

**FLEP Grant 2006
Fort Collins District**

Funding Distribution & Project Tracking

Applicant	FLEP Practice	FLEP Code	Qty Requested	C/S Amount Requested	C/S Amount Approved	Acres Treated (Completed)	Date Inspected	Payment Amount
Bowen, Zack	Thinning	666-1	3	\$1,500.00	\$560.00			
Bowen, Zack	Chipping	666-3	3	\$900.00				
Budge, David	Thinning	666-1	4	\$2,000.00	\$560.00			
Budge, David	Chipping	666-3	2	\$2,000.00				
Budge, David	Pruning	660	4	\$300.00				
Colard, Christopher	Thinning	666-1	2	\$500.00	\$500.00			
Doyle, Cliff	Thinning	666-1	2.5	\$1,250.00	\$560.00			
Herrmann, Ray	Thinning	666-1	4	\$1,000.00	\$560.00			
Lucia, Edwin	Thinning	666-1	5	\$2,500.00	\$1,000.00			
	Thinning	666-1	5.65	\$2,825.00	\$560.00			
	Pruning	660	5.65	\$423.00				
Snyder, Glenn	Thinning	666-1	2	\$1,000.00	\$560.00			
Snyder, Glenn	Pruning	666-3	1	\$300.00				
Snyder, Glenn	Hauling	666-4	1	\$300.00				
Soulen, Ric	Thinning	666-1	1.5	\$750.00	\$560.00			
Soulen, Ric	Hauling	666-4	1.5	\$750.00				
Young, Michael	Thinning	666-1	4	\$600.00	\$560.00			
Total:				\$18,898.00	\$5,980.00	0.00		\$0.00

Michael Hughes
Assistant District Forester
Fort Collins District
Building 1052 Foothills Campus
Fort Collins, CO. 80523

June 01, 2006

Dear Mike,

I received the application to apply for the FLEP program for this year. Thank you. I am applying for 2.5 acres with the objective of Forest Stand Improvement – Thinning. As you know this will also help the Forest Stand Improvement – full break by getting all of that dead wood off the mountain.

My intent would be to work 1.5 acre on the right side of the road and 1 acre on the left side (going down the hill). This would be next to the FLEP work we did last year.

The purpose and goals would continue along the same lines as always. I will include them as follows: These are the objectives that were established at the beginning of our Forest Stewardship Plan. This entry could have been FLEP-9 Fire and Catastrophic Risk Reduction per Ray's assessment on the original plan (see page 9/plan page number) and the plan objectives.

The resources present will be our family's labor including 1 high school kid looking for work.

The equipment used will be 2 trucks, 2 trailers, 4 chainsaws, and 1 woodsplitter.

The time line will be from approved start date to 1 December 15, 2006 scheduled plan end.

The main intent will be to cut and stack the timber lying on the ground this fall. The standing dead (Fir budworm kill) will be cut and hauled out.

We do plan to sell the good wood for firewood. I believe this should explain our plan but if there are questions, please call me at 667-5986.

Thanks,

Cliff

Property Owner


Clifford A. Doyle

Date

6/01/06



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

PROJECT NUMBER: _____

(For Official Use Only)

NAME: CLIFFORD A. DOYLE

MAILING ADDRESS: 1140. E. BROADMOOR DR

City: LOVELAND

State: CO

Zipcode: 80537

TELEPHONE NO: 970-667-5986

PROJECT ADDRESS/LEGAL DESCRIPTION: _____

PRACTICES TO BE COMPLETED BY: _____

Practice No. & Component Title	Quantity Requested	Quantity Approved	Maximum C/S Amount	C/S Amount Requested	C/S Amount Approved
FLEP-3, 666-1	2.5 ACRES		1250.00	1250.00	
THINNING					
666-6 ALSO					
APPLIES					

Total: 1250.00

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

LANDOWNER SIGNATURE: Clifford A. Doyle DATE: 6/6/06

CSFS FIELD REVIEW SIGNATURE: [Signature] DATE: _____
(Additional USFWS guidelines addressed)

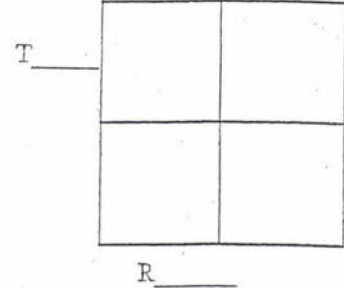
C/S APPROVED: [Signature] AMOUNT: \$ 560.⁰⁰ DATE: _____

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.

FOREST LAND ENHANCEMENT PROGRAM PLAN DESIGN

Sketch project area and design. Include numbers, volumes, rows, lengths, species, etc., as appropriate. Include structures and landmarks. Indicate, by location, the practices to be implemented. Show distances. Illustrate road access.
Use additional pages if needed for more detail.

SEE DRAWING (PLAN) OF THIS
PROPERTY



LIST PRACTICE AND COMPONENTS WITH IMPLEMENTATION SCHEDULE:

PRACTICE/COMPONENT/OTHER SPECIFICATIONS	COMPLETION DATE
SEE ATTACHED SHEETS	

Figure 2b:

8356

MANAGEMENT UNITS - DOYLE PROPERTY



2 - Management Unit Number