

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:	Lyons Fire Protection District
	Contact Person:	J. J. Hoffman Fire Chief
	Address:	P.O. Box 695
	City/Zip Code:	Lyons Colorado 80540
	Phone (Work/Cell):	303-775-1461
	Email:	chief@lyonsfire.org
	Fax:	303-823-5568

2	Community At Risk Information			
	Name of Project:		Lyons FPP	
	Community Name(s):		Community of Lyons	
	County:		Boulder	
	Latitude (decimal degrees):		Congressional District:	
	Longitude (decimal degrees):			
	Threat Description (check all that apply)			
	Homes:	<input type="checkbox"/>	Number of:	50
Businesses:	<input type="checkbox"/>	Number of:		
Watersheds:	<input 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	
	Will this Project be conducted as a Pass-Through Grant? X 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)		

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.	
4	<p>Provide a brief scope of work that clearly describes how grant funds will be spent. (This should be more specific than the project description) These Funds will Be used For Mitigation efforts Throughout Lyons Fire Protection District. Mitigation will include things such as, Defensible space, Thinning, Egress & Ingress For Emergency Equipment, Fuel Break's, Fuels Reduction,</p>
	<p>Describe all planned long-term maintenance (grant funded or other). Currently our Goal is to move forward with our CWPP. We will also Look For funding from H.O.A.'s Individual Home owners, Road Boards as well as other Federal & State Grant Funds as they become available to us.</p>
	<p>What is the duration of this project? (check one) <input checked="" type="checkbox"/> 1 Year <input type="checkbox"/> 2 Years <input type="checkbox"/> 3 Years <input type="checkbox"/> 4 Years</p>
	<p>Is this a continuing project from previous year/s? (check one) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
	<p>Provide a timeline for the project we anticipate these funds assisting us in mitigation efforts For approx. 1 year From the date on this application Ending Approx November OF 2011</p>

Interagency Collaboration	
5	<p>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.).</p> <p>Lyons Fire Protection District can Hopes to provide some of the equipment cost i.e. chipper for some projects.</p>
Community Wildfire Protection Plan (CWPP)	
	<p>Does this community have a wildfire protection plan that follows the Healthy Forest Restoration Act CWPP guidelines? (check one) <input type="checkbox"/> yes <input checked="" type="checkbox"/> no But we will in By the Beginning year of 2011</p>
	<p>Is this project part of the plan? (check one) <input checked="" type="checkbox"/> yes <input type="checkbox"/> no</p>

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: 35		Estimated cost per acre:	
	Project Type (check all that apply)			
	Defensible Space	<input checked="" type="checkbox"/>	Thinning w/o Product	<input checked="" 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:		\$ 0
	TOTAL:	\$0	\$ 0

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

Emergency Supplemental

2010 Grant Application

DISTRICT'S: Please Complete

District Submitting Project:	Boulder
Forester Submitting Project:	Bryan Baer
District Priority Number:	
Date Submitted:	11/23/2010
FOR REVIEWER'S USE ONLY:	
Rating:	

Applicant Information	
Applicant:	Lyons Fire Protection District
Contact Person:	JJ Hoffman (Fire Chief)
Address:	PO Box 695
City/Zip Code:	Lyons, CO 80540
Phone (Work/Cell):	303-775-1461
Email:	chief@lyonsfire.org
Fax:	303-823-5568

Community At Risk Information			
Name of Project:	Lyons		
Community Name(s):	Lyons		
County:	Boulder	Congressional District:	
Latitude (decimal degrees):		Longitude (decimal degrees):	
Threat Description (check all that apply)			
Homes:	<input checked="" type="checkbox"/> X	Number of:	50
Businesses:	<input type="checkbox"/>	Number of:	
Watersheds:	<input type="checkbox"/>	Number of:	
Infrastructure:	<input type="checkbox"/>	Estimated value of:	
Economic Viability:	<input type="checkbox"/>	Estimated value of:	
Historic Structures:	<input 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	\$16,450.00
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>Lyons FPD is located in and around Lyons, Colorado. Most of the properties throughout the project area are composed of predominantly Ponderosa Pine. There are also areas where it is common to see Aspen, as well as Douglas Fir (mainly where slopes have a northern aspect). Ground cover is composed of many random grass species, as well as a good component of shrubby juniper. Most of the project will be conducted in areas with elevations ranging from 5,000-7,000 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 Funding will be used to accomplish a series of mitigation efforts throughout the Lyons community. Mitigation efforts include defensible spacing, shaded fuel breaks, emergency ingress/egress, and forest thinning. Slash will be dealt with appropriately, most likely piled for burning at a later time. Bole-wood will be dealt with appropriately, whether it be cut for firewood, or left for nutritional value to decompose on the forest floor.

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

Currently, our goal is to move forward with the CWPP. We will also look for funding throughout the HOA's. Maintaining project conditions will continually take place as new vegetation becomes apparent.

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

Project work will begin ASAP, and continue through completion, which is targeted for December 31, 2011.

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 Lyons FPD hopes to be able to lend the use of a chipper throughout some or all of the project work that takes place. Other donations will be used accordingly, as they become available.

