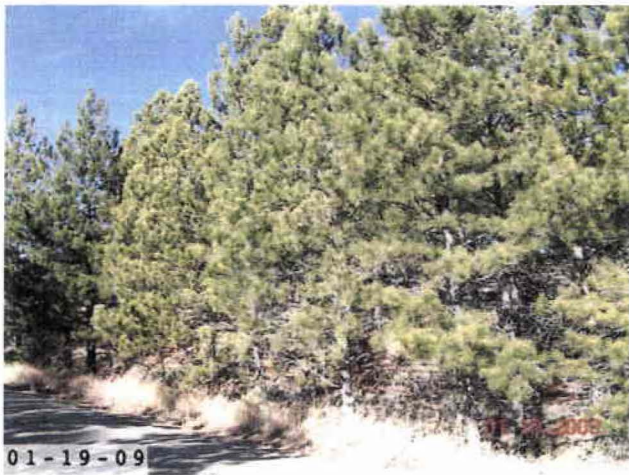


South side of 18E, still Coalwell's



Belinda Biddle's - east from driveway





North side of 18E, east of Biddle's start

Financial Assistance Program

Cooperative Match Project

To be conducted by:

Pole Hill Road Community Wildfire Protection Group

Project Number:

Estimated Project Cost: \$12,000

Funding provided by CSFS: \$6,000

Minimum Recipient Match: \$6,000

Project to be completed by: December 1, 2009

Based on the strength of the application submitted by Donna Moore of the Pole Hill Road Community Wildfire Protection Group, the Colorado State Forest Service is providing funding in the amount up to but not exceeding \$6,000 to accomplish the project described in the attached scope of work.

As the cooperator, Donna Moore of the Pole Hill Road Community Wildfire Protection Group, will be reimbursed for actual (hard dollars spent) costs incurred in implementing the project up to the amount listed above once the following requirements are met:

- A. Complete work as described in "Attachment A" (scope of work).
- B. Provide documentation that project funds have been matched at a minimum ratio of 1:1.
- C. Complete and submit through the local CSFS District Office periodic Grant Report(s)/Reimbursement Request(s) using the form provided in "Attachment B", as needed, and a Final Report that provides details on expenditures and accomplishments as a result of this project. Submission to: Diana Selby, Fort Collins District, Colorado State Forest Service, 5060 Campus Delivery, CSU, Fort Collins, CO 80523-5060.
- D. Certify that neither the cooperator nor any principals represented herein are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.

This funding will remain available until December 1, 2009. It may be extended at any time at the discretion of CSFS.

As a representative of the cooperator, I have read and understand the conditions of participating in this cooperative match project.

Cooperator Signature: *Donna Moore*

Date: 11-11-08

Mailing Address: 212 Sawmill Road
Loveland, CO 80537

Telephone Number: 970-669-9844

Email Address: don2ran@lpbroadband.net

EXHIBIT A
Financial Assistance Program
Cooperative Match Project
SCOPE OF WORK

Project Number:

Cooperator: Donna Moore, Pole Hill Road Community Wildfire Protection Group

Work to be completed: Create a 12 acre fuelbreak along portions of Roads 18E and Skinner Gulch using CSFS standards "Fuelbreak Guidelines for Forested Subdivisions & Communities." Work will meet the scope of work described in the approved project application.

1. Type of Treatment – thinning and limbing to fuelbreak specifications

Milestone dates: Project will be complete by December 1, 2009. Progress and partial payment requests will be reported to Diana Selby (970) 491-8839.

Standards or Guidelines: Will meet CSFS guidelines appropriate for treatment.

Project Period: From Date of Signed project notice – December 1, 2009

Funded Amount: \$6,000

Minimum cooperator match: \$6,000

Deliverables: 12 acres

Project Types: fuel mitigation

All work completed under this project must be certified as meeting minimum Colorado State Forest Service standards prior to any reimbursement being made to the cooperator. Attachment B to the project entitled "Attachment B, Grant Report/ Reimbursement Request, WSFM Competitive Grants" will be the document used to both request reimbursement and to certify that work has been completed to minimum standards.

