

EMERGENCY SUPPLEMENTAL FUNDS LANDOWNER ASSISTANCE PROGRAMS APPLICATION

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NAME: Helle Sorensen and Neichael Pregue MAILING ADDRESS: 1648 gross Dam Rd City: 95 den State: CO Zip code! 80403 TELEPHONE NO: 363 642 0805 PROJECT ADDRESS/LEGAL DESCRIPTION: Same PRACTICES TO BE COMPLETED BY: FALL 2012 Date Landowner and CSFS forester: CSFS forester: Practice No. & Quantity Component Title Requested Approved
MAILING ADDRESS: 1648 Gross Daw Rd City: 951dew State: CO Zip code: 80403 TELEPHONE NO: 363 642 0805 PROJECT ADDRESS/LEGAL DESCRIPTION: 5ame PRACTICES TO BE COMPLETED BY: Fall 2012 Date Landowner and CSFS forester: CSFS forester: Practice No. & Quantity Quantity
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Total:
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:
To be completed by CSFS forester:
CSFS FIELD REVIEW SIGNATURE: DATE: 1/29/2013
(Additional USFWS guidelines addressed)
PROGRAM:
FGE. V
ESF: X
Funding Allocated: AMOUNT: \$ 940.00 DATE: 9/6/11

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.





Colorado State Forest Service Program Payment Request

GRANT PROGRAI	M (CHECK APPROPRIATE PROGRAM TYPE):	
Bureau of Land Management	Task Order Program	
Volunteer or Rural Fire Assista	ance (a.k.a.: VFA/RFA)	
Forest Land Enhancement Pro	ogram (a.k.a.: FLEP)	
Insect and Disease Prevention	and Suppression Program	
State Fire Assistance (a.k.a.: S	SFA)	
Front Range Fuels Treatment	Partnership (a.k.a.: FRFTP)	
Stevens Fuels Treatment Fund	ds	
Cooperative Fire Agreement (A 24-103-206-01)	Active Fire Suppression Cooperators; CRS#R-	
Emergency Supplemental Fun	ds (a.k.a.: ESF)	K
Checked for Federal suspensions Name: HELLE S	ension and debarment (State Office) http://www.epls	.gov/ 02-05-13
address: 1648 G	Ross Dam Road	
GOLDEN	CO 80403	Ammanuel for December
~		Approved for Payment C.S.F.S.
		2257994
		02-06-13
		(Ko)
	d a project application that has been rest Service for funding from Federal Assist	
Frant Number: 5308400 - 80-57	~	
pproved Funding: \$ 940.00	Total Project: \$3,44	2.50 -
SFS Account Number: 5308400-		940,00 1
Circle one: 1 st Payment 2 nd Pa	nyment 3 rd Payment Final Paymen	D v
approved by (Program manager signat	Date: 2/1/13	

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

Project No. 5308400 - B0 - 57

(For Official Use OnlyNo. from original application)

2

Applicant name (please print): HELLE SGRENSEN

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	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)		#3,442.50	A Labor Cost= # 3,442.50
Operating Exp ^{3, *} (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = \$3,442.50
			Amount Originally Approved =
			Amount to be Reimbursed not to exceed \$470 Per Acre

³ Equipment rental, supplies, etc. needed to complete project. (Tools and Equ	ipment purchases are not reimbursable.)
 Reimbursement amount cannot exceed amount approved. Requests for part Reimbursement amount cannot exceed \$470/acres for Emergency Supplement 	ental Funds.
* Attach receipts, Cost Documentation Form D-ES (contractor costs, your tir	
Landowner Signature: delle Sousse	Date: 1/29/13
All expenses are true and accurate and all cost share is true and accurate.	
Mailing Address: 1648 gross Dan Rd	City: golden
County: Boulder State: CO Zip: 80403	Phone: 303 642 0805
Practice certified by: BRYAN BAER (B)	
Payment Approval: CSFS program manager Amount: 9	1940. 20 Date: 2/1/13

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

COPY

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

Project No. 5309400 - BO- 57

To be completed by CSFS forester:

V	ROGRAM: VUI Incentives D-space: STEVENS estoration Grant (SB71 and	S' Fund:			2.0 ACRES HAZ. FUELS RED.
w	UI D-space Accomplishmen	ıt:			
No	o. of D-spaces =	Acres slash dis	posal =	Acres fuel brea	ks =
	Acres thinned =	Acres pruned =			
		ed trees treated: ed and treated: d:			
		i above) – LOA	Fractice 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 =_				





Colorado State Forest Service Program Payment Request

100	GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
	Bureau of Land Management Task Order Program	
	Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	
	Forest Land Enhancement Program (a.k.a.: FLEP)	- 60
	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)	X
ess:		
he i	above named has submitted a project application that has been re-	eviewed
ppro	above named has submitted a project application that has been recoved by the Colorado State Forest Service for funding from Federal Assistantes: 5308400 - 80 - 57	ince.
ppro t Nu ovec	above named has submitted a project application that has been reoved by the Colorado State Forest Service for funding from Federal Assista	2.5°
t Nu oved	above named has submitted a project application that has been recoved by the Colorado State Forest Service for funding from Federal Assistantian imber: 5308400 - 80 - 57 d Funding: \$ 940.000 Total Project: \$ 3,447	2.5°

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

Project No. 5308400 - B0 - 57

(For Official Use OnlyNo. from original application)

Applicant name (please print):	HELLE	SGRENSEN	
apparent manie (preuse print).		(10) Louid Assert	

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)		#3,442.50	A Labor Cost= # 3,442.50
Operating Exp ^{3, *} (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = \$3,442.50
			Amount Originally Approved
			Amount to be Reimbursed not to exceed \$470 Per Acre

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:

Date: 1 29 13

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

Mailing Address: 1648 9 555 Dan Rd City: 9cldon

County: Balder State: CO Zip: 80403 Phone: 363 642 6865

Practice certified by: Bryan Back Cost State: Cost St

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

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

Project No. 5308400 - BO- 57

To be completed by CSFS forester: PROGRAM: 2.0 ACRES WUI Incentives D-space: _____ I & D Prevention and Suppression - Bark Beetle: HAZ. FUELS RED. 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 = 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 =



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

e Serensen Som ha el Magaire	Activity/Expense: forest management slash management	5 6 12 10 9 14 8 10	# 101.25 # 121.50 # 243.00 # 202.50 # 182.25 # 283.50 # 162.00 # 162.25
son ha el Megaine	slash management	12 10 9 14 8 10	\$ 121.50 \$ 243.00 \$ 202.50 \$ 182.25 \$ 283.50 \$ 162.00 \$ 202.50 \$ 162.25
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		-	\$ 182.25
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		10	\$ 202.50
		6	\$121.50
9		14	\$ 283.50
-		6	\$121.50
		5	\$101.25
		5	\$ 101.25
A		10	\$ 202.50
33 - Table 1984		包	
	slock ains		
e		12	\$ 243.00
chael		9	\$ 182.25
50.~		10	\$20250
	+	10	\$ 202.50
7	TOTA	1 170	\$3,442.50
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