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 *(plan completion date of: January, 2011)

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:	35	Estimated cost per acre:	\$1,000.00
	Project Type (check all that apply)			
	Defensible Space	<input checked="" type="checkbox"/>	Thinning w/o Product	<input checked="" 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:	\$16,450.00	\$ 16,450.00
	TOTAL:	\$16,450.00	\$ 16,450.00

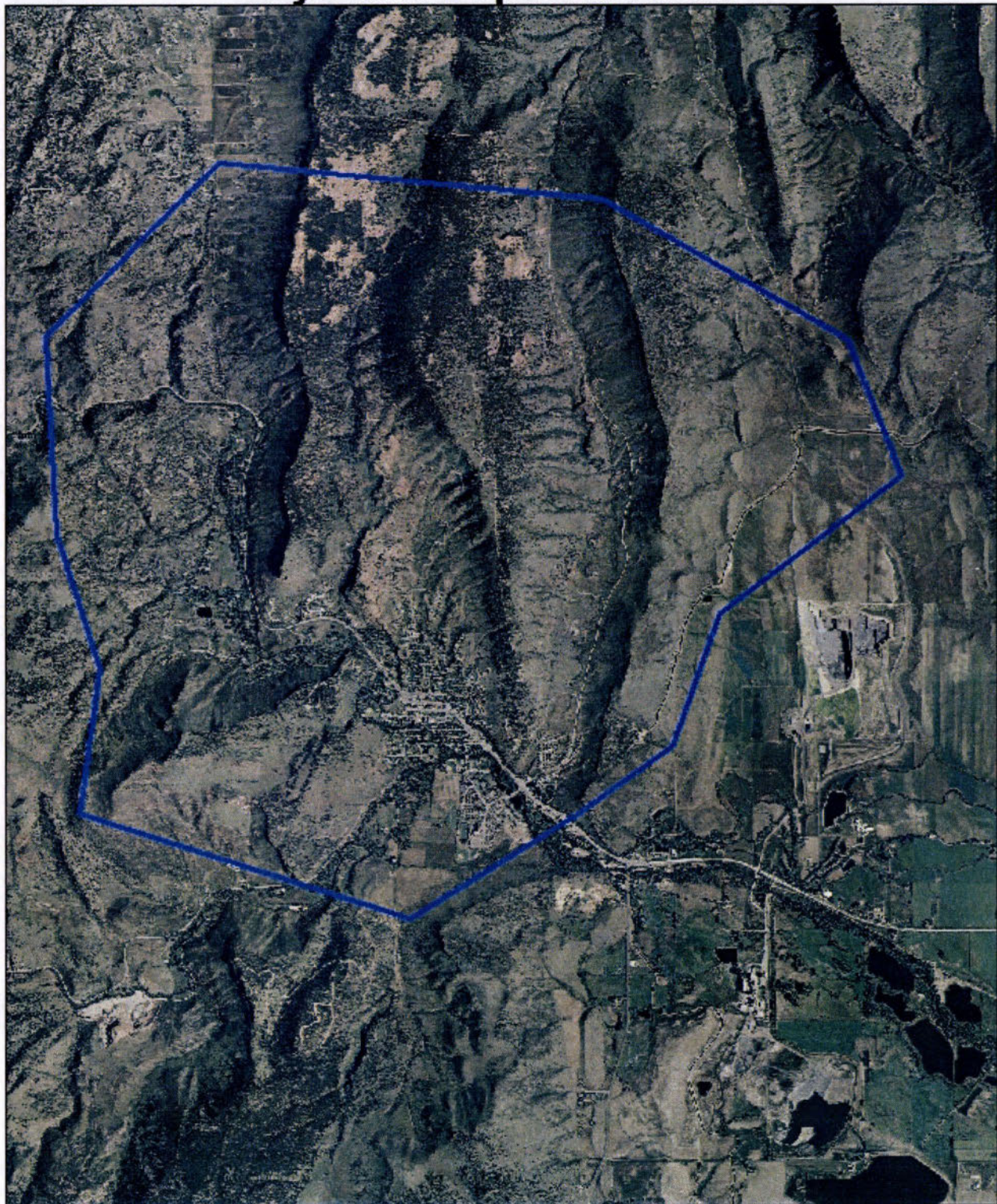
Grant funding may only be used for Contractual Service.

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

Lyons Proposal Area



0 0.5 1 2 3 Miles

Lyons FPD Proposal: 35 Acres

 Lyons

Created By: Bryan Baer
CSFS-Boulder District
November, 2010





EMERGENCY SUPPLEMENTAL FUNDS
LANDOWNER ASSISTANCE PROGRAMS
APPLICATION

Form A-ES

PROJECT NUMBER: 5308400-B0-17

(For Official Use Only)

NAME: Lynns Fire Protection District

MAILING ADDRESS: P.O. Box 695

City: Lynns State: Colorado

Zip code: 80540

TELEPHONE NO: 303-823-6611

PROJECT ADDRESS/LEGAL DESCRIPTION: T3N, R70W, Section # 5, 6, 7, & 8

PRACTICES TO BE COMPLETED BY: FALL 2011
Date

Landowner and CSFS forester:

CSFS forester:

Practice No. & Component Title	Quantity Requested	Quantity Approved
		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: J. J. [Signature] Fire Chief

DATE: 11/9/10

To be completed by CSFS forester:

CSFS FIELD REVIEW SIGNATURE: [Signature]

DATE: 12/10/12

(Additional USFWS guidelines addressed)

PROGRAM:

ESF: X

Funding Allocated: [Signature]

CSFS District Forester

AMOUNT: \$16,450.00 DATE: 11-22-10

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.



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 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/> 01-15-13 (Ka)

Name: LYONS FIRE PROTECTION DIST.

Address: PO Box 695

LYONS, CO 80540

Approved for Payment

C.S.F.S.