Initials:



Colorado State Forest Service
Front Range Fuels Treatment
Partnership
Wildland Urban Interface
July/August 2008
Grant Application

DISTRICT'S: Please Complete	
District Submitting Project:	Fort Collins
Forester Submitting Project:	Diana Selby
District Priority Number:	1
Date Submitted:	10/23/08
FOR REVIEWER'S USE ONLY:	
FRFTP Rating:	

1	Applicant Information	
	Applicant:	Pole Hill Road Community Wildfire Protection Group
	Contact Person:	Donna Moore Belinda Biddle
	Address:	212 Sawmill Road 16193 WCR 18E
	City/Zip Code:	Loveland, CO/80537 Loveland, CO/80537
	Phone (Work/Cell):	970.669.9844 970.669.6761
	Email:	don2ran@lpbroadband.net Bbllco@aol.com
	Fax:	

2	Community At Risk Information							
	Name of Project:	PHRCWPG Easement, Mitigation, and Education						
	Community Name(s):	Pole Hill Road Community Wildfire Protection Group						
	County:	Larimer	Congressional District:	4th				
	Latitude (decimal degrees):	40.38	Longitude (decimal degrees):	105.31				
	Threat Description (check all that apply)							
	Homes:	<input checked="" type="checkbox"/>	Number of:	78	Infrastructure:	<input checked="" type="checkbox"/>	Estimated value of:	2-3 million
	Businesses:	<input checked="" type="checkbox"/>	Number of:	1	Economic Viability:	<input type="checkbox"/>	Estimated value of:	
Watersheds:	<input checked="" type="checkbox"/>	Number of:	2	Historic Structures:	<input checked="" type="checkbox"/>	Number of:	1	
Other (Describe):								

3	Requested Grant Amount / Project Description	
	All information for the project must fit into the space provided below. The review committee will not consider attachments.	
	Dollar Amount Requested \$ 6,000	Projected Match \$ 6,000
	Will this Project be conducted as a Pass-Through Grant? Yes	
	Provide a brief overview of the project and the project area. (If applying for a fuels reduction project, identify vegetation types)	
	<p>The project will take place within the Pole Hill Road community WUI zone in Larimer County west of Loveland, Colorado. Work will take place specifically along Road 18E and Skinner Gulch Road. In the event of a wildfire, Road 18E is currently the only maintained route for ingress and egress from the homes in the Pole Hill WUI and is therefore designated as high priority for mitigation in the developing CWPP. The treatment is located in an area of very high fire hazard and will be visible to residents within the community.</p> <p>Dominant vegetation is ponderosa pine with some Douglas-fir and occasional Rocky Mountain juniper. In many locations ponderosa pine is infested with dwarf mistletoe. New mountain pine beetle infestations have also been found in 2008. Understory shrubs are primarily mountain mahogany, alpine currant, chokecherry and other berry bushes. Stands are multistoried with mostly closed canopies and occasional openings. Basal area ranges from 80-120+ sqft/acre. Several drainages bisect the property and many slopes are greater than 30%. Elevation ranges from 5,000 to 6,000 feet.</p>	

Scope of Work / Project Timeline

All information for the project must fit into the space provided below. Attachments will not be considered by the review committee.

Provide a brief scope of work that clearly describes how grant funds will be spent. (This should be more specific than the project description)

4

The prescription for this initial project will be to create a fuelbreak to CSFS standards along a portion of 18E and Skinner Gulch Road. Basal area will be reduced to a maximum of 60 sqft/acre. Canopy will be opened to create an average of 10 to 15 feet of space between tree crowns and ladder fuels will be removed.

Work will take place on private properties and will mitigate fire risk on those properties and serve as an example and teaching tool to other residents. Grant funds will be utilized to hire a contractor to cut and/or chip materials created by project activities. Property owners and residents will volunteer to do some of the work themselves. Funds (~\$50 operating) may also be spent to assist in purchasing and distributing out educational materials on the project activities, forest health, wildfire risk reduction, and defensible space.

Describe all planned long-term maintenance (grant funded or other).

Several residents currently work under forest management plans and will continue to do so. Treatments will be inspected and maintained yearly by residents. Long range plans to reduce wildfire risk will be included in the CWPP and future efforts will include expanding the current fuelbreak along all roads and assisting with the creation and maintenance of defensible space on individual properties.

What is the duration of this project? (check one) ☒ One Year ☐ Two Years

Is this a continuing project from previous year/s? (check one) ☐ Yes ☒ No

Provide a timeline for the project

Work will begin on the project as soon as grant is approved. A CSFS forester will assist with tree marking, project layout and educational efforts in the first month of grant award. Cutting will take place in the following months with all work completed and ready for inspection by the final month (12) of the grant period. An educational meeting concerning forest health and wildfire risk is scheduled for fall of 2008 and educational materials will be distributed any time during the CWPP development and grant period.

