

September 12, 2005

CSU

Boyd the Wildfire fuels reduction program is Poudre Canyon Fire District is alive and well. Our accomplishments are many and some will be listed herein. The residents are coming together for projects that will be highly visible to all that travel thru Poudre Canyon. We in the volunteer fire department started the year off with a rush by melting the resident slash piles gathered for the "chipping slash" part of the PCFD effort to meet our residents needs. Some slash piles were cleaned up by permitted burning. Word was passed by our PCFPD newsletter, The Riverbank Reporter, and the Connection. Both are mailed and hand delivered to residents of the upper & lower canyon.

The fire department became visible by helping with fire burning permits and assisting with on scene fire truck and crew while burning slash piles. Safety was our goal. Slash piles grew from fall thru winter and a total of 38 slash piles were cleaned up. My estimate of 735 cu yds of wildfire fuels were removed.

Our efforts moved on to home and business with our 2 small chippers. About a dozen home owners made use of the chippers and new pole saw removing ladder fuels and chipping slash. All in effort to create wildfire defensible zones.

On a larger scope of the mitigation effort contractors are best equipped to do the job. 31 mitigation plans were completed by September 12, with 7 scheduled for completion by the 25th. Our small subdivisions are better protected by the removal of fuels at 30 properties. We removed 32 large trees some insect infested. Lots of brush and dead trees, thinning where needed and most of all clearing junipers from many properties.

I have traveled over 2,000 miles attending to mitigation business for the Poudre Canyon fire district in beautiful Poudre Canyon.

Education will continue to be the Key to success in the future for Urban Wildfire mitigation in LARIMER County. Continued mitigation effort will make our communities safer places to live in.

Buzz Stith
PCFPD Volunteer



POUDRE CANYON

Emergency Medical & Fire

POUDRE CANYON FIRE PROTECTION DISTRICT

P.O. Box 364

LAPORTE, CO 80535

September 13, 2005

Boyd Labeda
Colorado State University
Sponsored Programs

6.5 AC
13 Definable
Space

Subject: Request for grant payment Sub # 536738-009

Page A Cover page

B Subaward Agreement Copy

C Attachment Copy of prior grant missing matching funds
From 8/8/05 Matching Funds \$23,068.00 (see attached).

D Summary of request

E Page 1 —plans (3)

F Page 2— plans (4)

G Page 3—plans (4)

H Page 4— plans (4)

Total plans 12 with 1 delete (#3) Request \$10,116.70

Respectively Submitted
Buzz Stith Grant coordinator
Poudre Canyon Fire Dist.

Subaward Agreement

Institution/Organization ("UNIVERSITY")		Institution/Organization ("Collaborator")	
Name:	Colorado State University	Name:	Poudre Canyon Fire Protection District
Address:	Sponsored Programs Fort Collins, CO 80523-2002	Address:	6004 CR 68C Red Feather Lakes, CO 80545
Prime Award No. 04-DG-11020000-010		Subaward No. G-536738-009	
Awarding Agency U.S.D.A. Forest Service		CFDA No. 10.664	
Subaward Period of Performance 10/1/03 – 9/30/05		Amount Funded this Action \$45,000	Cost Share (Match) \$50,000
Project Title 2004 Western States Wildland Urban Interface Grant Program			
Reporting Requirements: Final Report and as specified in Attachment A			

Terms and Conditions

- (1) UNIVERSITY hereby awards a cost reimbursable subaward, as described above, to Collaborator. The statement of work and budget for subaward are (check one): ____ as specified in Collaborator's proposal dated _____; or X as shown in Attachment A. In its performance subaward work, Collaborator shall be an independent entity and not an employee or agent of UNIVERSITY.
- (2) UNIVERSITY shall reimburse Collaborator not more often than monthly for allowable costs. All invoices shall be submitted using the attached Reimbursement Request form (Attachment B), which shall include current and cumulative costs (including cost sharing), subaward number, and certification as to truth and accuracy of invoice. Invoices must be submitted to District Offices for approval and processing for payment. *Invoices that do not reference UNIVERSITY's subaward number shall be returned to Collaborator.*
- (3) A final statement of costs incurred, including cost sharing, marked "FINAL", must be submitted to UNIVERSITY's Administrative Contact NOT LATER THAN sixty (60) days after subaward end date. The final statement of costs shall constitute Collaborator's final financial report. Payment due the Collaborator may be withheld until all the terms and conditions of the subaward have been met.
- (4) All payments shall be considered provisional and subject to adjustment within the total estimated cost in the event such adjustment is necessary as a result of an adverse audit finding against the Collaborator.
- (5) Matters concerning the technical performance of this subaward should be directed to the appropriate party's Project Director, as shown Attachment C. Technical reports are required as shown above, "Reporting Requirements."
- (6) Matters concerning the request or negotiation of any changes in the terms, conditions, or amounts cited in this subaward agreement shall be directed to the appropriate party's Administrative Contact, as shown in Attachment C. Any such changes made to this subaward agreement require the written approval of each party's Authorized Official, as shown in Attachment C.
- (7) Each party shall be responsible for its negligent acts or omissions and the negligent acts or omissions of its employees, officers, or directors, to the extent allowed by law.
- (8) Either party may terminate this agreement with thirty days written notice to the appropriate party's Administrative Contact, as shown in Attachment 3. UNIVERSITY shall pay Collaborator for termination costs as allowable under OMB Circular A-21 or A-122, as applicable.
- (9) No-cost extensions require the approval of the UNIVERSITY. Any requests for a no-cost extension should be addressed to and received by the Administrative Contact, as shown in Attachment C, not less than thirty days prior to the desired effective date of the requested change.
- (10) The Subaward is subject to the terms and conditions of the Prime Award, Attachment D, and other special terms and conditions, as identified in Attachment E.
- (11) By signing below Collaborator makes the certifications and assurances shown in Attachments F.

Agreed by Authorized Official of UNIVERSITY:		Agreed by Authorized Official of Collaborator:	
Name	Lynn Johnson	Name	
Date		Date	
Title	Director, Sponsored Programs	Title	

**Attachment C
Subaward Agreement**

University Contacts	Collaborator Contacts
Administrative Contact Name: Betty Eckert Address: Sponsored Programs Colorado State University Fort Collins, CO 80523-2002 Telephone: 970-491-1554 Fax: 970-491-6147 Email: betty.eckert@research.colostate.edu	Administrative Contact Name: Bette Blinde Address: 6004 CR 68c PCFPD P.O. Box 364 Laporte co 80535 Telephone: 970-881-2902 Fax: Email:
Principal Investigator Name: Richard L. Homann Address: Colorado State Forest Service Colorado State University Fort Collins, CO 80523-5060 Telephone: 970-491-6303 Fax: 970-491-7736 Email: Richard.homann@colostate.edu	Project Director Name: Buzz Stith Address: 565 Rustic Rd Bellvue co 80512 Telephone: 970-881-3585 Fax: 970 881 3585 Email: bstith2@juno.com
Financial Contact Name: Same as Administrative Contact Address: Telephone: Fax: Email:	Financial Contact Name: Vic McLachlan Address: 122 Riverside Dr Bellvue co 80512 Telephone: 970-881-3425 Fax: office 970 881-2242 Email:
Authorized Official Name: Lynn Johnson Address: Director, Sponsored Programs Colorado State University Fort Collins, CO 80523-2002 Telephone: 970-491-1550	Authorized Official Name: Address: Telephone: Fax: Email:

Adjusted first report
of 8/8/05

ATTACHMENT B

GRANT REPORT/REIMBURSEMENT REQUEST

2003 WSFM COMPETITIVE GRANTS

Matching funds
attached

Subaward No. G-

536738-009

Bryz Stott
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.

04 DE 11020000

1. Grant Award #:	-010	2. Total Award Amount:	45000	3. Community Protected:	Pindie Canyon	
4. Make Payment To: Name: Address:		5. Period of Performance: From: To:				
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.) <i>info only for matching funds. for adjusted first report 8/8/05</i>						
7. Reimbursement Request: Project to Date Reimbursement Request Amount cannot exceed the total award obligation as identified in the Award Document. The Total Reimbursement Request Amount cannot exceed to Total Matching Funds amount for the period being billed.						
	Current Period			Project to Date		
	Reimbursement Request Amount	Matching Funds	Total Costs	Reimbursement Request Amount	Matching Funds	Total Costs
Labor*	22853.75	23068 ⁰⁰	45921.75	22853.75	23068 ⁰⁰	45921.75
Material**		(1975 hrs)				
Total	22853.75	23068 ⁰⁰	45921.75	22853.75	23068 ⁰⁰	45921.75
Donated time and materials can only be counted towards the matching component. * Use actual costs or \$11.68/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 \$_____ 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 grant award documents. Signature: <i>Bryz Stott</i> Date: 9/12/05 <i>8/8/05</i>						
10. Certification (To be completed by CSFS District): Work meets minimum standards as set forth by CSFS. Signature: Date:						

Adjusted first Report
of 8/8/05

Matching funds

ATTACHMENT B

GRANT REPORT/REIMBURSEMENT REQUEST
2003 WSFM COMPETITIVE GRANTS

Cover page

C2

Subaward No. G-

536738-009

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. Grant Award #: 04-1102 0000-010		2. Total Award Amount: 45000 -		3. Community Protected: Poudre Canyon		
4. Make Payment To: Name: P.C.F.P.D. Address: 122 Riverside Dr Bellvue CO 80512 ATTN Vic McLachlan			5. Period of Performance: From: March 1 2005 To: August 8 2005			
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.)						
Page #1 3 plans - 4243.75 Page #2 3 plans 1300.00 Page #3 6 plans 1465.00 Page #4 5 plans 9045.00 Page #5 3 plans 6800.00 20-Plans 22853.75						
7. Reimbursement Request:						
Project to Date Reimbursement Request Amount cannot exceed the total award obligation as identified in the Award Document. The Total Reimbursement Request Amount cannot exceed to Total Matching Funds amount for the period being billed.						
	Current Period			Project to Date		
	Reimbursement Request Amount	Matching Funds	Total Costs	Reimbursement Request Amount	Matching Funds	Total Costs
Labor*	22853.75	23068.00		22853.75	23068.00	45921.75
Material**		(1975 hrs)				
Total	22853.75	23068.00		22853.75	23068.00	45921.75
Donated time and materials can only be counted towards the matching component.						
* Use actual costs or \$11.68/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 \$ 22,853.75 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 grant award documents.						
Signature: Buzz Smith			Date: August 8 2005			
10. Certification (To be completed by CSFS District):						
Work meets minimum standards as set forth by CSFS.						
Signature:			Date:			

D

ATTACHMENT B
GRANT REPORT/REIMBURSEMENT REQUEST
2003 WSFM COMPETITIVE GRANTS

Subaward No. G-

536738-009

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.