2224585

01-15-13

(Ka)

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: 5308400-BO-17 ~

Approved Funding: \$16,450.00 ~

Total Project: \$4,797.25 ~

CSFS Account Number: 5308400-6693

Amount of Payment: \$4,606.00 ~

'09SUP HAZ FUELS FR BO

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

Approved by

(Program manager signature)

Date:

11/14/13

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

Project No. 5308400-80-17

(For Official Use Only-

No. from original application)

Applicant name (please print): LYONS FPD: MICHAEL MARZANO

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	\$ 4,797.25	/	A Labor Cost= \$ 4,797.25
Operating Exp ^{3,*} (Actual)			B Oper. Exp.= N/A
Project Cost			C Total Project (A+B) = \$ 4,797.25
			Amount Originally Approved = \$ 16,450.00
			Amount to be Reimbursed not to exceed \$470 Per Acre \$ 4,606.00

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: [Signature]Date: 11-27-2012

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

Mailing Address: PO Box 695City: LYONSCounty: BOULDER State: CO Zip: 80540Phone: 303-823-6611Practice certified by: B. B. (BRYAN BAER)

CSFS forester

Payment Approval: [Signature]

CSFS program manager

Amount: \$4,606.00 Date: 1/11/13

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

COPY

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

Project No. S308400-BO-17

To be completed by CSFS forester:

PROGRAM:

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

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

9.8 ACRES
HAZ. FUELS RED.

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 = _____

Lyons Fire Protection District
ESF Grant - Project Number 5308400-BO-17

Award \$16,450

<u>Payment History:</u>	<u>Amount</u>	<u>Reference</u>	<u>Date</u>
1st Payment	\$6,486.00	Doc Nbr 1422927	7/21/2011
2nd Payment	\$3,337.00	Doc Nbr 1582778	11/9/2011
3rd Payment	\$2,021.00	Doc Nbr 1719134	2/17/2012
4th Payment	\$4,606.00	Doc Nbr 2224585	1/15/2013
Total	<u>\$16,450.00</u>		



Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
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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"/>
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Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	<input type="checkbox"/>
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☐ Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/>

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Address: PO Box 695

LYONS, CO 80540

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.

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Total Project: \$4,797.25

CSFS Account Number: 5308400-6693

Amount of Payment: \$4,606.00

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. 5308400-80-17
(For Official Use Only-
No. from original application)

Applicant name (please print): LYONS FPD: MICHAEL MARZANO

	Total Contracted Services ¹	Total Landowner Services ²	Totals
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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: [Signature]

Date: 11-27-2012

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

Mailing Address: PO Box 695

City: LYONS

County: BOULDER State: CO Zip: 80540

Phone: 303-823-6611

Practice certified by: [Signature] (BAYAN BAER)
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. S308400-BO-17

To be completed by CSFS forester:

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

9.8 ACRES
HAZ. FUELS RED.

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: _____

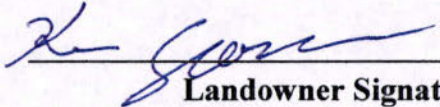
Acres thinned: _____

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

2012


Date	By Whom:	Activity/Expense:	Hours	Expenses
2-18	Ken	Sawyer	5	101.25
2-18	Tricia	Drag slash	5	101.25
2-18	Cameron	Drag slash	5	101.25
2-19	Ken	Sawyer	4	81
2-19	Cameron	Drag slash	4	81
3-10	Ken	Sawyer	5	101.25
3-10	Cameron	Drag slash	6	121.50
3-10	Corey	Sawyer	4	81
3-11	Corey	Sawyer	6	121.50
3-11	Ken	Drag slash	6	121.50
4-7	Ken	Sawyer	4	81
4-7	Tricia	Drag slash	4	81
4-7	Cameron	Drag slash	4	81
4-8	Ken	Sawyer	3	60.75
4-8	Cameron	Drag slash	3	60.75
4-28	Ken	Sawyer	6	121.50
4-29	Ken	Sawyer	5	101.25
5-4	Cameron	Drag slash	3	60.75
5-12	Cameron	Drag slash	4	81
5-12	Marino	Drag slash	4	81
5-26	Ken	Sawyer	4	81
5-26	Cameron	Drag slash / Sawyer	6	121.50
5-26	Marino	Drag slash	6	121.50
7-14	Ken	Sawyer	5	101.25
7-28	Cameron	Drag slash	4	81
7-28	Marino	Drag slash	4	81
9-1	Ken	Drag slash	4	81
9-1	Cameron	Drag slash	4	81
9-2	Ken	Drag slash	3	60.75
9-2	Cameron	Drag slash	3	60.75

1/2010

TOTAL → \$2,612.25

**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

Date	By Whom:	Activity/Expense:	Hours	Expenses
11-18-11	Bob Alm	Fire Mitigation - Tree Cutting @ \$30/hr.	5	150. ⁰⁰
11-21-11	Bob Alm	Cutting trees, loading logs, hauling	4	120. ⁰⁰
11-23-11	Bob Alm	" " " " "	3	90. ⁰⁰
11-25-11	Bob Alm	" " " " "	5.5	165. ⁰⁰
				<u>525.⁰⁰</u>
12-27-11	Bob Alm	Cutting, loading, hauling	3	90. ⁰⁰
		Tractor - skidding logs @ \$50/hr.	2	100. ⁰⁰
		Tractor - skidding logs @ \$50/hr.	2	100. ⁰⁰
		Cutting, loading, hauling	1.5	45. ⁰⁰
12-28-11	Bob Alm	Tractor - skidding logs	2	100. ⁰⁰
		Labor - loading logs, hauling	1	25. ⁰⁰
		Cutting trees	2	60. ⁰⁰
1-2-12	Bob Alm	Cutting Trees	1.5	45. ⁰⁰
		Loading, hauling, cutting	4.5	135. ⁰⁰
				<u>\$ 700.⁰⁰</u>
1-20-12	Timothy Alm	Cutting trees, loading, hauling	7.5	225. ⁰⁰
1-20-12	Bob Alm	Dragsing, limbing, bucking	7	
1-21-12	Bob Alm	Dragsing, limbing, bucking	6	
				<u>390.⁰⁰</u>
	Andrew Alm			
1-28-12	Andrew Alm	Dragsing, limbing, bucking	6 1/4	188. ⁰⁰
	Andrew Alm	Cutting	1.5	45. ⁰⁰
	Andrew Alm	(labor)	4.5	112. ⁰⁰
				<u>345.⁰⁰</u>
	Total - to Bob, Timothy & Andrew Alm			<u>2,185.⁰⁰</u>