Interagency Collaboration

Specify the private, local, tribal, county, state, federal and/or non-governmental (501c3) organizations that will contribute to or participate in the completion of this project. Describe briefly the contributions each partner will make (i.e. – donating time/equipment, funding, etc.).

5

Tony Simons, Larimer County Emergency Services- provide defensible space evaluations and recommendations for road easements for emergency services equipment access
Diana Selby, CSFS- provide fuel reduction recommendations, project layout & CWPP development assistance
Dick Edwards, USFS- participate in CWPP process and consider fuel treatments on adjacent federal lands
Pole Hill Road CWPP group- organize and implement a wildfire education campaign for residents, coordinate grant activities, hire contractor for grant implementation, lead CWPP effort
Residents/property owners- implement fuel reduction activities and create defensible space
Contractor- will be hired to cut and/or chip and/or remove fuels and slash

Community Wildfire Protection Plan (CWPP)

Does this community have a wildfire protection plan that follows the Healthy Forest Restoration Act CWPP guidelines? (check one) ☐ yes ☒ no In development, draft plan on file with CSFS

Is this project part of the plan? (check one) ☒ yes ☐ no

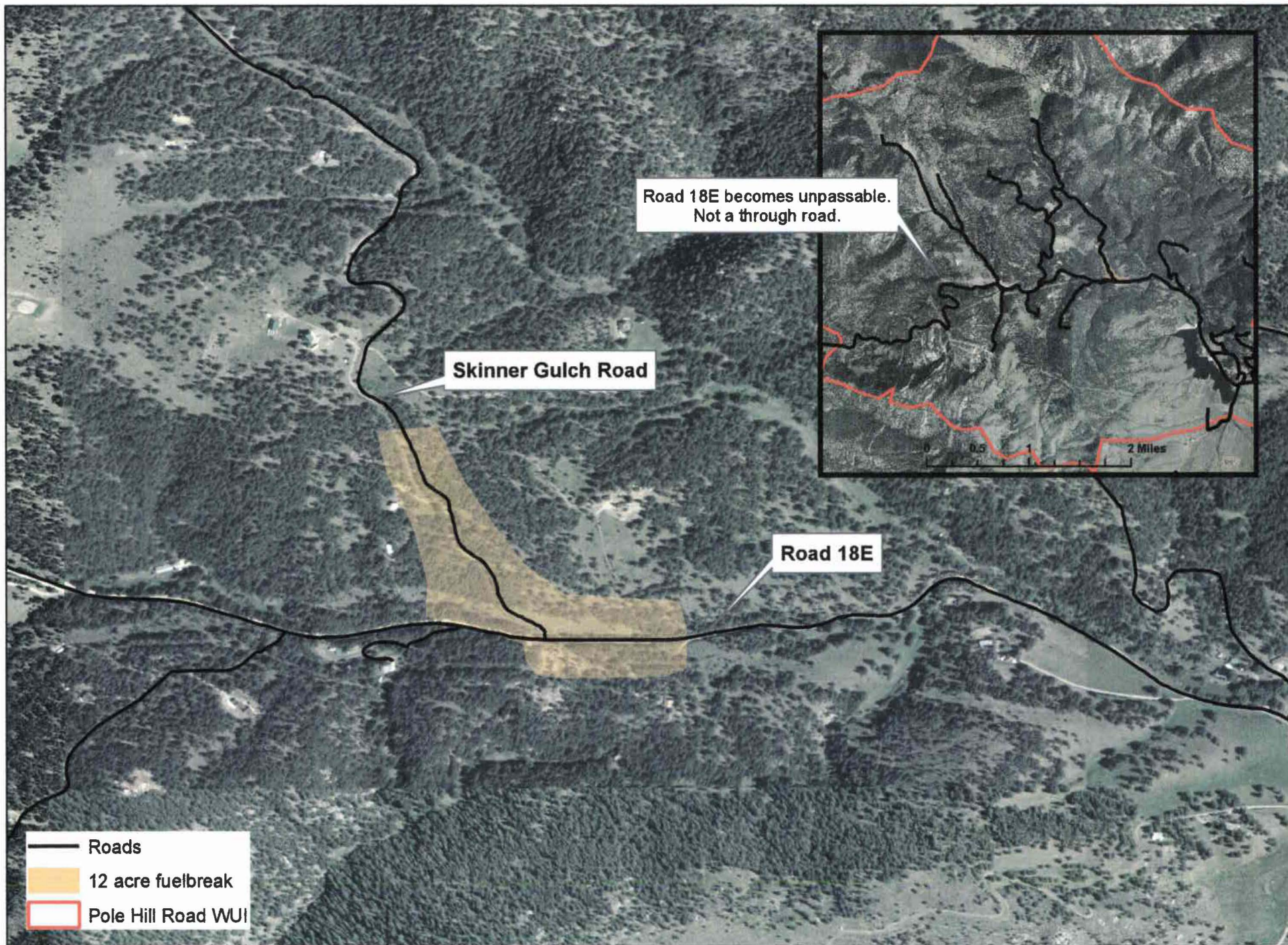
A copy of the plan must be submitted with this application, or on file with CSFS.