04 DG 11020000

1. Grant Award #: 0102	2. Total Award Amount: 45000	3. Community Protected: Poudre Canyon																																			
4. Make Payment To: Poudre Canyon Fire Dist Name: 122 Riverside Dr Address: Bellvue Co 80512 ATTN Vic McLachlan		5. Period of Performance: 2005 From: 5/7/05 To: 9/13/05																																			
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.) Page #1 ~ 2 Plans \$ 326.70 1 - Deleted #3. Page #2 4 Plans \$ 3775.00 Page #3 4 Plans \$ 1715.00 Page #4 4 Plans 4300.00 \$ 10,116.70																																					
7. Reimbursement Request: Project to Date Reimbursement Request Amount cannot exceed the total award obligation as identified in the Award Document. The Total Reimbursement Request Amount cannot exceed to Total Matching Funds amount for the period being billed.																																					
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th colspan="3">Current Period</th> <th colspan="3">Project to Date</th> </tr> <tr> <th></th> <th>Reimbursement Request Amount</th> <th>Matching Funds</th> <th>Total Costs</th> <th>Reimbursement Request Amount</th> <th>Matching Funds</th> <th>Total Costs</th> </tr> </thead> <tbody> <tr> <td>Labor*</td> <td>10,116.70</td> <td>10,371.84</td> <td>20,488.54</td> <td>32,970.45</td> <td>33,439.84</td> <td>66,410.29</td> </tr> <tr> <td>Material**</td> <td></td> <td>(888 hrs)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Total</td> <td>10,116.70</td> <td>10,371.84</td> <td>20,488.54</td> <td>32,970.45</td> <td>33,439.84</td> <td>66,410.29</td> </tr> </tbody> </table>			Current Period			Project to Date				Reimbursement Request Amount	Matching Funds	Total Costs	Reimbursement Request Amount	Matching Funds	Total Costs	Labor*	10,116.70	10,371.84	20,488.54	32,970.45	33,439.84	66,410.29	Material**		(888 hrs)					Total	10,116.70	10,371.84	20,488.54	32,970.45	33,439.84	66,410.29
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8. Amount Paid to CSFS for Products and/Or Services : \$																																					
9. I request reimbursement in the amount of \$ 10,116.70 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 grant award documents.																																					
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ATTACHMENT B
GRANT REPORT/REIMBURSEMENT REQUEST
2003 WSFM COMPETITIVE GRANTS

Subaward No. G-
536738-009

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. Grant Award #: 04-DG-1102000 0102	2. Total Award Amount: 45,000	3. Community Protected: Poudre Canyon				
4. Make Payment To: Poudre Canyon Name: 122 River Side Dr Address: Bellvue Co 80512 ATN Vic McLachlan		5. Period of Performance: From: 5/7/05 To: 8/31/05				
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="margin-top: 10px;"> #1 Jan Hodgson owner chipper Rental 50% Reimbursement 5/7/05 50% \$118.90 / \$59.45 #2 Carl & Jan Gueswel Installed Gutter Guard 50% 5/11/05 \$34.50 / \$26.75 Contractor Housing Specialist #3 Deleted \$653.40 50% \$326.70 </div>						
7. Reimbursement Request: Project to Date Reimbursement Request Amount cannot exceed the total award obligation as identified in the Award Document. The Total Reimbursement Request Amount cannot exceed to Total Matching Funds amount for the period being billed.						
	Current Period		Project to Date			
	Reimbursement Request Amount	Matching Funds	Total Costs	Reimbursement Request Amount	Matching Funds	Total Costs
Labor*	326.70	327 ⁰⁴ (28hr)	653.74			
Material**						
Total	326.70	327 ⁰⁴ (28hr)	653.74			
Donated time and materials can only be counted towards the matching component. * Use actual costs or \$11.68/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 \$ 326.70 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 grant award documents.						
Signature: Buzz Stitt			Date: 9/12/05			
10. Certification (To be completed by CSFS District):						
Work meets minimum standards as set forth by CSFS.						
Signature:			Date:			

We Rent Most Everything

CLEANING • DAMAGE/THEFT • FUEL
FLAT TIRES • TIRE DAMAGE • OILS
FILTERS • LUBRICATIONS
INSURANCE AS SPECIFIED IN
TERMS & CONDITIONS OF RENTAL.
SEE REVERSE SIDE.



810 N. College
Ft. Collins, CO 80524
(970) 221-5515
Fax (970) 221-5517

TERMS: CASH IN ADVANCE

ESTABLISHED OPEN ACCOUNTS ARE
DUE AND PAYABLE NET 30 DAYS
FROM DATE OF INVOICE.
PAST DUE ACCOUNTS BEAR LATE
PAYMENT PENALTIES AT 2% PER MONTH
\$5.00 MINIMUM.

05 COMPLETED Sat 05/07/05 04:38 PM

NAME HODGSON, JANET		PHONE 1 904 570 482-3604	DRIVERS LICENSE NO. 9704529804	CONTRACT NO. 36455
RENTING FOR/ATTENTION OF HODGSON, JANET		JOB DESCRIPTION		AUTO LICENSE NO.
STREET ADDRESS 1401 HILLSIDE DR			OTHER IDENTIFICATION	
CITY AND ZIP FORT COLLINS, CO 80524		PAYMENT METHOD Credit card	TIME AND DATE OUT 07:18 AM 05/07/05	

QTY.	ITEM NO.	ITEM RENTED	INFORMATIONAL RATES	TIME & DATE DUE IN	TIME & DATE RETURNED	RENTAL FEE	ADD'L CHARGES
1	2552	CHIMUL3 CHIPPER, MULCHER 3"		07:18 AM 05/08/05	02:18 PM 05/07/05	124.00	-24.50
		DRY WOOD ONLY \$75.00 CHARGE FOR BLADE DAMAGE					
<p>WE THANK YOU FOR YOUR BUSINESS</p> <p><i>Resident cut dead trees made slash piles 1 acre</i></p> <p><i>Rental chipper for slash piles 15 cu yds</i></p>							

QTY.	ITEM NO.	MERCHANDISE PURCHASED	AMOUNT	INT'L	RENTAL SUB TOTALS	124.00	-24.50
					DAMAGE WAIVER	14.98	-8.95
					MISC. CHARGES		
					MERCHANDISE SALES		
					SUB TOTAL	138.98	-27.55
					TAX	9.44	-1.87
					TOTAL	148.32	-29.42

RENTAL CONTRACT

THIS IS A CONTRACT. THE BACK OF THIS DOCUMENT CONTAINS IMPORTANT TERMS AND CONDITIONS, INCLUDING LESSOR'S DISCLAIMER FROM ALL LIABILITY FOR INJURY OR DAMAGE AND DETAILS OF CUSTOMER'S OBLIGATIONS. THESE TERMS AND CONDITIONS ARE PART OF THIS CONTRACT - READ THEM!

IF EQUIPMENT DOES NOT FUNCTION PROPERLY NOTIFY LESSOR WITHIN 30 MINUTES OF OCCURRENCE OR NO ALLOWANCE WILL BE MADE. IF THIS IS A RESERVATION, A RESERVATION CANCELLATION FEE UP TO 1/2 THE TOTAL AMOUNT MAY BE CHARGED IF RESERVATION IS CANCELLED WITHIN 72 HOURS OF THE SCHEDULED "TIME AND DATE OUT"

I CERTIFY THAT I HAVE READ AND AGREE TO ALL TERMS OF THIS CONTRACT.

SIGNATURE

THIS IS YOUR RENTAL AGREEMENT READ BOTH SIDES BEFORE SIGNING

CONTRACT TOTAL: 118.90 PAID: 118.90	
AMOUNT PAID THIS TRANSACTION	AMOUNT DUE 0.00
DEPOSIT RECEIVED	DEPOSIT RETURNED

MUST CALL FOR PICK-UP

The Housing Specialist

Jeff Alexander

970-532-3369

(2)

HOME IMPROVEMENT AGREEMENT

(Non-negotiable Consumer Paper)

The undersigned Garth J. J. Guesnel ("Purchaser") hereby requests ("Contractor") to furnish all labor and materials necessary to remodel the property located at:

10500 Ridge-Crestway Bellvue CO 80512
Street City State Zip

As described below: Install Leaf Relief over Existing Gutters
125' Approx. Chute Gutter were needed

Resident has pine trees around home
Reduced fire fuel around home + installed
Gutter guard.
Bugs Steth

The contract price for the above work is \$ 534.50

☒ In Cash Payable: 50% Down - Balance on Completion perched 267.25 Check # 10105
☐ In installments as provided in the promissory note of the even date executed in connection with this transaction.

CONTRACTS ARE TO BE SECURED BY A MORTGAGE LIEN
THE PURCHASER ACKNOWLEDGES:

1. Contractor is not responsible for pets.
2. You are entitled to an exact copy of the contract you sign.
3. Purchaser agrees that he will, immediately upon completion of the work, sign a Contractor's Completion Cert. & Prom. Note.
4. Contractor assumes no responsibility or liability for payments made to its salesmen, employees or sub-contractors unless checks are made payable to contractor.
5. Purchaser will supply electricity to perform all necessary work.
6. If the purchaser(s) refuse(s) to complete the purchase as agreed, the purchaser(s) shall be liable for the entire balance of the contract price, due and payable immediately. If The Housing Specialist employees seek legal counsel for the purpose of enforcing the terms hereof, purchaser(s) agree to pay all costs of collection, including reasonable attorney fees and court costs.

ACKNOWLEDGEMENT OF RECEIPT OF DISCLOSURES

The undersigned Borrower does herewith acknowledge receipt of the Disclosures contained herein. They further acknowledge that at the time they received a copy of this statement it was complete and blanks were filled in.

No rebate and/or offer to pay value was given to the purchaser as an inducement for the sale in consideration of the purchaser giving to the salesman names of prospective purchasers for the purpose of referral sales.

This Contract is subject to approval by The Housing Specialist. You the buyer may cancel this transaction at any time prior to midnight of the third business day after the date of this transaction. See the attached notice of cancellation for an explanation of this right.

The Housing Specialist
By Jeff Alexander
Customer Garth J. J. Guesnel Date 5/11/05
Approved and Countersigned by _____
Customer _____ Date _____

NOTICE OF CANCELLATION

You may cancel this transaction, without any penalty or obligation within 3 business days from the above date. If you cancel, any property traded in, any payments made by you under the contract or sale, and any negotiable instruments executed by you will be returned within 10 business days following receipt by the seller of your cancellation notice, and any security interest arising out of the transaction will be canceled. If you cancel, you must make available to the seller at your residence, in substantially as good condition as when received, any goods delivered to you under this contract of sale; or you may, if you wish, comply with the instructions of the seller regarding the return shipment of the goods at the seller's expense and risk. If you do make the goods available to the seller and the seller does not pick them up within 20 days of the date of your notice of cancellation, you may retain possession of them.

ATTACHMENT B
GRANT REPORT/REIMBURSEMENT REQUEST
2003 WSFM COMPETITIVE GRANTS

Subaward No. G-536738-009

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.

04 DG-11026000-0102

1. Grant Award #:	2. Total Award Amount: 45,000	3. Community Protected: Poudre Canyon
4. Make Payment To: Poudre Canyon Fire Name: 122 Riverside Dr Address: Bellvue Co 80512 Attn: Vic Melachlan		5. Period of Performance: From: 8-6-05 To: 8-16-05

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.)

- #4 - Bob Zalman Contractor Fire Ready Defensible space Remove dead trees + trim + brush removed. \$325.00
- #5 Tim Anderson Fire Ready Make safe driveway lane 1/4 mile long Remove dead brush + trees chip slash \$1150.00
- #6 Dan Dewey chip slash piles - Reduce fuel load 50 cu yd \$1000.00
- #7 Holly Haynes develop Defensible space Remove dead trees trim brush + chip slash 1300' 25 cu yd.

7. Reimbursement Request:

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

	Current Period			Project to Date		
	Reimbursement Request Amount	Matching Funds	Total Costs	Reimbursement Request Amount	Matching Funds	Total Costs
Labor*	3775.00	3842.72 (329)	7617.72			
Material**			(329)			
Total	3775.00	3842.72 (329)	7617.72			

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

* Use actual costs or \$11.68/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 \$ 3775.00 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 grant award documents.

Signature: Buzz Smith

Date: 9/9/05

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

Work meets minimum standards as set forth by CSFS.