1/2010

637269

Bob ALM

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE	
				11-18-11	
NAME JEANNE MOORE					
ADDRESS					
CITY, STATE, ZIP					
SOLD BY		CASH	C.O.D.	CHARGE	ON. ACCT.
		MOSE. RETD.		PAID OUT	

QUANTITY	DESCRIPTION	PRICE	AMOUNT
11/18 1	5 HRS FIRE MIT. CUTTING	@ 30	350 cc
11/18 2	4 HRS "	"	120 cc
11/18 3	3 HRS "	"	90 cc
11/25 4	5.5 HRS "	"	165 cc
5			
6			525 00
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			

RECEIVED BY

A-5395
T-46320/46350

KEEP THIS SLIP FOR REFERENCE

01-11

PAID
THANK YOU
BA

CIC # 178
11/25/11

BOS ALM

651211

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE 1-2-12	
NAME JEANE MOORE					
ADDRESS					
CITY, STATE, ZIP					
SOLD BY		CASH	C.O.D.	CHARGE	ON ACCT.
		MDSE. RETD.		PAID OUT	

QUANTITY	DESCRIPTION	PRICE	32 AMOUNT
1	3 HRS CUTTING + LOADING	@ 30	90 00
2	2 HRS TRACTOR SKIDDING LOGS	@ 50	100 00
3	2 HRS TRACTOR " "	@ 50	100 00
4	1.5 HRS CUTTING + LOADING	@ 30	45 00
5	2 HRS TRACTOR	@ 50	100 00
6	1 HR LABOR	@ 25	25 00
7	2 HRS CUTTING	@ 30	60 00
8	1.5 HRS CUTTING BIG TREES	@ 30	45 00
9	4.5 HRS LOADING + HAULING	@ 30	135 00
10			700 00
11			
12			
13			
14			
15			
16			
17			
18			

THANK YOU PAID

Bd

RECEIVED BY

A-5905
T-46320/46350

KEEP THIS SLIP FOR REFERENCE

01-11

Timothy Alm

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE 1-20-12	
NAME <i>Bill Moore</i>					
ADDRESS					
CITY, STATE, ZIP					
SOLD BY		CASH	C.O.D.	CHARGE	ON. ACCT.
		MDSE. RETD.		PAID OUT	

QUANTITY	DESCRIPTION	PRICE	AMOUNT
1 7.5	hours cutting &		
2	loading branches		
3	& wood	30	225
4			
5			
6		225	
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			

1245
PA. 1/20/12

RECEIVED BY	<i>Timothy Alm</i>
-------------	--------------------

A-5005
T-46320/46350

KEEP THIS SLIP FOR REFERENCE

01

031278
637278

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE	
NAME		ADDRESS		1-20-12	
ADDRESS		CITY, STATE, ZIP			
SOLD BY		CASH	C.O.D.	CHARGE	ON. ACCT.
					MDSE. RETD.
		PAID OUT			
QUANTITY	DESCRIPTION			PRICE	AMOUNT
1	13	ivs dragging / limbing / bucking			\$30/hr
2					390.00
3					
4					
5					\$390.00
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
RECEIVED BY					
Chris Allen					

A-5505
T-46323/46350

KEEP THIS SLIP FOR REFERENCE

021417

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE 1/28/12																																																																													
NAME <i>Jeane Moore</i>																																																																																	
ADDRESS																																																																																	
CITY, STATE, ZIP																																																																																	
SOLD BY	CASH	C.O.D.	CHARGE	ON. ACCT.	PAID OUT																																																																												
<table border="1"> <thead> <tr> <th>QUANTITY</th> <th>DESCRIPTION</th> <th>PRICE</th> <th>AMOUNT</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>6 1/4 hrs dragging/bucking/limbing</td> <td>\$30/hr</td> <td>188 00</td> </tr> <tr> <td>2</td> <td>1 1/2 hrs cutting</td> <td>\$30/hr</td> <td>45 00</td> </tr> <tr> <td>3</td> <td>4 1/2 hrs labor</td> <td>\$25/hr</td> <td>112 50</td> </tr> <tr> <td>4</td> <td></td> <td></td> <td></td> </tr> <tr> <td>5</td> <td></td> <td></td> <td></td> </tr> <tr> <td>6</td> <td></td> <td></td> <td>345 50</td> </tr> <tr> <td>7</td> <td></td> <td></td> <td></td> </tr> <tr> <td>8</td> <td></td> <td></td> <td>188 00</td> </tr> <tr> <td>9</td> <td></td> <td></td> <td>(PAID)</td> </tr> <tr> <td>10</td> <td></td> <td></td> <td></td> </tr> <tr> <td>11</td> <td></td> <td></td> <td>157 50</td> </tr> <tr> <td>12</td> <td></td> <td></td> <td></td> </tr> <tr> <td>13</td> <td></td> <td></td> <td></td> </tr> <tr> <td>14</td> <td></td> <td></td> <td></td> </tr> <tr> <td>15</td> <td></td> <td></td> <td></td> </tr> <tr> <td>16</td> <td></td> <td></td> <td></td> </tr> <tr> <td>17</td> <td></td> <td></td> <td></td> </tr> <tr> <td>18</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						QUANTITY	DESCRIPTION	PRICE	AMOUNT	1	6 1/4 hrs dragging/bucking/limbing	\$30/hr	188 00	2	1 1/2 hrs cutting	\$30/hr	45 00	3	4 1/2 hrs labor	\$25/hr	112 50	4				5				6			345 50	7				8			188 00	9			(PAID)	10				11			157 50	12				13				14				15				16				17				18			
QUANTITY	DESCRIPTION	PRICE	AMOUNT																																																																														
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3	4 1/2 hrs labor	\$25/hr	112 50																																																																														
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RECEIVED BY <i>Charles Moore</i>																																																																																	