6	Project Category (check all that apply and answer related questions)			
	Hazard Fuels Reduction <input checked="" type="checkbox"/>			
	Number of acres to be treated:	12	Estimated cost per acre:	1,000
	Number of communities directly affected by this project:		3	
	Information & Education <input checked="" type="checkbox"/>			
	Number of citizens to be reached:	100		
	Planning <input type="checkbox"/>			
	Number of residences affected:			
	Project Type (check all that apply)			
	Assessment / Scoping:	<input type="checkbox"/>	Implementation / Treatment:	<input checked="" type="checkbox"/>
Homeowner / Community Action:	<input checked="" type="checkbox"/>	Monitoring / Evaluation:	<input type="checkbox"/>	
Information / Education:	<input checked="" type="checkbox"/>			

7	Grant Contributors (Matching Share)							
	(Applications will be disqualified if insufficient match is identified; federal dollars DO NOT qualify- see criteria & instructions for exception) Please specify each match contributor and the dollar amount of each contribution. PLEASE FILL ALL FIELDS							
	Contributors: (Please specify)	Residents and PHRCWPG						TOTAL
	Dollars (HardMatch):							\$ 0
	In-Kind (SoftMatch):	6,000						\$ 6,000
TOTAL:		\$ 6,000	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 6,000

8	Total Project Expense (break down matching share totals from block seven)				
	<i>Please fill all fields</i>	Grant Share (\$ Amount Requested)	Match (from block seven)		TOTAL
			Dollars	In-Kind	
	Personnel / Labor:			6,000	\$ 6,000
	Operating:	50			\$ 50
	Travel:				\$ 0
	Contractual Services:	5,950			\$ 5,950
	Equipment:				\$ 0
	Indirect Costs:				\$ 0
	TOTAL:	\$ 6,000	\$ 0	\$ 6,000	\$ 12,000

Attach Project Map Showing Specific Treatment Areas



0 360 720 1,440 Feet

Pole Hill Road Community Fuelbreak



Map created 10/2008
by Diana Selby, CSFS



COPY

Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Bureau of Land Management Task Order Program	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Forest Land Enhancement Program (a.k.a.: FLEP)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input type="checkbox"/>
Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	<input checked="" type="checkbox"/>
Stevens Fuels Treatment Funds	<input type="checkbox"/>
Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	<input type="checkbox"/>

☒ Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/>
04-20-09
KCName: Donna MooreAddress: 212 Sawmill RoadLoveland, CO 80537
NApproved for Payment
C.S.F.S.R 10704912
04-20-09
KC

P.O.# S033542

The above named has submitted a project application that has been reviewed and approved by the Colorado State Forest Service for funding from Federal Assistance.

KC
04-24-09Grant Number: 530988 - FCCooperator Match: \$16,359.46 NApproved Funding: \$6,000 NTotal Project: \$9,359.46 NCSFS Account Number: 530988 - 5980
07CPG SFA-NFP CG 6Amount of Payment: \$3,000
NCircle one: 1st Payment 2nd Payment 3rd Payment Final PaymentApproved by [Signature]
(Program manager signature)Date: 4/15/09

EXHIBIT B
GRANT REPORT/REIMBURSEMENT REQUEST
COMPETITIVE GRANTS

Project Number: 530988

In order to receive reimbursement, you **must** provide documentation supporting your expenditures covered by this initial disbursement and the corresponding match. You may request reimbursement on a monthly basis as you incur expenses, however the final 10% of the award amount will not be released until the final closeout report is received and accepted. Reimbursement requests must be accompanied by receipts for costs incurred and documentation of matching funds. Federal Funds **cannot** be used as sources for meeting the cost sharing (matching) provisions. **Matching Funds are expenses for goods, services and labor necessary for project implementation and incurred by the applicant which are not reimbursed with Federal Funds.**

1. Project #: 530988	2. Project Funding Amount: 6,000	3. Community Protected: Pole Hill Road Community
4. Make Payment To: Name: Donna Moore Address: 212 Sawmill Road Loveland, CO 80537		5. Period of Performance: From: 1-Dec-08 To: 23-Mar-09

6. What was accomplished? (Quantity or Status of Project. Please provide a description of accomplishments. Please be specific and report numbers such as acres treated, numbers of defensible spaces, tons of cubic feet or yards of slash collected, number of presentations, number of plans written. Attach additional sheets as necessary.)