Signature:

Date:

4



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481
Telephone: 970-428-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: _____ Date: 8/6/05

Client Information		How did Client hear of Fire Ready?	
Name <u>Bob Zalman</u> <u>PCFPD</u>	Property Address <u>42251 PCHwy</u>	Telephone <u>402 462-9550</u>	
Deposit Amount/Check Number	Mailing Address <u>565 Rustic Rd</u> <u>Bellevue, CO</u> <u>80512</u>	Scheduling Date(s) <u>8/6</u>	
Work to be Performed <u>Trim up and top cedar tree @ outhouse</u> <u>Trim up conifers along drive + around shed, Remove</u> <u>dead Aspen behind shed as well. Clean out wild</u> <u>roses in front outhouse.</u>			

Rate

Fixed ☐

Climbing Fees ☐

2-2 1/2 hrs @ 275-325

Total Price:

\$325

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature Buzz Stott

Printed Name Buzz Stott

Date 8/6/05

For Fire Ready office use only Detailed Directions	Service Dates _____ _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____
	Reasons <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____	<input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance
Meeting Time _____ Place _____	Total Price _____	
Special Equipment/Notes	Less Deposit _____	
	Total Invoice _____	

5

FIRE READY

Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481
Telephone: 970-428-0814
Email: fortcollins@fireready.com

Consultant: Tony Quotation for Work Date: 8-14-05

Client Information		How did Client hear of Fire Ready?
Name <u>Tim Anderson</u> <u>PCFPD.</u>	Property Address <u>42091 Pc Hwy</u>	Telephone
Deposit Amount/Check Number	Mailing Address <u>565 12th St</u> <u>Bolivar, CO 80512</u>	Scheduling Date(s) <u>8-14-05</u>
Work to be Performed <u>clear brush along driveway - reduce fire risk</u> <u>and clear out dead clumps. 1 Day</u>		

Rate ☒ Fixed ☐

Climbing Fees ☐

1 Day

Total Price:

\$1150

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature Buzz Stith

Printed Name Buzz Stith

Date 8/14/05

For Fire Ready office use only Detailed Directions	Service Dates _____ _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____
	<u>Reasons</u> <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____	<input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance
Meeting Time _____ Place _____	Total Price _____	
Special Equipment/Notes	Less Deposit _____	
	Total Invoice _____	



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481
Telephone: 970-416-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: Tony

Date: 8-16-05

Client Information		How did Client hear of Fire Ready?	
Name <u>Don Dewey</u> <u>P.C.F.P.D.</u>	Property Address <u>6627 12 68c</u>	Telephone	
Deposit Amount/Check Number	Mailing Address <u>565 Rustic Rd</u> <u>Bohvue, CO 80512</u>	Scheduling Date(s) <u>8-15</u>	
Work to be Performed <u>chip large slash piles around property</u>			

Rate ☒ Fixed ☐

Climbing Fees ☐

\$100 an hour 10 hrs

Total Price:

\$1000

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature Buzz Smith

Printed Name Buzz Smith

Date 8/16/05

For Fire Ready office use only Detailed Directions Meeting Time _____ Place _____ Special Equipment/Notes _____	Service Dates _____ _____ Reasons <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____ Total Price _____ Less Deposit _____ Total Invoice _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____ <input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance
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7



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481
Telephone: 970-228-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: Tony

Date: 8-16-05

Client Information		How did Client hear of Fire Ready?	
Name <u>Holly Haynes</u> <u>Jim Olson</u> <u>DCFPD</u>	Property Address <u>42125 Pc Hwy</u>	Telephone	
Deposit Amount/Check Number	Mailing Address <u>405 R-9110 Rd</u> <u>Fort Collins, CO 80512</u>	Scheduling Date(s) <u>8/14</u>	
Work to be Performed <u>Mitigation work around cabin, thinning and removing dead trees around home & building. Remove old firewood piles from around home & chip. Haul 2 loads of firewood and scrap wood to dump.</u>			

Rate

Fixed ☐

Climbing Fees ☐

Total Price:

1 day plus 2 dump runs

1300

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature Buzz Smith

Printed Name Buzz Smith

Date 8/16/05

For Fire Ready office use only Detailed Directions	Service Dates	Future Work
	Reasons	
Meeting Time _____ Place _____	<input type="checkbox"/> Added Charges _____	<input type="checkbox"/> Spraying _____
Special Equipment/Notes	<input type="checkbox"/> Discounts _____	When _____
	<input type="checkbox"/> _____	Quantity _____
	Total Price _____	<input type="checkbox"/> More Mitigation Needed
	Less Deposit _____	<input type="checkbox"/> Crew Days _____
	Total Invoice _____	<input type="checkbox"/> Off-schedule
		<input type="checkbox"/> Maintenance

ATTACHMENT B
GRANT REPORT/REIMBURSEMENT REQUEST
2003 WSFM COMPETITIVE GRANTS

536738-009
Subaward No. G-

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.

04-DG-11020000-0102

1. Grant Award #:	2. Total Award Amount: 45,000	3. Community Protected: Poudre Canyon				
4. Make Payment To: Poudre Canyon Fire Dist Name: 122 Riverside Dr Address: Bellvue Co 80512 ATTN Vic Meladlan		5. Period of Performance: 2005 From: 8/22/2005 To: 8/31/2005				
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.) #8 Jim Schroeder Remove 1- dead insect infested P-pine. (control insects) chip slash - block wood - fire ready \$325.00 #9 marvin mayer Reduce fuel load along driveway \$250.00 Remove 7- hazard trees #10 Trading Post cut dead aspen + created slash pile \$180.00 15-18 cu ft #11 Terry Adkins Remove 16 Juniper trees Reduce fuel load for defensible space \$960.00						
7. Reimbursement Request: Project to Date Reimbursement Request Amount cannot exceed the total award obligation as identified in the Award Document. The Total Reimbursement Request Amount cannot exceed to Total Matching Funds amount for the period being billed.						
	Current Period		Project to Date			
	Reimbursement Request Amount	Matching Funds	Total Costs	Reimbursement Request Amount	Matching Funds	Total Costs
Labor*	1715.00	1798.72 (154)	3513.72			
Material**						
Total	1715.00	1798.72 (154)	3513.72			
Donated time and materials can only be counted towards the matching component. * Use actual costs or \$11.68/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 \$ 1715.00 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 grant award documents. Signature: Buzz Smith Date: 9/12/05						
10. Certification (To be completed by CSFS District): Work meets minimum standards as set forth by CSFS. Signature: Date:						

8



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

Telephone: 970-418-0814
Email: fortcollins@fireready.com

Consultant: Tony Quotation for Work Date: 8-5

Client Information		How did Client hear of Fire Ready?
Name <u>Jim & Nancy Schroeder PCFPD</u>	Property Address <u>154 Crown Pt Dr.</u>	Telephone <u>881-2766</u>
Deposit Amount/Check Number	Mailing Address	Scheduling Date(s)
Work to be Performed <u>Remove Ponderosa along back of property and this large willow clumps along the river.</u>		

Rate ☒ Fixed ☐

Climbing Fees ☐

approx 2 hrs

Total Price:

325

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature Bugs Jett

Printed Name Bugs Jett

Date 8/22/05

For Fire Ready office use only Detailed Directions	Service Dates _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____
	Reasons <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____	
Meeting Time _____ Place _____	Total Price _____	<input type="checkbox"/> More Mitigation Needed
Special Equipment/Notes	Less Deposit _____	<input type="checkbox"/> Crew Days _____
	Total Invoice _____	<input type="checkbox"/> Off-schedule
		<input type="checkbox"/> Maintenance



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481
Telephone: 970.418-0814
Email: fortcollins@fireready.com

Consultant: Tony Quotation for Work Date: 8/28

Client Information		How did Client hear of Fire Ready?
Name <u>Marvin Magee</u> <u>PCFPD</u>	Property Address <u>42088 Pc Hwy</u>	Telephone <u>881 2364</u>
Deposit Amount/Check Number	Mailing Address <u>505 Rustic Rd</u> <u>Bellevue, CO 80512</u>	Scheduling Date(s)
Work to be Performed <u>Bring down 5-7 hazardous trees along driveway.</u> <u>Cut up firewood and stack for Marvin and Helen.</u>		

Rate

Fixed ☒

Climbing Fees ☐

Total Price:

250

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of Insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature

Buzz Smith
1798 1154

Printed Name

Buzz Smith

Date 8/31/05

For Fire Ready office use only Detailed Directions <u>1154 1798</u>	Service Dates _____ _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____
	Reasons <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____	<input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance
Meeting Time _____ Place _____	Total Price _____	
Special Equipment/Notes	Less Deposit _____	
	Total Invoice _____	



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481
Telephone: 970-418-0814
Email: fortcollins@fireready.com

Consultant: Tony Quotation for Work Date: 08/20/05

Client Information		How did Client hear of Fire Ready?	
Name <u>PCFPD</u> <u>Trading Post</u> <u>Susan Brown</u>	Property Address	Telephone	
Deposit Amount/Check Number	Mailing Address <u>505 Rustic Rd</u> <u>Bellvue, CO 80512</u>	Scheduling Date(s)	
Work to be Performed <u>chip slash piles along road.</u>			

Rate ☒ Fixed ☐

Climbing Fees ☐

2 hrs @ \$100 an hour

Total Price:

\$180

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Buzz Smith
Client Signature

Buzz Smith
Printed Name

8/31/05
Date

For Fire Ready office use only Detailed Directions	Service Dates _____ _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____
	Reasons <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____	<input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance
Meeting Time _____ Place _____	Total Price _____	
Special Equipment/Notes	Less Deposit _____	
	Total Invoice _____	

11



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481
Telephone: 970-488-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: Tom

Date: 8-25

Client Information		How did Client hear of Fire Ready?	
Name <u>Jerry Atkins</u> <u>PCFPD</u>	Property Address <u>144 Rustic Rd</u>	Telephone <u>970 522-0981</u>	
Deposit Amount/Check Number <u>PCVFD</u>	Mailing Address <u>565 Rustic Rd</u> <u>3 Bellvue, CO 80512</u>	Scheduling Date(s)	
Work to be Performed <u>Removal of (15) approx. Junipers around back, sides, and front of property, chip slash into piles for home owners to use around property</u> <div style="text-align: right;"><u>Thank You, Jerry</u></div>			

Rate ☒ Fixed ☐

Climbing Fees ☐

Total Price:

960

3/4 day

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature Buzz Smith

Printed Name Buzz Smith

Date 08/31/05

For Fire Ready office use only Detailed Directions Meeting Time _____ Place _____ Special Equipment/Notes	Service Dates _____ _____ Reasons <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____ Total Price _____ Less Deposit _____ Total Invoice _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____ <input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance
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ATTACHMENT B
GRANT REPORT/REIMBURSEMENT REQUEST
2003 WSFM COMPETITIVE GRANTS

Subaward No. G-
536738-009

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. Grant Award #: 04 DG 11020000 0102	2. Total Award Amount: 45,000	3. Community Protected: Poudre Canyon
4. Make Payment To: Poudre Canyon Fire Name: 122 Riverside Dr Address: Bellvue Co 80512 Attn Vic McLachlan		5. Period of Performance: From: 9/11/05 To: 9/13/05

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.)

- #12 Mary Biggers Make defensible space on Lot Remove dead trees \$3450.00
Cut Brush - Chip slash Lot size 1.5 acres..
- #13 Charlie Morgan - make defensible space for home building on 35 acres.
Remove dead trees chip slash \$2300.00
- #14 Jane Abbott - make defensible space around 100 year old Cabin on 200 acres. \$875.00
- #15 Jim Sell make defensible space around home on 2 acres \$2075.00
Remove dead wood from 7 trees, cut brush, Chip slash 3yds (8600.00) 50%

7. Reimbursement Request:

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

	Current Period			Project to Date		
	Reimbursement Request Amount	Matching Funds	Total Costs	Reimbursement Request Amount	Matching Funds	Total Costs
Labor*	4300	4403 ³⁶	8703.36			
Material**		(377 hrs)				
Total	4300	4403 ³⁶	8703.36			

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

* Use actual costs or \$11.68/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 \$ **4300** 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 grant award documents.