COPY



Colorado State Forest Service Program Payment Request

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)	
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

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

62-17-12

Name: LYONS FPD (JJ HOFFMAN)Address: P.O. Box 695LYONS, CO 80540Approved for Payment
C.S.F.S.

1719134

02-17-12

(Kc)

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: 5308400-80-17 ~Approved Funding: \$16,450.00 ~Total Project: \$4,501.72 ~CSFS Account Number: 5308400-6693 ~109SUP HAZ FUELS Fr BOAmount of Payment: \$2,021.00 ~Circle one: 1st Payment 2nd Payment 3rd Payment Final PaymentApproved by [Signature]
(Program manager signature)Date: 2/13/12

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

Project No. 5308400-80-17(For Official Use Only-
No. from original application)Applicant name (please print): LYONS FPD (JJ HOFFMAN - FIRE CHIEF)

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	\$4,501.72		A Labor Cost= \$4,501.72
Operating Exp ^{3,4} (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = \$4,501.72
			Amount Originally Approved = \$16,450.00
			Amount to be Reimbursed not to exceed \$470 Per Acre \$2,021.00

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: JJ Hoffman Fire ChiefDate: 2-2-2012

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

Mailing Address: P.O. Box 645City: LyonsCounty: Boulder State: Colorado Zip: 80540Phone: 303-823-6611Practice certified by: BRYAN BAER (B.B.)
CSFS foresterPayment Approval: [Signature]
CSFS program managerAmount: \$2,021.00 Date: 2/19/12

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. 5308400-80-17

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): _____

4.3 ACRES
HAZ FUELS RED.

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 = _____ | | |



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: LYONS FPD (JJ HOFFMAN)

Address: P.O. Box 695

LYONS, CO 80540

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: 5308400-80-17

Approved Funding: \$16,450.00

Total Project: \$4,501.72

CSFS Account Number: 5308400-6693

Amount of Payment: \$2,021.00

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. 5308400-80-17

(For Official Use Only-

No. from original application)

Applicant name (please print): LYONS FPD (JJ HOFFMAN - FIRE CHIEF)

	Total Contracted Services¹	Total Landowner Services²	Totals
Labor Cost (Actual)	<u>\$ 4,501.72</u>		A Labor Cost= <u>\$ 4,501.72</u>
Operating Exp ^{3,*} (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = <u>\$ 4,501.72</u>
			Amount Originally Approved = <u>\$ 16,450.00</u>
			Amount to be Reimbursed not to exceed \$470 Per Acre <u>\$ 2,021.00</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: JJ Hoffman Fire ChiefDate: 2-2-2012

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

Mailing Address: P.O. Box 645City: LyonsCounty: Boulder State: Colorado Zip: 80540Phone: 303-823-6611Practice certified by: BRYAN BAER (BB)
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. 5308400-80-17

To be completed by CSFS forester:

PROGRAM:

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

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

4.3 ACRES
HAZ FUELS RED.

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 = _____		

Bob ALM

817599

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE 9/14/11	
NAME RICK & SANDY MARSH					
ADDRESS					
CITY, STATE, ZIP					
SOLD BY		CASH	C.O.D.	CHARGE	ON. ACCT.
		MDSE. RETD.	PAID OUT		
QUANTITY	DESCRIPTION			PRICE	AMOUNT
1	4.25 HRS FIRE MIT. THINNING			@ 30	127 50
2	5.5 FIRE MIT. THINNING +				
3	BRUSH MIT. LOADING			@ 30	165 00
4					
5					282 50
6					125
7					407 50
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
RECEIVED BY					

817600

Timothy A/m

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE 9-18-11		
NAME Sandy Marsh						
ADDRESS						
CITY, STATE, ZIP						
SOLD BY	CASH	C.O.D.	CHARGE	ON. ACCT.	MDSE. RETD.	PAID OUT
QUANTITY	DESCRIPTION			PRICE	AMOUNT	
1	5.5	cutting & loading			30	165
2						
3						
4						
5						165
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17		Paid				
18						
RECEIVED BY Timothy A/m 9/18/11						

Bob ALM

A-5805
T-46320/46350

01-11

Timothy Alm

A-5805
T-46320/46350

01-11

Bob ALNY

A-5805
T-46320/46350

01-11

637258

Timothy Alm

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE	
NAME <i>Sandy + Rick Marsh</i>					
ADDRESS					
CITY, STATE, ZIP					
SOLD BY	CASH	C.O.D.	CHARGE	ON. ACCT.	MDSE. RETD. PAID OUT
QUANTITY	DESCRIPTION			PRICE	AMOUNT
1	<i>3.75 hours loading slash</i>			<i>30</i>	<i>112.50</i>
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
RECEIVED BY <i>Timothy Alm</i>					