*Thinning and limbing to CSFS fuelbreak
specifications on 6.3 acres.*

See Attached Word Document.

This is a partial reimbursement request and the first on submitted.

DCS

COPY

7. Reimbursement Request:

Project to Date Reimbursement Request Amount cannot exceed the total Project obligation as identified in the Project Document. The Total Reimbursement Request Amount cannot exceed the Total Matching Funds amount for the period being billed.

	Current Period			Project to Date		
	Reimbursement Amount Requested	Matching Funds		Reimbursement Amount Requested	Matching Funds	
	For Out of Pocket Expenses	Cash (hard match)	Donated (Inkind match)	For Out of Pocket Expenses	Cash (hard match)	Donated (Inkind match)
Labor*	\$3,000.00	\$5,442.91	DCS Hrs/\$19.51	Same as "Current Period"		
Material**			DCS			
Total	\$3,000.00	\$5,442.91	\$916.97	\$9,359.46		

Donated time and materials can only be counted towards the matching component.

* Use actual or costs or \$19.51/hour for donated or volunteers' time.

Note: Revised costs: \$19.51/Hr (Per Diana Selby)

** Use actual costs or fair market value of donated materials, supplies, or equipment use.

8. Amount Paid to CSFS for Products and/Or Services : \$ 0

9. I request reimbursement in the amount of \$3,000 for the work completed and documented above. I certify that to the best of my knowledge and belief this report is correct and complete and that all outlays reported are for the purposes set forth in the project documents.

Signature: *Donna Moore*

Date: *April 6, 2009*

All expenses are true and accurate and all cost share is true and accurate.

10. Certification (To be completed by CSFS District):

Work meets minimum standards as set forth by CSFS.

Signature: *Diana C. Selby*

Date: *April 9, 2009*

CSFS REQUEST FOR SUPPLIES OR SERVICES (other than GSA)

CSFS # 805 Rev. 02/04/05

Date: <u>4/28/2009</u> Requested By: <u>Diana Selby</u>		Resale to:		CSFS Invoice #:			
Vendor: <u>Danna Moore</u> <u>212 Sawmill Road</u> <u>Loveland, CO 80537</u> (PLEASE PROVIDE COMPLETE ADDRESS)			Ship To: <u>Fort Collins District</u> (PLEASE PROVIDE COMPLETE DELIVERY ADDRESS)				
Reason for Vendor Selection: <input type="checkbox"/> Sole Source (attach completed Sole Source Justification Form) <input type="checkbox"/> Previous Supplier <input checked="" type="checkbox"/> Other				Terms:			
Shipping Instructions: <input type="checkbox"/> FOB Fort Collins, Colorado <input type="checkbox"/> FOB		Delivery Date:		Deliver to: Initials <u> </u> Bldg <u> </u> Room <u> </u> Phone <u> </u>			
#	Account	Subcode	Qty	UOM	Description of Supplies or Services	Unit Price	Item Total
1	530988	5980			The Pole Hill Road Community Wildfire	\$3,000	
2					Protection Group will create a		
3					12-acre fuelbreak on County Road 18E		
4					and Skinner Gulch Road. Community		
5					members will contribute in-kind volunteer		
6					hours and funds will be spent to		
7					chip or remove slash & materials.		
8							
9							
10							
SPECIAL INSTRUCTIONS:			Expenditure Approval: Authorized Signature: _____ Date: _____			Subtotal: \$ <u>3,000</u> Discount: \$ _____ TOTAL: \$ <u>3,000</u>	



Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input type="checkbox"/>
Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	<input type="checkbox"/>
Stevens Fuels Treatment Funds	<input type="checkbox"/>
Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	<input type="checkbox"/>
Emergency Supplemental Funds (a.k.a.: ESF)	<input checked="" type="checkbox"/>

☐ Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/>

Name: Bruce Contini

Address: 916 Cypress Lane

Louisville, CO 80027

The above named has submitted a project application that has been reviewed and approved by the Colorado State Forest Service for funding from Federal Assistance.