Signature: **Buzz Smith**

Date: **9/12/05**

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

Work meets minimum standards as set forth by CSFS.

Signature:

Date:



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

Telephone: 970-448-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: _____

Date: 7-1-05

Client Information		How did Client hear of Fire Ready?
Name <u>PCFPD</u> <u>Marty Bissis</u>	Property Address <u>6641 PC Hwy</u>	Telephone <u>970-278</u>
Deposit Amount/Check Number	Mailing Address <u>305 Route Rd 80512</u>	Scheduling Date(s)
Work to be Performed <u>Mitigation around creek home and studio.</u> <u>Continue along side and front of home</u> <u>Building and into front yard, then some</u> <u>firewood for piling</u>		

Rate ☒ Fixed ☐Climbing Fees ☐

Total Price:

3 days @ \$1503450

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature Buzz SmithPrinted Name Buzz SmithDate 9/1/05

For Fire Ready office use only Detailed Directions Meeting Time _____ Place _____ Special Equipment/Notes	Service Dates _____ _____ Reasons <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____ Total Price _____ Less Deposit _____ Total Invoice _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____ <input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

Telephone: 970-418-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: _____

Date: 9-5-05

Client Information		How did Client hear of Fire Ready?
Name <u>PCFPD</u> <u>Charles Morgan</u>	Property Address <u>map 14 2400 2nd ave</u>	Telephone <u>931-2480</u>
Deposit Amount/Check Number	Mailing Address <u>PCFPD</u> <u>5105 Route 28</u>	Scheduling Date(s)
Work to be Performed <u>Re Fire mitigation project. Bring down</u> <u>all dead trees from fire. Good fire wood will</u> <u>be stacked on site to be kept in company slash.</u>		

Rate ☒ Fixed ☐

Climbing Fees ☐

Total Price:

2 days

\$2400

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature Byz Stan

Printed Name Stan Stan

Date 9/5/05

For Fire Ready office use only Detailed Directions Meeting Time _____ Place _____ Special Equipment/Notes	Service Dates _____ _____ Reasons <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____ Total Price _____ Less Deposit _____ Total Invoice _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____ <input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481
Telephone: 970-488-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: _____

Date: 9-7-05

Client Information		How did Client hear of Fire Ready?
Name <u>Jane Abbott</u> <u>PCPFD</u>	Property Address <u>33501 PCHwy</u>	Telephone
Deposit Amount/Check Number	Mailing Address <u>PCUFD</u> <u>565 Rustic Rd</u>	Scheduling Date(s)
Work to be Performed <u>This choke cherries from around home and buildings.</u> <u>This remaining dead from trees around home.</u> <u>Weed whacking, + thinning - good yard clean up.</u>		

Rate ☒ Fixed ☐

Climbing Fees ☐

5 hrs

Total Price:
725

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Buz Stith
Client Signature

Buz Stith
Printed Name

9/7/05
Date

For Fire Ready office use only Detailed Directions Meeting Time _____ Place _____ Special Equipment/Notes	Service Dates _____ _____ Reasons <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____ Total Price _____ Less Deposit _____ Total Invoice _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____ <input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance
--	--	--



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481 -
Telephone: 970-428-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: _____

Date: 9/13/05

Client Information		How did Client hear of Fire Ready?	
Name <u>Jim Seil</u>	Property Address <u>504 Rustic Rd</u>	Telephone <u>266-9147</u>	
Deposit Amount/Check Number	Mailing Address <u>565 Rustic Rd Bellevue, CO 80512</u>	Scheduling Date(s)	
Work to be Performed <u>Prune large cotton wood @ front and side of home. Chip large slash piles on property. Clear choke cherries around Aspens on back of home. 1 3/4 - 2 days w/ climbing fees</u>			

Rate ☒ Fixed ☐

Climbing Fees ☐

Total Price:

\$2075

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature Buzz Stott

Printed Name Buzz Stott

Date 9/13/05

For Fire Ready office use only Detailed Directions Meeting Time _____ Place _____ Special Equipment/Notes	Service Dates _____ _____ <u>Reasons</u> <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____ Total Price _____ Less Deposit _____ Total Invoice _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____ <input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance
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2004 Western States Wildland Urban Interface Program

FILE

1	State information for: CSFS District or Unit:	
	State Contact:	District/Unit priority for this application: <u>2</u>
	Name:	Dave Farmer
	Address:	Colorado State Forest Service
		Foothills Campus, Building 1052
		Ft. Collins, CO 80523
	Phone:	970 491-8660
	E-Mail:	dfarmer@lamar.colostate.edu

2	Applicant Information	
	Applicant Name: Poudre Canyon Fire Protection District	
	Contact Person:	Bette Blinde
	Address:	6004 CR 68C
		Red Feather Lakes, CO 80545
	Phone:	970 881-2902
	Fax:	970 881-2587 call first
	E-Mail:	bjb333@aol.com

3	Community Information										
	Community Name: Poudre Canyon - Poudre Park, Rustic, Poudre City										
	County: Larimer	Congressional District: _____									
	Impacted Population: 1500	No. of Homes Impacted: _____									
	What organization in the community is providing leadership for the project										
	Homeowners Association _____										
	Fire Department or Protection District Poudre Canyon Fire Protection District										
	Local Government _____										
	County Government: _____										
	Corporation _____										
	Private Individual _____										
	Threat Description <table style="margin-left: auto; margin-right: 0;"> <tr> <td>Homes:</td> <td style="border: 1px solid black; text-align: center;">590</td> </tr> <tr> <td>Businesses:</td> <td style="border: 1px solid black; text-align: center;">35</td> </tr> <tr> <td>Watersheds (community drinking water):</td> <td style="border: 1px solid black; text-align: center;">2</td> </tr> <tr> <td>Infrastructure:</td> <td style="border: 1px solid black; text-align: center;">6</td> </tr> <tr> <td>Economic Viability:</td> <td style="border: 1px solid black; text-align: center;">x</td> </tr> </table> <p style="text-align: center;">(Check what is threatened)</p>		Homes:	590	Businesses:	35	Watersheds (community drinking water):	2	Infrastructure:	6	Economic Viability:
Homes:	590										
Businesses:	35										
Watersheds (community drinking water):	2										
Infrastructure:	6										
Economic Viability:	x										

TO BE FILLED IN BY STATE OFFICE				
4	Wildland Condition*		Risk**	Interface
	Condition Class 1		Very High	
	Condition Class 2		High	
			Intermix	
			Interface	

Condition Class 3 <input type="text"/>	Moderate <input type="text"/>	Occluded
*10 year Strategy Definitions	**State Assessment	Rural
		***WSFM I

Project Summary				
5	Primary Project Type		Units of Measure	
		Y or N		
	Assessment/Scoping:	X	75 miles	
	Planning:	X	75 miles	
	Information/Education:	X	1500 people	
	Implementation/Treatment:	X	35 residences	
	Monitoring/Evaluation:	X	35 residences	
	(To Report)			
	Project Description: Continuation of mitigation work in the Poudre Canyon area.			
	Is this a continuing project from previous year/s: <table border="1" style="display: inline-table; margin-left: 10px;"> <tr> <td style="width: 50px; text-align: center;">Yes</td> <td style="width: 50px; text-align: center;">N</td> </tr> </table>			Yes
Yes	N			
Briefly identify accomplishments, including Units of Measure: Mitigate 18 homes with large equipment, 60 residences are working on mitigation plans.				
How will you mitigate the threats checked in Block 3? We will provide information to residences living in the area via newsletter and community meeti encourage them to develop and implement mitigation plan for their area. We will continue to pr financial assistance to help residents remove trees that are difficult or dangerous for individua remove. We will also contract to mitigate access roads and lanes that we have determined we hazardous from assessment done in 2003. We discovered that residents prefer to chip their s because over the last few years the weather has not lent itself to providing good times to burn are encouraging residents to chip slash.				
Give a brief description of the project steps and activities to achieve objectives. 1. Outline steps and establish who is responsible for implementation of grant. 2. Send out new inform residents of program and encourage enrollment. 3. Order two chippers and do maintenanc current chippers. 4. Develop on-going educational effort on fire prevention and fire mitigation. with volunteers to help neighbors who need assistance. 6. Saw, saw, saw. 7. Chip, chip, chip.				
Time-line for meeting the steps listed above. Include major milestones, accomplishments and c date. Month 1 - outline steps and establish who is responsible for implementation of grant; order chip maintenance on old chippers. Month 2 - send out newsletter and find contractors to work with i Month 3-8 - mitigation work and hold educational meetings coordinate with volunteers to help r Month 9 - evaluation and reporting.				

6	<div style="text-align: center; border-bottom: 1px solid black; margin-bottom: 5px;">Contributors</div> Name the private, local, tribal, state, and/or federal organizations that are contributing or partic getting the project done. Poudre Canyon Fire Protection District, Larimer County Sheriff, Poudre Fire Authority, Larime Wildland Fire Coordinator, ColoraodState Forest Service
---	--

7	Estimated Total Project Cost
	Estimate the total cost of completing the project. Include all funds (federal, state, local, private actual dollars and the value of gifts, supplies, materials, volunteered services, or in-kind match \$ _\$105,000_____

8	Project Revenue (How will be project be funded?)			
	Grant Request (List Below)	Other Funds (List Source in columns to right)		
		Dollars (Hard Match)	\$5,000	
	\$50,000			
		In-Kind (Soft Match)	\$50,000	
		Total Match	\$55,000	
Application will be disqualified with insufficient match identified (Federal dollars do not qualify)				

9	Project Expense (How will funds be spent?)					
	(List Source in columns to right)	Grant	Residents	District	Volunteers	
	Cooperators Salary/ Wages/Benefits					
	Operating Expenses					
	Contractual Services	\$50,000	\$39,000	\$8,000	\$8,000	
	Capital Expenses					
Indirect Costs						
Total	\$50,000	\$39,000	\$8,000	\$8,000		

10	Additional Comments
	This is the second year of our mitigation work. It is an on-going process for homeowners and found that because of limited space, chipping works better for most of the homeowner than tak slash to a community slash pile. Thus we want to expand the chipping program. We will continue provide assistance to the elderly residents of our community and assist them to do mitigation.