112.50

*paid
9/30/11*

B & b ALM

A-5805
T-46320/46350

01-11

637260

Timothy Alm

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE 10/6/11	
NAME Rick & Sandy Marsh					
ADDRESS					
CITY, STATE, ZIP					
SOLD BY		CASH	C.O.D.	CHARGE	ON ACCT.
		MDSE. RETD.		PAID OUT	
QUANTITY	DESCRIPTION			PRICE	AMOUNT
1	7.5	home loading branches			
2		& cutting			
			30	225	
3					
4					
5					
6					
7					
8					\$225
9					
10					
11		paid			
12		10/6/11			
13					
14					
15					
16					
17					
18					
RECEIVED BY Timothy R Alm					

637261

Bob ALA

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE 10/10/11	
NAME RICK & SANDY MARSH					
ADDRESS					
CITY, STATE, ZIP					
SOLD BY		CASH	C.O.D.	CHARGE	ON. ACCT.
		MDSE. RETD.		PAID OUT	
QUANTITY	DESCRIPTION			PRICE	AMOUNT
1	4 HRS	CUTTING - FIRE MIT			@ 30 120.00
2	4 HRS	"	"	"	@ 30 120.00
3	4 HRS	"	"	"	@ 30 120.00
4	6.25 HRS	LOADING BRANCHES			@ 30 187.50
5	9.5 HRS	LOAD & HAULING BRANCHES			@ 30 285.00
6		FUEL			20.00
7					
8					852.50
9	PAID 10/14/11				
10	THANK YOU				
11	Bd				
12					
13					
14					
15					
16					
17					
18					
RECEIVED BY					

637262

Timothy Alm

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE 10-14-11	
NAME Marsh					
ADDRESS					
CITY, STATE, ZIP					
SOLD BY	CASH	C.O.D.	CHARGE	ON. ACCT.	MDSE. RETD. PAID OUT

QUANTITY	DESCRIPTION	PRICE	AMOUNT
1 4.75	loading binder	30	142 50
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			

9.12
142 50

paid 10/14/11

RECEIVED BY Timothy Alm

Bob ALM

637265

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE 10/19/11	
NAME RECK & SANDY MARSH					
ADDRESS					
CITY, STATE, ZIP					
SOLD BY		CASH	C.O.D.	CHARGE	ON. ACCT.
		MOSE. RETD.		PAID OUT	

QUANTITY	DESCRIPTION	PRICE	AMOUNT
1	5.5 HRS LOADING BRANCHES	@ 30	165.00
2	2 HRS HAUL TO LOUGLAND	@ 30	60
3	2 HRS FUEL SHARE		20
4	DUMPING FEE		37.50
5	3 HRS LOAD BRANCHES	@ 30	90
6	2 HRS HAUL TO LOUGLAND	@ 30	60
7	DUMP FEE 10 YD. AT 250		25
8			457.50
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			

PAID 10/21/11

THANK YOU

BA

RECEIVED BY

637264

Timothy Alm

CUSTOMER'S ORDER NO.	DEPARTMENT	DATE <i>10/21/11</i>
NAME <i>Marsh</i>		
ADDRESS		
CITY, STATE, ZIP		

SOLD BY	CASH	C.O.D.	CHARGE	ON. ACCT.	MOSE. RETD.	PAID OUT
---------	------	--------	--------	-----------	-------------	----------

QUANTITY	DESCRIPTION	PRICE	AMOUNT
1 <i>4.25</i>	<i>hour loading branches</i>	<i>30</i>	<i>142.50</i>
2 <i>3</i>	<i>hour loading branches</i>	<i>30</i>	<i>90</i>
3			<i>232.50</i>
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			

Hub
232.50

paid
10/21/11

RECEIVED BY *Timothy Alm*

11-10-11

Hi, Bryan & Allen,

These copies are for
your Boulder District Office
files.

Best regards,

Karen Cullen

(970) 491-3006



COPY

Colorado State Forest Service Program Payment Request

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)	
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

☒ Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/>
11-08-11
KCName: LYONS FPD (JJ HOFFMAN)Address: P.O. Box 695LYONS, CO 80540Approved for Payment
C.S.F.S.

1582778

11-09-11
KC

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: 5308400-80-17 ~Approved Funding: \$ 16,450.00 ~Total Project: \$ 7,480.00 ~CSFS Account Number: 5308400-6693
'09 SUP HAZ FUELS Fr 80Amount of Payment: \$ 3,337.00 ~Circle one: 1st Payment 2nd Payment 3rd Payment Final PaymentApproved by [Signature]
(Program manager signature)Date: 11/3/11

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

Project No. 5308400-BO-17 ✓
(For Official Use Only-
No. from original application)

Applicant name (please print): LYONS FPD (JJ Hoffman)

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	\$7,480.00		A Labor Cost= \$7,480.00 ✓
Operating Exp. ^{3,*} (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = \$7,480.00 ✓
			Amount Originally Approved = \$16,450.00 ✓
			Amount to be Reimbursed not to exceed \$470 Per Acre \$3,337.00 ✓

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: JJ Hoffman Fire Chief

Date: 9-13-2011

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

Mailing Address: PO Box 695

City: LYONS

County: Boulder State: CO Zip: 80540

Phone: 303-823-6611

Practice certified by: BRYAN BAER B. R.
CSFS forester

Payment Approval: [Signature]
CSFS program manager

Amount: \$3,337.00 Date: 11/13/11

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. 5308400-BO-17

To be completed by CSFS forester:

PROGRAM:

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

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

7.1 ACRES
HAZ. FUELS RED.

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 = _____



01/19/10



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: LYONS FPD (JJ HOFFMAN)