Grant Number: 5308420-13

Cooperator Match: \$ 872.¹²

Approved Funding: \$ 1880

Total Project: \$ 2752.¹²

CSFS Account Number: 53084206-6693

Amount of Payment: \$ 1880.¹⁰

Circle one: 1st Payment

2nd Payment

3rd Payment

Final Payment

Approved by _____
(Program manager signature)

Date: _____

**EMERGENCY SUPPLEMENTAL FUNDS
LANDOWNER ASSISTANCE PROGRAMS
ACCOMPLISHMENT REPORT FOR REIMBURSEMENT (Page 1)**

**CONTINI
916 CYPRESS LANE
LOUISVILLE, CO 80027**

Project No. 5308420-13
(For Official Use Only-
No. from original application)

Applicant name (please print): Bruce R. CONTINI

	Total Contracted Services¹	Total Landowner Services²	Totals
Labor Cost (Actual)		2,156.63	A Labor Cost= 2156.63
Operating Exp ^{3,*} (Actual)	595.49		B Oper. Exp.= 595.49
Project Cost			C Total Project (A+B)= 2752.12
			Amount Originally Approved = 1880.00
			Amount to be Reimbursed not to exceed \$470 Per Acre 1880.00

¹ Any contracted services where payment was made for services.

² Use up to \$ 20.25/hour for Landowner time. This is the maximum allowable.

³ Equipment rental, supplies, etc. needed to complete project. (Tools and Equipment purchases are not reimbursable.)

⁴ Reimbursement amount cannot exceed amount approved. Requests for partial payments will be considered on a case by case basis.

⁵ Reimbursement amount cannot exceed \$470/acre for Emergency Supplemental Funds.

* Attach receipts, Cost Documentation Form D-ES (contractor costs, your time ledger, gas, oil, etc). Keep copies for your files.

Landowner Signature: [Signature]

Date: 9/30/10

All expenses are true and accurate and all cost share is true and accurate.

Mailing Address: 916 CYPRESS LANE

City: LOUISVILLE

County: Boulder State: CO Zip: 80027

Phone: 303-665-5749

Practice certified by: [Signature]

CSFS forester

Payment Approval: _____ Amount: _____ Date: _____

CSFS program manager

Return this form, along with your completed Cost Documentation Form to your local **Colorado State Forest Service District Office**. Retain documentation such as receipts and payment for six (6) years. The IRS considers reimbursable funds as ordinary income. Please consult your tax advisor.

01/19/10

**EMERGENCY SUPPLEMENTAL FUNDS
LANDOWNER ASSISTANCE PROGRAMS
ACCOMPLISHMENT REPORT (page 2)**

Project No. 5308420-13

To be completed by CSFS forester:

PROGRAM:

WUI Incentives D-space: _____ *I & D Prevention and Suppression – Bark Beetle:* _____

FRFTP: _____ *STEVENS' Fund:* _____ *SFA:* _____ *ESF:* _____ *Forest
Restoration Grant (SB71 and HB1199):* _____

WUI D-space Accomplishment:

No. of D-spaces = _____ Acres slash disposal = _____ Acres fuel breaks = _____

Acres thinned = 4 Acres pruned = _____

I & D Prevention and Suppression Accomplishment:

No. of infested trees treated: _____

Acres inspected and treated: _____

Acres thinned: _____

Accomplishment (Not included above) – LOA Practice Number:

#1 Plan Acres = _____

#5 Acres = _____

#9 Acres treated = _____

#2 Acres tree planting = _____

#6 Acres treated = _____

#10 Acres of restoration = _____

Acres treated = _____

#7 Acres treated = _____

#11 Acres = _____

#3 Acres treated = _____

#8 Acres treated = _____

#4 Acres planted/renovated = _____

CSFS REQUEST FOR SUPPLIES OR SERVICES (other than GSA)

Doc. NBR 885671
CSFS # 805 Rev. 02/04/05

Date: 7/23/10	Requested By: Diana Selby	Resale to:	CSFS Invoice #:
Vendor: <u>Bruce Contini</u> <u>9116 Cypress Lane</u> <u>Louisville, CO 80027</u> (PLEASE PROVIDE COMPLETE ADDRESS)		Ship To: <u>Fort Collins District</u> (PLEASE PROVIDE COMPLETE DELIVERY ADDRESS)	