Grant

Type ***

Definitions

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, both y):

Total
\$105,000
\$105,000

we have ce the ue to

2004 Western States Wildland Urban Interface Grant Program ATTACHMENT A

1	State information for: Fort Collins	
	CO-7-FC-2	
	State Contact:	Name: Dave Farmer Project # - 00A Address: Colorado State Forest Service Foothills Campus, Building 1052 Ft. Collins, CO 80523
	Phone:	970 491-8660
	E-Mail:	dfarmer@lamar.colostate.edu

2	Applicant Information	
	Applicant Name:	Poudre Canyon Fire Protection District
	Contact Person:	Bette Blinde
	Address:	6004 CR 68C Red Feather Lakes, CO 80545
	Phone:	970 881-2902
	Fax:	970 881-2587 call first
	E-Mail:	bjb333@aol.com

3	Community Information	
	Community Name: Poudre Canyon - Poudre Park, Rustic, Poudre City	
	County: Larimer	Congressional District: 4
	Impacted Population: 1500	No. of Homes Impacted: 590
	What organization in the community is providing leadership for the project	
	Homeowners Association	
	Fire Department or Protection District: Poudre Canyon Fire Protection District	
	Local Government	
	County Government:	
	Corporation	
Private Individual		
Threat Description		
Homes: 590 Businesses: 35 Watersheds (community drinking water): 2 Infrastructure: 6 Economic Viability: x (Check what is threatened)		

4	TO BE FILLED IN BY STATE OFFICE					
	Wildland Condition*		Risk**		Interface Type***	
	Condition Class 1	<input type="checkbox"/>	Very High	<input type="checkbox"/>	Intermix	<input type="checkbox"/>
	Condition Class 2	<input type="checkbox"/>	High	<input type="checkbox"/>	Interface	<input type="checkbox"/>
	Condition Class 3	<input type="checkbox"/>	Moderate	<input type="checkbox"/>	Occluded	<input type="checkbox"/>
				Rural	<input type="checkbox"/>	
*10 year Strategy Definitions			**State Assessment		***WSFM Definitions	

Project Summary			
	Primary Project Type <div style="text-align: right; padding-right: 10px;">Y or N</div>	Units of Measure <div style="display: flex; justify-content: space-around; font-weight: normal;"> <div style="text-align: right; padding-right: 10px;">Number</div> <div style="text-align: left; padding-left: 10px;">Unit</div> </div>	
	Assessment/Scoping: <input checked="" type="checkbox"/>	75	miles
	Planning: <input checked="" type="checkbox"/>	75	miles
	Information/Education: <input checked="" type="checkbox"/>	1500	people
	Implementation/Treatment: <input checked="" type="checkbox"/>	35	residences
	Monitoring/Evaluation: <input checked="" type="checkbox"/>	35	residences
(To Report)			
Project Description: Continuation of mitigation work in the Poudre Canyon area.			
Is this a continuing project from previous year/s: Yes N			
Briefly identify accomplishments, including Units of Measure: Mitigate 18 homes with large equipment, 60 residences are working on mitigation plans.			
5	How will you mitigate the threats checked in Block 3? We will provide information to residences living in the area via newsletter and community meetings and encourage them to develop and implement mitigation plan for their area. We will continue to provide financial assistance to help residents remove trees that are difficult or dangerous for individuals to remove. We will also contract to mitigate access roads and lanes that we have determined were hazardous from assessment done in 2003. We discovered that residents prefer to chip their slash and because over the last few years the weather has not lent itself to providing good times to burn slash, we are encouraging residents to chip slash.		
	Give a brief description of the project steps and activities to achieve objectives.		
	1. Outline steps and establish who is responsible for implementation of grant. 2. Send out newsletter and inform residents of program and encourage enrollment. 3. Order two chippers and do maintenance of current chippers. 4. Develop on-going educational effort on fire prevention and fire mitigation. 5. Work with volunteers to help neighbors who need assistance. 6. Saw, saw, saw. 7.		
	Time-line for meeting the steps listed above. Include major milestones, accomplishments and completion date.		
	Month 1 - outline steps and establish who is responsible for implementation of grant; order chippers; do maintenance on old chippers. Month 2 - send out newsletter and find contractors to work with residents. Month 3-8 - mitigation work and hold educational meetings coordinate with volunteers to help residents. Month 9 - evaluation and reporting.		
Contributors			
6	Name the private, local, tribal, state, and/or federal organizations that are contributing or participating in getting the project done. Poudre Canyon Fire Protection District, Larimer County Sheriff, Poudre Fire Authority, Larimer County Wildland Fire Coordinator, Colorado State Forest Service		

7	Estimated Total Project Cost
	Estimate the total cost of completing the project. Include all funds (federal, state, local, private, both actual dollars and the value of gifts, supplies, materials, volunteered services, or in-kind match): \$ <u>\$105,000</u>

8	Project Revenue (How will be project be funded?)				
	Grant Request (List Below)	Other Funds (List Source in columns to right)			
	\$50,000	Dollars (Hard Match)	\$5,000		
		In-Kind (Soft Match)	\$50,000		
		Total Match	\$55,000		
Application will be disqualified with insufficient match identified (Federal dollars do not qualify)					

9	Project Expense (How will funds be spent?)							
	(List Source in columns to right)	Grant	Residents	District	Volunteers			Total
	Cooperators Salary/ Wages/Benefits							
	Operating Expenses							
	Contractual Services	\$50,000	\$39,000	\$8,000	\$8,000			\$105,000
		45,000	RH 6/23/04					
	Capital Expenses							
	Indirect Costs							
	Total	\$50,000	\$39,000	\$8,000	\$8,000			\$105,000

45,000 RH 6/23/04

10	Additional Comments
	This is the second year of our mitigation work. It is an on-going process for homeowners and we have found that because of limited space, chipping works better for most of the homeowner than take the slash to a community slash pile. Thus we want to expand the chipping program. We will continue to provide assistance to the elderly residents of our community and assist them to do mitigation.

		000.00	Colgate (Hard Match)	000.00
		000.00	Colgate (Soft Match)	000.00



POUDRE CANYON FIRE PROTECTION DISTRICT
P.O. Box 364
LAPORTE, CO 80535

*Dist Copy
8/15/05*

August 8, 2005

Kathy Frasier
Colorado State University
Sponsored Programs

*total Ac = 20.25
18.75 (9 Ac)
11.25 Thinning Acres*

Subject: Request for grant payment Sub # 536738-009

Page # A Cover page

B Subaward Agreement copy

#C Attachment C copy

#D Summary Request Attachment B copy

1 Attachment B 3 plans

2 Attachment B 3 plans

3 Attachment B 6 plans

4 Attachment B 5 plans

5 Attachment B 3 plans

Total Plans 20 Request \$ 22,853.75

Respectively Submitted:

Buzz Stith

P.C.F.P.D. Grant mitigation coordinator.

Subaward Agreement

Institution/Organization ("UNIVERSITY")		Institution/Organization ("Collaborator")	
Name:	Colorado State University	Name:	Poudre Canyon Fire Protection District
Address:	Sponsored Programs Fort Collins, CO 80523-2002	Address:	6004 CR 68C Red Feather Lakes, CO 80545
Prime Award No. 04-DG-11020000-010		Subaward No. G-536738-009	
Awarding Agency U.S.D.A. Forest Service		CFDA No. 10.664	
Subaward Period of Performance 10/1/03 – 9/30/05		Amount Funded this Action \$45,000	Cost Share (Match) \$50,000
Project Title 2004 Western States Wildland Urban Interface Grant Program			
Reporting Requirements: Final Report and as specified in Attachment A			

Terms and Conditions

- (1) UNIVERSITY hereby awards a cost reimbursable subaward, as described above, to Collaborator. The statement of work and budget for the subaward are (check one): ☐ as specified in Collaborator's proposal dated _____; or ☒ as shown in Attachment A. In its performance of subaward work, Collaborator shall be an independent entity and not an employee or agent of UNIVERSITY.
- (2) UNIVERSITY shall reimburse Collaborator not more often than monthly for allowable costs. All invoices shall be submitted using the attached Reimbursement Request form (Attachment B), which shall include current and cumulative costs (including cost sharing), subaward number, and certification as to truth and accuracy of invoice. Invoices must be submitted to District Offices for approval and processing for payment. *Invoices that do not reference UNIVERSITY's subaward number shall be returned to Collaborator.*
- (3) A final statement of costs incurred, including cost sharing, marked "FINAL", must be submitted to UNIVERSITY's Administrative Contact NOT LATER THAN sixty (60) days after subaward end date. The final statement of costs shall constitute Collaborator's final financial report. Final payment due the Collaborator may be withheld until all the terms and conditions of the subaward have been met.
- (4) All payments shall be considered provisional and subject to adjustment within the total estimated cost in the event such adjustment is necessary as a result of an adverse audit finding against the Collaborator.
- (5) Matters concerning the technical performance of this subaward should be directed to the appropriate party's Project Director, as shown in Attachment C. Technical reports are required as shown above, "Reporting Requirements."
- (6) Matters concerning the request or negotiation of any changes in the terms, conditions, or amounts cited in this subaward agreement should be directed to the appropriate party's Administrative Contact, as shown in Attachment C. Any such changes made to this subaward agreement require the written approval of each party's Authorized Official, as shown in Attachment C.
- (7) Each party shall be responsible for its negligent acts or omissions and the negligent acts or omissions of its employees, officers, or directors, to the extent allowed by law.
- (8) Either party may terminate this agreement with thirty days written notice to the appropriate party's Administrative Contact, as shown in Attachment 3. UNIVERSITY shall pay Collaborator for termination costs as allowable under OMB Circular A-21 or A-122, as applicable.
- (9) No-cost extensions require the approval of the UNIVERSITY. Any requests for a no-cost extension should be addressed to and received by the Administrative Contact, as shown in Attachment C, not less than thirty days prior to the desired effective date of the requested change.
- (10) The Subaward is subject to the terms and conditions of the Prime Award, Attachment D, and other special terms and conditions, as identified in Attachment E.
- (11) By signing below Collaborator makes the certifications and assurances shown in Attachments F.

Agreed by Authorized Official of UNIVERSITY:		Agreed by Authorized Official of Collaborator:	
Name	Lynn Johnson	Name	
Date		Date	
Title	Director, Sponsored Programs	Title	

**Attachment C
Subaward Agreement**

University Contacts	Collaborator Contacts
Administrative Contact Name: Betty Eckert Address: Sponsored Programs Colorado State University Fort Collins, CO 80523-2002 Telephone: 970-491-1554 Fax: 970-491-6147 Email: betty.eckert@research.colostate.edu	Administrative Contact Name: Bette Blinde Address: 6004 CR 68C PCFPD P.O. Box 364 Laporte CO 80535 Telephone: 970-881-2902 Fax: Email:
Principal Investigator Name: Richard L. Homann Address: Colorado State Forest Service Colorado State University Fort Collins, CO 80523-5060 Telephone: 970-491-6303 Fax: 970-491-7736 Email: Richard.homann@colostate.edu	Project Director Name: Buzz Stith Address: 565 Rustic Rd Bellvue CO 80512 Telephone: 970-881-3585 Fax: 970 881 3585 Email: cstith2@juno.com
Financial Contact Name: Same as Administrative Contact Address: Telephone: Fax: Email:	Financial Contact Name: Vic McLachlan Address: 122 Riverside Dr Bellvue CO 80512 Telephone: 970-881-3425 Fax: office 970 881-2242 Email:
Authorized Official Name: Lynn Johnson Address: Director, Sponsored Programs Colorado State University Fort Collins, CO 80523-2002 Telephone: 970-491-1550	Authorized Official Name: Address: Telephone: Fax: Email:

ATTACHMENT B

**GRANT REPORT/REIMBURSEMENT REQUEST
2003 WSFM COMPETITIVE GRANTS**

Subaward No. G-

536738-009

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. Grant Award #: <i>04-06-1102 0000-010</i>	2. Total Award Amount: <i>45000 -</i>	3. Community Protected: <i>Poudre Canyon</i>																																		
4. Make Payment To: Name: <i>P.C.F.P.D.</i> Address: <i>122 Riverside Dr Bellvue Co 80512 ATTN Vic McLachlan</i>		5. Period of Performance: From: <i>march 1 2005</i> To: <i>August 8 2005</i>																																		
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="margin-top: 10px;"> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">Page #1</td> <td style="width:20%;">3 plans -</td> <td style="width:40%; text-align: right;">4243.75</td> </tr> <tr> <td>Page #2</td> <td>3 plans</td> <td style="text-align: right;">1300.00</td> </tr> <tr> <td>Page #3</td> <td>6 plans</td> <td style="text-align: right;">1465.00</td> </tr> <tr> <td>Page #4</td> <td>5 plans</td> <td style="text-align: right;">9045.00</td> </tr> <tr> <td>Page #5</td> <td>3 plans</td> <td style="text-align: right;">6800.00</td> </tr> <tr> <td colspan="2" style="text-align: right;"><i>20-PLANS</i></td> <td style="text-align: right; border-top: 1px solid black;"><i>22853.75</i></td> </tr> </table> </div>			Page #1	3 plans -	4243.75	Page #2	3 plans	1300.00	Page #3	6 plans	1465.00	Page #4	5 plans	9045.00	Page #5	3 plans	6800.00	<i>20-PLANS</i>		<i>22853.75</i>																
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Page #5	3 plans	6800.00																																		
<i>20-PLANS</i>		<i>22853.75</i>																																		
7. Reimbursement Request: Project to Date Reimbursement Request Amount cannot exceed the total award obligation as identified in the Award Document. The Total Reimbursement Request Amount cannot exceed to Total Matching Funds amount for the period being billed.																																				
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2"></th> <th colspan="3">Current Period</th> <th colspan="3">Project to Date</th> </tr> <tr> <th>Reimbursement Request Amount</th> <th>Matching Funds</th> <th>Total Costs</th> <th>Reimbursement Request Amount</th> <th>Matching Funds</th> <th>Total Costs</th> </tr> </thead> <tbody> <tr> <td>Labor*</td> <td style="text-align: right;">22853.75</td> <td></td> <td style="text-align: right;">22853.75</td> <td style="text-align: right;">22853.75</td> <td></td> <td style="text-align: right;">22853.75</td> </tr> <tr> <td>Material**</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Total</td> <td style="text-align: right;">22853.75</td> <td></td> <td style="text-align: right;">22853.75</td> <td style="text-align: right;">22853.75</td> <td></td> <td style="text-align: right;">22853.75</td> </tr> </tbody> </table>				Current Period			Project to Date			Reimbursement Request Amount	Matching Funds	Total Costs	Reimbursement Request Amount	Matching Funds	Total Costs	Labor*	22853.75		22853.75	22853.75		22853.75	Material**							Total	22853.75		22853.75	22853.75		22853.75
	Current Period			Project to Date																																
	Reimbursement Request Amount	Matching Funds	Total Costs	Reimbursement Request Amount	Matching Funds	Total Costs																														
Labor*	22853.75		22853.75	22853.75		22853.75																														
Material**																																				
Total	22853.75		22853.75	22853.75		22853.75																														
Donated time and materials can only be counted towards the matching component. * Use actual costs or \$11.68/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 : \$ <i>0</i>																																				
9. I request reimbursement in the amount of \$ <i>22,853.75</i> 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 grant award documents.																																				
Signature: <i>Buzz Stith</i> Date: <i>August 8 2005</i>																																				
10. Certification (To be completed by CSFS District): Work meets minimum standards as set forth by CSFS. Signature: <i>Boyd K. Beden</i> Date: <i>8/15/05</i>																																				

ATTACHMENT B
GRANT REPORT/REIMBURSEMENT REQUEST
2003 WSFM COMPETITIVE GRANTS

Page # 1

Subaward No. G- 536738-009

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. Grant Award #: 04-DG-11020000-0102		2. Total Award Amount: 45,000.00		3. Community Protected: Poudre Canyon		
4. Make Payment To: Name: Poudre Canyon Fire Dist. Address: 122 Riverside Dr Bellvue Co 80512 ATTN: Vic McLachlan			5. Period of Performance: From: 5/21/05 To: 7/28/05			
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.)						
<p>5/21/05 #1 Jan Hamilton - 350.00 Contractor Helping ARMES 1 plan attached</p> <p>7/6/05 #2 Donovan Foote & 393.75 Contractor Helping ARMES 1 plan attached</p> <p>7/28 #3 Poudre Canyon, Old Poudre City Inc (owner) \$3500.00 1 plan attached Eggers School</p> <p style="text-align: center;">3-Plans TOTAL \$4243.75 3 Total Plans</p>						
7. Reimbursement Request:						
Project to Date Reimbursement Request Amount cannot exceed the total award obligation as identified in the Award Document. The Total Reimbursement Request Amount cannot exceed to Total Matching Funds amount for the period being billed.						
	Current Period			Project to Date		
	Reimbursement Request Amount	Matching Funds	Total Costs	Reimbursement Request Amount	Matching Funds	Total Costs
Labor* 1-2-3	4243.75		4243.75	4243.75		4243.75
Material**						
Total	4243.75		4243.75			
Donated time and materials can only be counted towards the matching component.						
* Use actual costs or \$11.68/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 : \$ 0						
9. I request reimbursement in the amount of \$ 4243.75 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 grant award documents.						
Signature: Buzz Smith			Date: August 8, 2005			
10. Certification (To be completed by CSFS District):						
Work meets minimum standards as set forth by CSFS.						
Signature: Kyle De Hebrida			Date: 8/15/05			

Helping ARMES
P.O. BOX 186
BELLVUE, CO 80512
970-881-2360

EFN 74-3112733

Customer's
Order No.

Date 5/21

20 05

Name JAN HAMILTON PCFPD

Address 35386 Poudre Canyon
BELLVUE, CO

SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT.	MOSE. RETD.	PAID OUT	
QUAN.	DESCRIPTION					PRICE	AMOUNT
	FIRE MITIGATION:						
	REMOVAL OF JUNIPERS						
	COTTONWOODS (DEAD) AND						
	OLD BLDG FLOOR & FOUNDATION						\$280.-
	BRUSH DISPOSAL						\$70.-
	Remove 2 Large Junipers						
	Remove 3 Med Cottonwood						
	Trim 1 Juniper Large + 1 Fir tree						
	Remove 1 Rotten floor + foundation						
	Clean up leaves + needles around						
	foundation + porch						
	Clear defensible space zone #1						
	TOTAL						\$350.-

ALL claims and returned goods MUST be accompanied by this bill.

Rec'd By

"HELPING HANDS"

P.O. BOX 186

BEILLE, CO 80512

632925

#2

Customer's
Order No.

Date

7/6

20 05

Name DONOVAN FOTE

Address CABIN - POUDRE CANYON

SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT	MOSE. RETD.	PAID OUT	
QUAN.	DESCRIPTION					PRICE	AMOUNT
2.5 HRS	CUT & SPLIT ASPEN WOOD (STACK IN SHED)					22 ⁵⁰	213 75
	CUT DOWN DEAD SPRUCE TREE						180 00
THANK YOU!							
Yancy & Joan Ains							
TOTAL						\$	393 75

ALL claims and returned goods MUST be accompanied by this bill.

Rec'd By

cut down 1 dead large spruce tree + remove brush + wood
cut down + split, stacks several aspens.
dead trees were a hazard for fire. Created defensible
space around home.

Buzz Still

HELPING ARMES
970-881-2360

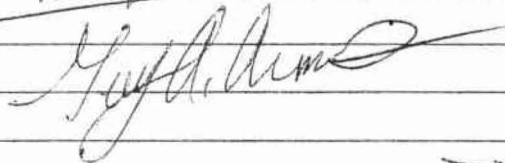
632931

EIN 74-3112733

3

Customer's
Order No. FINAL BILLING Date 7/28 2005
Name PCFPD - FOR PODORE CANYON CHAPEL, EGGERS
Address SCHOOL, COMMUNITY CENTER, BELLEVUE, CO.

FIRE MITIGATION

SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT	MOSE. RETD.	PAID OUT	
QUAN.	DESCRIPTION					PRICE	AMOUNT
	BILLING FOR WORK AS PER PROPOSAL OF 10 MAY 05						
	WORK PERFORMED FROM PLAYGROUND AREA (EAST) TO 100' EAST OF SCHOOL AND SOUTH TO RIVERBED						\$3500.00
	THANK YOU.						
							
	TOTAL						\$3500.00

ALL claims and returned goods MUST be accompanied by this bill.

Rec'd By

Removed several dead cottonwood, pine, fir, +
Junipers in an 100'x150' area around ^{old} Eggert school
Historic building. Created a defensible space
approximate 1.5 acres.

Guy Stults

ATTACHMENT B
GRANT REPORT/REIMBURSEMENT REQUEST
2003 WSFM COMPETITIVE GRANTS

Page # 2

Subaward No. G-
536738-009

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. Grant Award #: <u>04-06-11020000-010</u>	2. Total Award Amount: <u>45,000</u>	3. Community Protected: <u>Poudre Canyon</u>																														
4. Make Payment To: Name: <u>Poudre Canyon Fire Dist</u> Address: <u>122 River Side Dr</u> <u>Bellvue Co 80512</u> <u>ATTN Vic McLachlan</u>		5. Period of Performance: From: <u>03-08-05</u> To: <u>03-24-05</u>																														
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.) <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">#4</td> <td style="width: 20%;">3/14/05</td> <td style="width: 40%;">Jim Sch Schroeder</td> <td style="width: 20%;">Contractor Fire Ready</td> <td style="width: 10%; text-align: right;">\$ 250.00</td> </tr> <tr> <td>#5</td> <td>3/08/05</td> <td>Bob Hill</td> <td>Contractor Fire Ready</td> <td style="text-align: right;">300.00</td> </tr> <tr> <td>#6</td> <td>3/14/05</td> <td>Gerald Isaacson</td> <td>Contractor Fire Ready</td> <td style="text-align: right;">150.00</td> </tr> <tr> <td>#7</td> <td>3/14/05</td> <td>Buzz Stith</td> <td>Contractor Fire Ready</td> <td style="text-align: right;">300.00</td> </tr> <tr> <td>#8</td> <td>3/24/05</td> <td>Brett Ridger</td> <td>Contractor Fire Ready</td> <td style="text-align: right;">300.00</td> </tr> <tr> <td colspan="4" style="text-align: right;">5 plans total</td> <td style="text-align: right; border-top: 1px solid black;">\$ 1300.00</td> </tr> </table>			#4	3/14/05	Jim Sch Schroeder	Contractor Fire Ready	\$ 250.00	#5	3/08/05	Bob Hill	Contractor Fire Ready	300.00	#6	3/14/05	Gerald Isaacson	Contractor Fire Ready	150.00	#7	3/14/05	Buzz Stith	Contractor Fire Ready	300.00	#8	3/24/05	Brett Ridger	Contractor Fire Ready	300.00	5 plans total				\$ 1300.00
#4	3/14/05	Jim Sch Schroeder	Contractor Fire Ready	\$ 250.00																												
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#8	3/24/05	Brett Ridger	Contractor Fire Ready	300.00																												
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7. Reimbursement Request: Project to Date Reimbursement Request Amount cannot exceed the total award obligation as identified in the Award Document. The Total Reimbursement Request Amount cannot exceed to Total Matching Funds amount for the period being billed.																																
	Current Period		Project to Date																													
	Reimbursement Request Amount	Matching Funds	Total Costs	Reimbursement Request Amount	Matching Funds	Total Costs																										
Labor*	1300.00		1300.00																													
Material**																																
Total	1300.00		1300.00																													
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8. Amount Paid to CSFS for Products and/Or Services : \$ <u>0</u>																																
9. I request reimbursement in the amount of \$ 1300.00 <u>1300.00</u> 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 grant award documents.																																
Signature: <u>Buzz Stith</u>			Date: <u>August 8 2005</u>																													
10. Certification (To be completed by CSFS District):																																
Work meets minimum standards as set forth by CSFS.																																
Signature: <u>Boyle Lebeda</u>			Date: <u>8/15/05</u>																													



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481-0814
Telephone: ~~970-221-0814~~
Email: fortcollins@fireready.com

Consultant: Tony Quotation for Work Date: _____

Client Information		How did Client hear of Fire Ready?
Name <u>Jim Schroeder</u> <u>PL FPD</u>	Property Address <u>154 Crown Pt Dr</u>	Telephone <u>881-2766</u>
Deposit Amount/Check Number <u>#2301 #150.00</u>	Mailing Address <u>565 Rustic Rd Bellvue, CO</u> <u>80512</u>	Scheduling Date(s) <u>3/13</u>
Work to be Performed <u>Remove clumps of trees flagged along river bank</u> <u>Talk with homeowner about handling logs. Pickups</u> <u>along back of property. Talk with Jim about</u> <u>getting chips to back of property.</u>		

Rate

Fixed ☐

Climbing Fees ☐

Total Price:

\$250

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature

Doug Stitt

Printed Name

Doug Stitt

Date

3/13/15

Remove dead clumps of Brush at Rear of home
Remove lower branches 2 large pine trees & chips all.
Remove ladder fuels within 50 feet of home.