Address: P.O. Box 695

LYONS, CO 80540

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: 5308400-BO-17

Approved Funding: \$ 16,450.00

Total Project: \$ 7,480.00

CSFS Account Number: 5308400-6693

Amount of Payment: \$ 3,337.00

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. 5308400-BC-17
(For Official Use Only-
No. from original application)

Applicant name (please print): LYONS FPD (JJ Hoffman)

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	\$ 7,480.00		A Labor Cost= \$ 7,480.00
Operating Exp ^{3,*} (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = \$ 7,480.00
			Amount Originally Approved = \$ 16,450.00
			Amount to be Reimbursed not to exceed \$470 Per Acre \$ 3,337.00

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: JJ Hoffman Fire Chief

Date: 9-13-2011

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

Mailing Address: PO Box 695

City: LYONS

County: BOULDER State: CO Zip: 80540

Phone: 303-823-6611

Practice certified by: BRYAN BAER
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. 5308400-BO-17

To be completed by CSFS forester:

PROGRAM:

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

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

7.1 ACRES
HAZ. FUELS RED.

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 = _____ | | |



LYONS FIRE PROTECTION DISTRICT

INVOICE

Job # 07-1411-004

August 28, 2011

To: Mike Ebeling
898 Pioneer Road
Lyons Colorado

Ref: Mitigation project on 1 acre behind home
Job# 07-1411-004
Mitigation Crew- drop, limb and buck trees

Project Dates- 07-14-2011 – 7-30-2011

Price per acre \$ 1,100.00 x 1 acre= \$1,100.00

Total Cost = \$ 1,100.00

R.O.A.- \$500.00

Total Due = \$600.00

Please make checks payable to: Lyons Fire Protection District
Memo: Mit Crew Job #07-1411-004

Thank you for your Business!!





LYONS FIRE PROTECTION DISTRICT

INVOICE

Job # 07-2111-003

August 30, 2011

To: John Collins
602 Indian Lookout Road
Lyons, Colorado 80540

Ref: Mitigation project on 1.9 acres behind home

Job# 07-2111-003

Mitigation Crew- drop, limb and buck trees, chip all excess material

Project Dates- 06-21-2011 – 7-9-2011

Price per acre \$ 1,100.00 x 1.9 acres= \$2,090.00

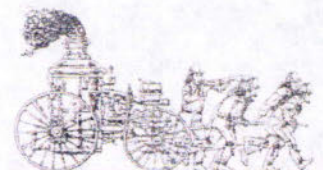
Total Cost = \$ 2,090.00

R.O.A.- \$0

Total Due =\$2,090.00

Please make checks payable to: Lyons Fire Protection District
Memo: Mit Crew Job #07-2111-003

Thank you for your Business!!





LYONS FIRE PROTECTION DISTRICT

INVOICE

Job # 06-2211-006

June 25, 2011

To: Barbara Hoge
2195 Spring Gulch Drive
Lyons Colorado

Ref: Mitigation project on 3.9 acres behind and next to home
Job# 06-2211-006
Mitigation Crew- drop, limb and buck trees

Project Dates- 06-03-2011 – 6-13-2011

Price per acre \$ 1,100.00 x 3.9 acres= \$4,290.00

Total Cost = \$ 1,430.00

R.O.A.- \$825.00

Balance due-\$3,465.00

Total Due = \$3,465.00

Please make checks payable to: Lyons Fire Protection District
Memo: Mit Crew Job #06-2211-006

Thank you for your Business!!





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: LYONS FPD

Address: P.O. Box 695

Lyons, CO 80540

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: 5308400-BO-17

Approved Funding: \$16,450.00

Total Project: \$16,040.89

CSFS Account Number: 5308400-6693

Amount of Payment: \$6,486.00

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. 5308400-BO-17
(For Official Use Only-
No. from original application)

Applicant name (please print): JJ HOFFMAN / LYONS FPD

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	\$15,160.00	\$880.89	A Labor Cost= \$16,040.89
Operating Exp ^{3,4} (Actual)			B Oper. Exp.= N/A
Project Cost			C Total Project (A+B) = \$16,040.89
			Amount Originally Approved = \$16,450.00
			Amount to be Reimbursed not to exceed \$470 Per Acre \$6,486.00

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: [Signature] (Lyons FPD) Date: 6 Jul 11

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

Mailing Address: P.O. Box 695, Lyons, CO, 80540 City: LYONS

County: Boulder State: CO Zip: 80540 Phone: 303-823-6611

Practice certified by: BRYAN BAER (B B)
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. 5308400-Bo-17

To be completed by CSFS forester:

PROGRAM:

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

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

13.8 Acres
Haz. Fuels Red.

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 = _____



LYONS FIRE PROTECTION DISTRICT

INVOICE

Job # 041211-001

April 12, 2011

To: Wayne Werner
279 Quartz Way
P.O. Box 1058
Lyons Colorado 80540

Ref- Mitigation Project Under CSFS Grant

Job Dates -

Job Description: Slash treatment and fuel reduction including chipping on 2.4 acres

Slash treatment - \$ 1,100 / acre x 2.4 acres = \$ 2,640.00

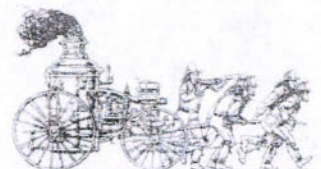
Chipper rental - \$ 400 / acre x 2.4 acres = \$960.00