COPY

Reason for Vendor Selection: <input type="checkbox"/> Sole Source (attach completed Sole Source Justification Form) <input type="checkbox"/> Previous Supplier <input checked="" type="checkbox"/> Other	Terms: ENCUMBERED 07-26-10 (K)
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Shipping Instructions: <input type="checkbox"/> FOB Fort Collins, Colorado <input type="checkbox"/> FOB	Delivery Date:	Deliver to: Initials ___ Bldg ___ Room ___ Phone ___
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#	Account	Subcode	Qty	UOM	Description of Supplies or Services	Unit Price	Item Total
1	5308420	Lele93			Bruce Contini will use an ES grant	\$1,880	
2	'09SLP HAZ	FUELS FR FC			to reduce Fuels on his property in		
3					The Pole Hill Road area in Larmer		
4					County. A minimum of 4 acres		
5					will be treated in primarily		
6					ponderosa pine.		
7							
8					PROJECT NBR. 5308420-13-FC		
9							
10							

SPECIAL INSTRUCTIONS: PLEASE ENCUMBER	Expenditure Approval: Authorized Signature: <u>B. B. B. B. B.</u> Date: <u>7/26/10</u>	Subtotal: \$ <u>1,880</u> Discount: \$ _____ TOTAL: \$ <u>1,880</u>
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Form A-ES

**EMERGENCY SUPPLEMENTAL FUNDS
LANDOWNER ASSISTANCE PROGRAMS
APPLICATION****PROJECT NUMBER:** 5308420-13
(For Official Use Only)

NAME: Bruce Contini
MAILING ADDRESS: 916 Cypress Lane
City: Louisville **State:** CO
Zip code: 80027
TELEPHONE NO: 303-665-5749

COPY**PROJECT ADDRESS/LEGAL DESCRIPTION:** _____

PRACTICES TO BE COMPLETED BY: 3/31/2011
Date

*Landowner and CSFS forester:**CSFS forester:*

Practice No. & Component Title	Quantity Requested	Quantity Approved
LOA 7 & 9 – Forest health and fire risk reduction	\$1,880	\$1,880
		Total: \$1,880

Request for financial assistance under the Emergency Supplemental LOA program is to meet the objective stated in the management plan. I will not receive more than the actual cost up to \$470 per acre. **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. Requests for partial payments will be approved on a case by case basis.

LANDOWNER SIGNATURE: _____ **DATE:** 4/9/10
To be completed by CSFS forester:

CSFS FIELD REVIEW SIGNATURE: _____ **DATE:** _____
(Additional USFWS guidelines addressed)

PROGRAM:**ESF:** _____

Funding Allocated: Byrdolubeda **AMOUNT:** \$ 1880 **DATE:** 7/26/10
CSFS District Forester

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.

01/19/10

PHRCWPG Exhibit B #6 Attachment

The current reimbursement request is the second submitted for work being done on this fuelbreak grant for the Pole Hill Road Community Wildfire Protection Group. The grant includes a total of 12 acres on the north and south sides of West County Road 18E and the east and west sides of Skinner Gulch Road. Gib and Lisa Coalwell, the second largest property owners of the 12 acres covered, have treated their proposed work on the northwest corner of 18E and Skinner Gulch Road and on the south side of 18E. At this time, the trees along these roads have been thinned, limbed, cut into firewood, and chipped. Chipping and felling of trees used landowner work and paid labor. Neighbors have hauled logs; slash has been chipped and scattered. Receipts and records, attached, support the time and type of work completed.

Jim Wiegand and Janet Collins have removed regeneration along 18E and part of their property adjacent to their home but have not used all of their portion of the grant; however, their reimbursement papers for work completed are attached.

Landowner assistance programs cost documentation

Date	By Whom	Location	Activity	Hours	Expense	Credits
1-3-09 to 1-10-09	Gib	North side of 18E	Hand limbing and dragging brush to the road	9		\$168.93
1/11/2009	Mike T	South side of 18E	Felling trees and limbing lengths	1		\$18.77
1-11-09 to 1-17-09	Gib	North side of 18E	Hand limbing and dragging brush to the road	5		\$93.85
1-18-09 to 1-24-09	Gib	North side of 18E	Hand limbing and dragging brush to the road	11		\$206.47
1/24/2009	Mike T.	South side of 18E	Felling trees and limbing lengths	3		\$56.31
1-25-31 to 1-31-09	Gib	North side of 18E	Hand limbing and dragging brush to the road	3		\$56.31
2-1-09 to 2-7-09	Gib	North side of 18E	Hand limbing and dragging brush to the road	3		\$56.31
2-8-09 to 2-14-09	Gib	North side of 18E	Hand limbing and dragging brush to the road	3 25		\$56.31
2/8/2009	Rick	South side of 18E	Chip brush along 18E	3.5	\$105.00	
2-16-09 to 2-23-09	Jeremy	North side of 18E	Felling trees and limbing lengths	16	\$200.00	
2-16-09 to 2-23-09	Diane	North side of 18E	Spotting Jeremy and rolling out logs. Loading logs on truck	16		\$300.32
2/20/2009	Rick	South side of 18E	Chip brush along 18E	1.5	\$45.00	
2/22/2009	Rick	North side of 18E	Chip brush along 18E	2	\$80.00	
2-22-09 to 2-28-09	Gib	North side of 18E	Hand limbing and dragging brush to the road	6		\$112.62
2-23-09 to 3-2-09	Jeremy	North side of 18E	Felling trees and limbing lengths	16	\$200.00	
2-23-09 to 3-2-09	Diane	North side of 18E	Spotting Jeremy and rolling out logs. Loading logs on truck	16		\$300.32
2/28/2009	Mike T.	South side of 18E	Felling trees and limbing lengths	2		\$37.54
3-1-09 to 3-7-09	Gib	North side of 18E	Hand limbing and dragging brush to the road	3		\$56.31
3-2-09 to 3-9-09	Jeremy	North side of 18E	Felling trees and limbing lengths	16	\$200.00	
3-2-09 to 3-9-09	Diane	North side of 18E	Spotting Jeremy and rolling out logs. Loading logs on truck	16		\$300.32
3/8/2009	Mike T.	South side of 18E	Felling trees and limbing lengths	3		\$56.31
3/12/2009	Rick	North side of 18E	Chip brush along 18E	6.5	\$260.00	
3/14/2009	Rick	North side of 18E	Chip brush along 18E	6	\$300.00	
3-9-09 to 3-16-09	Jeremy	North side of 18E	Felling trees and limbing lengths	16	\$200.00	
3-9-09 to 3-16-09	Diane	North side of 18E	Spotting Jeremy and rolling out logs. Loading logs on truck	16		\$300.32
3/16/2009	Mike T.	South side of 18E	Felling trees and limbing lengths	2		\$37.54
3-10-09 to 3-16-09	Gib	West side Skinner Gulch	Hand limbing and dragging brush to the road	10		\$187.70
3-17-09 to 3-23-09	Gib	West side Skinner Gulch	Hand limbing and dragging brush to the road	9		\$168.93
3/21/2009	Mike T.	South side of 18E	Felling trees and limbing lengths	2		\$37.54
4-1-09 to 4-16-09	Jeremy	West side Skinner Gulch	Felling trees and limbing lengths	16	\$200.00	
4-1-09 to 4-16-09	Diane	West side Skinner Gulch	Spotting Jeremy and rolling out logs. Loading logs on truck	16		\$300.32
4/4/2009	Rick	North side of 18E	Chip brush along 18E	4.5	\$225.00	
4-5-09 to 4-11-09	Gib	West side Skinner Gulch	Hand limbing and dragging brush to the road	6		\$112.62

Delbert S. Lockwood 11-24-09

Landowner assistance programs cost documentation

4-16-09 to 4-21-09	Jeremy	West side Skinner Gulch	Felling trees and limbing lengths	16	\$200.00	
4-16-09 to 4-21-09	Diane	West side Skinner Gulch	Spotting Jeremy and rolling out logs. Loading logs on truck	16		\$300.32
4/25/2009	Rick	West side Skinner Gulch	Chip brush along 18E	7	\$220.00	
4/26/2009	Rick	West side Skinner Gulch	Chip brush along 18E	6	\$360	
4-21-09 to 5-3-09	Jeremy	West side Skinner Gulch	Felling trees and limbing lengths	11.5	\$143.75	
4-21-09 to 5-3-09	Diane	West side Skinner Gulch	Spotting Jeremy and rolling out logs. Loading logs on truck	11.5		\$215.85
5-10-09 to 5-16-09	Gib	West side Skinner Gulch	Hand limbing and dragging brush to the road	6		\$112.62
5/31/2009	Mike	South side of 18E	Felling trees and limbing lengths	2		\$37.54
6/6/2009	Mike	South side of 18E	Felling trees and limbing lengths	3		\$56.31
6/13/2009	Gib	West side Skinner Gulch	Haul logs out	6		\$112.62
6/20/2009	Gib	West side Skinner Gulch	Haul logs out	8		\$150.16
11/7/2009	Gib	West side Skinner Gulch	Hand limbing and dragging brush to the road	4		\$75.08
			Total:	362	2938.75	\$4,082.47

Gilbert S. Cochran 11-24-09