Total Due = \$ 3,600.00

Please make checks payable to: Lyons Fire Protection District

Memo: Mit Crew Job- 041211-001

Paid in Full
J.J. [Signature]
Fire Chief





LYONS FIRE PROTECTION DISTRICT

INVOICE

Job # 05-0711-002

May 10, 2011

To: Rita and Denny Doyle
2519 Blue Mountain Trail
Lyons, Colorado 80540

Ref: Mitigation project on 2 acres above and behind home

Job# 05-0711-002

Mitigation Crew- drop, limb and buck trees, chip all excess material

Project Dates- 04-13-2011 – 5-9-2011

Price per acre \$ 1,100.00 x 2 acres= \$2,200

Labor – Consolidating logs \$350.00 / acre x 2 acres =\$700.00

Chipper \$ 480 / acre x 2 acres = \$960.00

Total Cost = \$ 3,860.00

Credit- Labor for chipping- \$ 80.00

R.O.A.- \$1,000 DEPOSIT

Total Due =\$2,780.00

paid in full

check # 579

Please make checks payable to: Lyons Fire Protection District

Memo: Mit Crew Job #05-0711-002

5-12-11

Thank you for your Business!!



MARTHA H. COOK
DAVID J. COOK
1715 SPRING GULCH DR.
LYONS, CO 80540

23-101 556
1020
1062282882

7161

DATE 5/14/11

PAY TO THE
ORDER OF

Lyns Fire Protection District \$ 3190 00

Three thousand one hundred ninety + 00/100 DOLLARS



Security Features
Included
Details on Back

JPMorgan

PRIVATE CLIENT SERVICES

JPMorgan Chase Bank, N.A.
Denver, Colorado 80202

MEMO

DJ Cook

MP

⑆ 10200 10171 ⑆

1062282882 ⑆ 7161

Lyons Fire Protection District

Mitigation Payment Terms

PAGE 2

The property owner agrees to allow access to the Lyons Fire Protection District to complete the options listed on the price list.

The Lyons Fire Protection District requires a 25% down payment before starting any work on the project area. Once the job is complete, a final walkthrough will be done with the property owner with a sign off sheet for final acceptance. Full payment will be due upon receipt once final acceptance is completed. All unpaid balances past 30 days will result in finance charges. A 5% administrative charge will be assessed against all amounts not paid when due, in addition past due amounts shall accrue interest at the rate of 21 % per annum from the due date until paid. If bills are not paid within 60 days, the property owner agrees that they will be responsible for any collection cost, legal fees and court cost associated with the unpaid bill.

In the event the property owner has a financial problem, change, or funds not available during the project, the owner must immediately notify the Fire Chief.

Because the mitigation crew is made up of firefighters from the Lyons Fire Protection District, the property owner by signing below; understands that the mitigation crew may be pulled off of the project if needed by the Lyons Fire Protection District to run emergency calls for the district. In the event of a major wildfire, accident, or major event where the crew will not be able to come back to the project for more the one day, the Chief will contact the property owner and re-schedule the project for completion once the emergency is dealt with.

By signing this contract the property owner agrees and accepts all of the terms listed above.

Property Owner: printed name Dave & Martha Conte

Property Address: 1715 Spring Gulch Drive

Phone Number: _____

Options Chosen: 2.9 Acres Slash treatment \$1100/acre = \$3,190

Total Price: _____

Property Owner signature: [Signature] Date 5/14/11

Fire Chief: [Signature] Date _____

Deposit Amount received: _____ Date _____

total due full
\$3190
check # 7161

GERALD E. OR LUCILLE RENOUX 01-84
2057 SPRING GULCH DR. PH. 303-823-6115
LYONS, CO 80540

82-253/1070
2723708624

8137

DATE 6/3/2011

PAY TO THE
ORDER OF

LYONS FIRE PROTECTION DIST. \$ 4510.00
FOUR THOUSAND FIVE HUNDRED TEN AND NO/100 DOLLARS

STBANK

BOULDER
6500 LOOKOUT ROAD
BOULDER, CO 80301

24 HOUR BANKING (303) 274-5000

MEMO 4.1 Acres @ 1100/ACRE

⑆ 107002532⑆ 2723708624⑆ 8137

MP

Lyons Fire Protection District

Mitigation Payment Terms

PAGE 2

The property owner agrees to allow access to the Lyons Fire Protection District to complete the options listed on the price list.

The Lyons Fire Protection District requires a 25% down payment before starting any work on the project area. Once the job is complete, a final walkthrough will be done with the property owner with a sign off sheet for final acceptance. Full payment will be due upon receipt once final acceptance is completed. All unpaid balances past 30 days will result in finance charges. A 5% administrative charge will be assessed against all amounts not paid when due, in addition past due amounts shall accrue interest at the rate of 21 % per annum from the due date until paid. If bills are not paid within 60 days, the property owner agrees that they will be responsible for any collection cost, legal fees and court cost associated with the unpaid bill.

In the event the property owner has a financial problem, change, or funds not available during the project, the owner must immediately notify the Fire Chief.

Because the mitigation crew is made up of firefighters from the Lyons Fire Protection District, the property owner by signing below; understands that the mitigation crew may be pulled off of the project if needed by the Lyons Fire Protection District to run emergency calls for the district. In the event of a major wildfire, accident, or major event where the crew will not be able to come back to the project for more the one day, the Chief will contact the property owner and re-schedule the project for completion once the emergency is dealt with.

By signing this contract the property owner agrees and accepts all of the terms listed above.

Property Owner: printed name Terry & Lucy Penoux

Property Address: 2057 Spring Creek Rd, Lyons Colo 80540

Phone Number: 303-823-6115

Options Chosen: Slash treatment

Total Price: \$1,100 per acre x 4.1 acres = \$4,510.00

Property Owner signature: [Signature] Date 5/15/11

Fire Chief: [Signature] Date 5-15-2011

Deposit Amount received: _____ Date _____

paid in full
check # 8137
6-3-2011