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

Telephone: 970-481-0814
Email: fortcollins@fireready.com

Consultant: Tony Quotation for Work Date: 3-8-05

Client Information		How did Client hear of Fire Ready?
Name <u>PCFPD</u> <u>Bob Hill</u>	Property Address <u>296 Crown Point Dr</u>	Telephone <u>981-3791</u>
Deposit Amount/Check Number <u>\$150.00 ch 4672</u> <u>PCFPD</u>	Mailing Address <u>PCFPD</u> <u>565 Rustic Rd Bellvue, CO</u> <u>80512</u>	Scheduling Date(s) <u>3/13</u>
Work to be Performed <u>Take down tree along Fence.</u> <u>Phone line runs through tree, some branches</u> <u>will have to be "strapped" + "lowered".</u> <u>Remove slash leave firewood</u>		

Rate

Fixed ☒

Climbing Fees ☐

Total Price:

300

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature [Signature] Printed Name Tony Date 3/8/05

Remove one Dead Tree along fence + house
Remove + chip slash at another location
Plan ~~Tree~~ ~~Removal~~ Removal - hay and.



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481-0514
Telephone: 970-469-0004
Email: fortcollins@fireready.com

Consultant: Tony

Quotation for Work

Date: _____

Client Information		How did Client hear of Fire Ready?
Name <i>Gerald Isaacson</i> <i>PCFPD</i>	Property Address <i>608 Rustic Rd</i>	Telephone <i>971-2263</i>
Deposit Amount/Check Number <i>\$750 ck# 4779</i>	Mailing Address <i>565 Rustic Rd Boulder CO 80512</i>	Scheduling Date(s) <i>3/13</i>
Work to be Performed <i>chip 2 slash piles. move slash pile to upper pile and chip to the east.</i>		

Rate Fixed ☒

Climbing Fees ☐

Total Price:

4150

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is Insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature *[Signature]*

Printed Name *Steve Smith*

Date *3/13/13*

create defensible space chip owner slash piles
aprox 10 cu yds.



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481-0814
Telephone: 970-446-0814
Email: fortcollins@fireready.com

Consultant: Tony Quotation for Work Date: _____

Client Information		How did Client hear of Fire Ready?	
Name <u>Buzz Smith</u> <u>PCFPD</u>	Property Address <u>565 Rustic Rd</u>	Telephone <u>881-3585</u>	
Deposit Amount/Check Number <u>\$150.00 # 6913</u>	Mailing Address <u>565 Rustic Rd Redvale, CO 80512</u>	Scheduling Date(s) <u>3/13</u>	
Work to be Performed <u>Remove large beetle infested tree.</u> <u>chip slash into Buzz's trailer, leave firewood</u> <u>for Buzz.</u> <u>+ Because of potential property damage we will rope</u> <u>and pull tree in designated direction</u>			

Rate

Fixed ☒

Climbing Fees ☐

Total Price:

\$300

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature Tony Smith

Printed Name Tony Smith

Date 3/14/13

Remove one insect infested large pine tree
Part of owner plan to meet defensible space on
3.25 acres.



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

Telephone: 970-418-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: TJ

Date: 2-24

Client Information		How did Client hear of Fire Ready?	
Name <u>Pat & Rylee</u>	Property Address <u>41531 96th</u>	Telephone <u>821 2336</u>	
Deposit Amount/Check Number <u>150 cl #16982</u>	Mailing Address <u>565 Rustic Rd CO 80512</u>	Scheduling Date(s) <u>3/24</u>	
Work to be Performed <u>Chip to remove 2 slash piles created making defensible space around home</u>			

Rate

Fixed ☐

Climbing Fees ☐

Total Price:

300

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is Independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature [Signature]

Printed Name TJ

3/24/06

Chip to remove 2 slash piles created making defensible space around home

Page #3

ATTACHMENT B
GRANT REPORT/REIMBURSEMENT REQUEST
2003 WSFM COMPETITIVE GRANTS

Subaward No. G-

536738-009

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. Grant Award #: 04-06-1102000-010	2. Total Award Amount: 45000-	3. Community Protected: Poudre Canyon
4. Make Payment To: Name: PCFPD Address: 122 Riverside Dr Bellvue Co 80512 ATTN Vic McLachlan		5. Period of Performance: From: 5/24/05 To: 6/14/05

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.)

#9 5/24/05 Ron Lonneman	Contractor fire Ready	\$ 300.00
#10 5/24/05 Daniel Vonfeldt	Contractor fire Ready	300.00
#11 5/24/05 Dave Platt	Contractor fire Ready	300.00
#12 5/24/05 Dick Brown	Contractor fire Ready	300.00
#13 6/14/05 Connie Arden	Contractor fire Ready	100.00
#14 6/14/05 Glenn Daniels	Contractor fire Ready	165.00
6 Plans total		1465.00

7. Reimbursement Request:

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

	Current Period			Project to Date		
	Reimbursement Request Amount	Matching Funds	Total Costs	Reimbursement Request Amount	Matching Funds	Total Costs
Labor*	1465.00		1465.00			
Material**						
Total	1465.00		1465.00			

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

* Use actual costs or \$11.68/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 : \$ 0

9. I request reimbursement in the amount of \$ 1465 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 grant award documents.

Signature: Buzz Stith

Date: 08/09/05

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

Work meets minimum standards as set forth by CSFS

Signature: Bob O Lebede

Date: 8/15/05



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

Telephone: 970-418-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: Tim

Date: 5/24/05

Client Information		How did Client hear of Fire Ready?	
Name <u>PLFPD</u> <u>Ron Lonneman</u>	Property Address <u>31601 PCHwy</u>	Telephone <u>984-3411</u>	
Deposit Amount/Check Number	Mailing Address <u>363 Rutland Fort Collins, CO</u> <u>80512</u>	Scheduling Date(s) <u>5-24</u>	
Work to be Performed <u>Remove old dead elms along river, cut up fence back</u> <u>and leave for homeowners, chip slash into forest.</u>			

Total Price:

\$300

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is Insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature

Brynn Smith

Printed Name

Brynn Smith

Date

5/24/05

Plan Remove dead Trees, Chip limbs,
creating additional defensive space



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

Telephone: 970-418-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant:

Date:

Client Information		How did Client hear of Fire Ready?	
Name <u>Denise + Paul</u> <u>Von Felt</u> <u>PCFFD</u>	Property Address <u>42094</u>	Telephone <u>970-418-0814</u>	
Deposit Amount/Check Number	Mailing Address <u>1000 1/2 1st St. Fort Collins, CO 80525</u>	Scheduling Date(s) <u>5/29</u>	
Work to be Performed <u>This cleanup of yard and around house for fire safety. Remove some of the brush, trim up around house and trim up around house. Also remove 3 trees close to house on E side of house.</u>			

Total Price:

\$300

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature [Signature]

Printed Name Paul Von Felt

Date 5/24/14

Plan Remove ladder fuels
+ trim lower limbs
Remove 3 trees close to house
Chop slash.



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

Telephone: 970-481-0814
Email: fortcollins@fireready.com

Consultant: Tony Quotation for Work Date: 5-24

Client Information		How did Client hear of Fire Ready?
Name <u>Dave Platt</u> <u>PCFPD</u>	Property Address <u>31625 PCHwy</u>	Telephone <u>881-2224</u>
Deposit Amount/Check Number	Mailing Address <u>PCFPD</u> <u>Bellvue, CO</u> <u>565 Rustic Rd</u> <u>80512</u>	Scheduling Date(s) <u>5-24</u>
Work to be Performed <u>Remove timber pine and dead Aspen from East side of house. Limb up Ponderosa by old garage and clean pine needles off old garage roof.</u>		

#11

Plan
Remove 1-pine + dead aspen from east side of home
Remove Limb on large pine - Clean off roof needles chip slash

1g Fees ☐

Total Price:

300

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
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- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature

Buzz Stith

Printed Name

Buzz Stith

Date

5/24/05

For Fire Ready office use only Detailed Directions	Service Dates _____ _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____
	Reasons <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____	<input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance
Meeting Time _____ Place _____	Total Price _____	
Special Equipment/Notes	Less Deposit _____	
	Total Invoice _____	



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

Telephone: 970-⁴⁸¹418-0814
Email: fortcollins@fireready.com

Consultant: Tony

Quotation for Work

Date: 5/24/05

Client Information		How did Client hear of Fire Ready?	
Name <u>Dick Brown</u> <u>PCFPD</u>	Property Address <u>35201 PCHwy</u>	Telephone <u>881-3770</u>	
Deposit Amount/Check Number	Mailing Address <u>565 Rustic Rd Bel/Wrk, CO</u> <u>80512</u>	Scheduling Date(s) <u>5/24</u>	
Work to be Performed <u>Bring down large spruce next to house,</u> <u>close to house + Power Lines, cut firewood up for Dick,</u> <u>chip and HAUL slash offsite. (Take chips to Vic leave</u> <u>firewood for Dick)</u>			

#12

Plan Remove one large tree next to home
haul slash to another location

ees ☐

Total Price:

\$300

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
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- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature

Buzz Stith

Printed Name

Buzz Stith

Date

5/24/05



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

Telephone: 970-440-8844
Email: fortcollins@fireready.com

Quotation for Work

Consultant: Tony

Date: 6-14-05

#13

Client Information		How did Client hear of Fire Ready?
Name <u>PCFPD</u> <u>Charles Arner</u>	Property Address <u>Archers</u>	Telephone
Deposit Amount/Check Number	Mailing Address <u>565 Rustic Dr.</u>	Scheduling Date(s)
Work to be Performed <u>chip large slash pile in field</u> <u>has in kind work to be filed</u>		

Rate

Fixed ☒

Climbing Fees ☐

Plan - chip owner slash pile reduce fire danger

Total Price:

100

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Buzz

1432
4:52

Client Signature

Buzz Smith

Printed Name

Buzz Smith

Date

6/14/05

For Fire Ready office use only Detailed Directions	Service Dates _____ _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____
	Reasons <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____	<input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance
Meeting Time _____ Place _____	Total Price _____	
Special Equipment/Notes	Less Deposit _____	
	Total Invoice _____	



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

Telephone: 970-416-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: TONY

Date: 6/14/05

Client Information		How did Client hear of Fire Ready?	
Name <u>REFPO</u> <u>Contract 6017</u>	Property Address <u>219 S. 1st St. U. Denver</u>	Telephone	
Deposit Amount/Check Number <u>17</u>	Mailing Address <u>666 W. 1st St. U. Denver</u>	Scheduling Date(s)	
Work to be Performed <u>Strip lawn slash piles down to 10' or more</u>			

Rate A Fixed ☐

Climbing Fees ☐

Total Price:

\$165

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
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- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature

Buzz Smith

Printed Name

Buzz Smith

Date

6/14/05

Plan - assist owner with removal of slash piles
TO create defensible space

ATTACHMENT B
GRANT REPORT/REIMBURSEMENT REQUEST
2003 WSFM COMPETITIVE GRANTS

Subaward No. G-

536738-009

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. Grant Award #: 04-061102 -0000-010	2. Total Award Amount: 45,000	3. Community Protected: Poudre Canyon																					
4. Make Payment To: Name: PCFPD Vic McLachlan Address: 122 River Side Drive Bellvue Co 80512		5. Period of Performance: From: June 20-2005 To: July 30-2005																					
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.)																							
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">#15 Wendall Franks - Contracts Fire Ready</td> <td style="width:20%;">6-20-05</td> <td style="width:40%; text-align: right;">\$ 2795.-</td> </tr> <tr> <td>#16 Paulicia Larsen</td> <td>" Fire Ready 6-(21-24)05</td> <td style="text-align: right;">1725.-</td> </tr> <tr> <td>#17 Donovan Foster</td> <td>" Fire Ready 7-1-05</td> <td style="text-align: right;">575.00</td> </tr> <tr> <td>#18 Bruce Smith</td> <td>" Fire Ready 7-12-05</td> <td style="text-align: right;">1150.00</td> </tr> <tr> <td>#19 Connie Hornor</td> <td>" Fire Ready 7-(21-22)05</td> <td style="text-align: right;">2700.00</td> </tr> <tr> <td>#20 Connie Hornor #2</td> <td>" Fire Ready 7-30-05</td> <td style="text-align: right;">150.00</td> </tr> <tr> <td colspan="2" style="text-align: right;">5 PLANS total.</td> <td style="text-align: right;">9045.00</td> </tr> </table>			#15 Wendall Franks - Contracts Fire Ready	6-20-05	\$ 2795.-	#16 Paulicia Larsen	" Fire Ready 6-(21-24)05	1725.-	#17 Donovan Foster	" Fire Ready 7-1-05	575.00	#18 Bruce Smith	" Fire Ready 7-12-05	1150.00	#19 Connie Hornor	" Fire Ready 7-(21-22)05	2700.00	#20 Connie Hornor #2	" Fire Ready 7-30-05	150.00	5 PLANS total.		9045.00
#15 Wendall Franks - Contracts Fire Ready	6-20-05	\$ 2795.-																					
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#20 Connie Hornor #2	" Fire Ready 7-30-05	150.00																					
5 PLANS total.		9045.00																					
7. Reimbursement Request: Project to Date Reimbursement Request Amount cannot exceed the total award obligation as identified in the Award Document. The Total Reimbursement Request Amount cannot exceed to Total Matching Funds amount for the period being billed.																							
	Current Period		Project to Date																				
	Reimbursement Request Amount	Matching Funds	Total Costs	Reimbursement Request Amount	Matching Funds	Total Costs																	
Labor*	9045.00		9045.00																				
Material**																							
Total	9045.00		9045.00																				
Donated time and materials can only be counted towards the matching component. * Use actual costs or \$11.68/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: \$ 0																							
9. I request reimbursement in the amount of \$ 9045.00 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 grant award documents.																							
Signature: Buzz Smith			Date: August 8, 2005																				
10. Certification (To be completed by CSFS District):																							
Work meets minimum standards as set forth by CSFS.																							
Signature: Boyd Lebeck			Date: 8/15/05																				



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481
Telephone: 970-428-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: _____

Date: 6-20-05

Client Information		How did Client hear of Fire Ready?	
Name <u>Wanda Frouks</u> <u>PCFPD</u>	Property Address <u>PC Hwy</u>	Telephone <u>224-5858</u>	
Deposit Amount/Check Number	Mailing Address <u>565 Rustard Rd</u> <u>Boulder, CO</u> <u>80512</u>	Scheduling Date(s) <u>6/21, 22, 23</u>	
Work to be Performed <u>Trimming and cleanup along N side of home.</u>			

1.5 AC Plan - Create defensible space 200' to 300' around Ridge top home site est 150 Trees removed

Climbing Fees ☐

Total Price:
\$2795

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature

Buzz Slith

Printed Name

Buzz Slith

Date

June 26, 2005



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

4181
Telephone: 970-468-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: _____

Date: _____

Client Information		How did Client hear of Fire Ready?
Name <i>Pauline Larsen</i> <i>PCFPD</i>	Property Address <i>PC Hwy</i> <i>7587</i>	Telephone <i>493-0363</i>
Deposit Amount/Check Number	Mailing Address <i>Bellevue, CO</i> <i>565 Rustic Rd 80512</i>	Scheduling Date(s) <i>6/23 + 6/24</i>
Work to be Performed <i>Thinning and removal of down deadwood from back of house start thinning after deadwood is out. Clear pine needles of roofs + decks. Need whacking along road and around home. Starting w/ 1 1/2 + 2 recommended days. will work with Pauline to finish project in August.</i>		

Rate ☒ Fixed ☐

Climbing Fees ☐

1 1/2 days @ \$1190 a day

Total Price:

\$1725

Stipulations

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Client Signature *Buzz Stith*

Printed Name *Buzz Stith*

Date *June 26, 2005*

*Plan Remove dead insect trees
thin trees to create defensible space
Remove needles from Roof + Deck
Open the Tree Canopy to Reduce fire danger*



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481
Telephone: 970-418-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: 7-1-1

Date: _____

Client Information		How did Client hear of Fire Ready?
Name <u>Bob & Joie</u> <u>7-1-1</u>	Property Address <u>44163 Pe Day</u>	Telephone <u>970-20356</u> <u>6020</u>
Deposit Amount/Check Number	Mailing Address <u>44163 Pe Day</u> <u>80512</u>	Scheduling Date(s) <u>7/1</u>
Work to be Performed <u>land work and tree removal around</u> <u>home, clear space and remove logs back</u> <u>of home.</u>		

#17
Plan Remove Junipers, dead aspens to create
additional defensible space

Climbing Fees ☐

Total Price:
575⁰⁰

2

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
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- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature Buzz Smith

Printed Name Buzz Smith

Date 7-1-05

For Fire Ready office use only Detailed Directions	Service Dates _____ _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____
	Reasons <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____	<input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance
Meeting Time _____ Place _____	Total Price _____	
Special Equipment/Notes	Less Deposit _____	
	Total Invoice _____	



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

Telephone: 970-418-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: _____

Date: 7/13/05

Client Information		How did Client hear of Fire Ready?	
Name <u>PEEP</u> <u>Buzz Smith</u>	Property Address <u>31603 PC Hwy</u>	Telephone <u>719 598 4971</u>	
Deposit Amount/Check Number	Mailing Address <u>565 E. 1st St. Fort Collins CO 80512</u>	Scheduling Date(s)	
Work to be Performed <u>Remove ladder fuel limb up.</u> <u>Remove several trunks.</u> <u>Remove dead limbs & several dead trees.</u> <u>1.5 acres.</u> <u>2 large chip piles</u>			

Rate ☒ Fixed ☐

Climbing Fees ☐

Total Price:

\$1150

Stipulations

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- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature Buzz Smith

Printed Name Buzz Smith

Date 7/12/05

For Fire Ready office use only
Detailed Directions

Meeting Time _____ Place _____

Special Equipment/Notes

Service Dates

Reasons

- ☐ Added Charges _____
☐ Discounts _____
☐ _____

Total Price _____

Less Deposit _____

Total Invoice _____

Future Work

- ☐ Spraying
When _____
Quantity _____

☐ More Mitigation Needed

☐ Crew Days _____

☐ Off-schedule

☐ Maintenance



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

Telephone: 970-426-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: _____

Date: _____

Client Information		How did Client hear of Fire Ready?
Name Connie Holmer	Property Address 42126 PE Hwy	Telephone 881-2131 @ cabin 505 881-1953 hm NM
Deposit Amount/Check Number	Mailing Address	Scheduling Date(s) 7/21/ 7/22
Work to be Performed space around home. Take down 2 large beetle trees next to home. Pruning of remaining trees haul dead to existing slash piles + chip. Clear needles off roof and around home. Haul off beetle wood - stack firewood. Take 2 dump runs to landfill of old wood + metal junk.		

Rate ☒ Fixed ☐

Climbing Fees ☐

2 days @ 1150 plus additional climbing + hauling \$900.00

Total Price:

\$2700

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
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Client Signature

Buzz Smith

Printed Name

Buzz Smith

Date

7/25/05

For Fire Ready office use only
Detailed Directions

Meeting Time _____ Place _____

Special Equipment/Notes

Service Dates

Reasons

- ☐ Added Charges _____
☐ Discounts _____
☐ _____

Total Price _____

Less Deposit _____

Total Invoice _____

Future Work

☐ Spraying
When _____

Quantity _____

☐ More Mitigation Needed

☐ Crew Days _____

☐ Off-schedule

☐ Maintenance



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481
Telephone: 970-228-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: _____

Date: 8/1/05

Client Information		How did Client hear of Fire Ready?	
Name <u>Connie Hower #2</u>	Property Address <u>92126 PCH</u>	Telephone _____	
Deposit Amount/Check Number _____	Mailing Address _____	Scheduling Date(s) <u>7/30</u>	
Work to be Performed <u>Additional Beetle tree from previous</u> <u>Job.</u>			

Rate

Fixed ☐

Climbing Fees ☐

Total Price:

4100

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
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- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature Brynn Stork

Printed Name Brynn Stork

Date 8/1/05

For Fire Ready office use only Detailed Directions Meeting Time _____ Place _____ Special Equipment/Notes _____	Service Dates _____ _____ Reasons <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____ Total Price _____ Less Deposit _____ Total Invoice _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____ <input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance
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Page 5

536738-009

1. Grant Award #: 04-06 1102 - 0000 - 010	2. Total Award Amount: \$4500 ⁰⁰	3. Community Protected: Poudre Canyon				
4. Make Payment To: Name: PCFPD. Address: # 122 River Side Dr. Bellvue Co 80512 ATTN Vic McLachlan		5. Period of Performance: From: 8-01-2005 To: 8-06-2005				
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.)						
# 21 mile pickett - 8-1-05 Contractor Fire Ready		\$ 400. ⁰⁰				
# 22 Dave Ammons 8-5-05 " Fire Ready		1225. ⁰⁰				
# 23 Old Poudre city inc Poudre chapel, Community Bldg (8-1)-Thru 8-6)		5175. ⁰⁰				
3 plans - total		\$ 6800. ⁰⁰				
7. Reimbursement Request:						
Project to Date Reimbursement Request Amount cannot exceed the total award obligation as identified in the Award Document. The Total Reimbursement Request Amount cannot exceed to Total Matching Funds amount for the period being billed.						
	Current Period			Project to Date		
	Reimbursement Request Amount	Matching Funds	Total Costs	Reimbursement Request Amount	Matching Funds	Total Costs
Labor*	6800-		6800-			
Material**						
Total	6800		6800-			
Donated time and materials can only be counted towards the matching component.						
* Use actual costs or \$11.68/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 : \$ 0						
9. I request reimbursement in the amount of \$ 6800- 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 grant award documents.						
Signature: Buzz Smith				Date: August 8, 2005		
10. Certification (To be completed by CSFS District):						
Work meets minimum standards as set forth by CSFS.						
Signature: [Signature]				Date: 8/15/05		



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

491
Telephone: 970-428-0814
Email: fortcollins@fireready.com

Quotation for Work

Consultant: To-1

Date: _____

Client Information		How did Client hear of Fire Ready?
Name <u>PCFPD</u> <u>Mike Pickett</u>	Property Address <u>130 Crown Pt</u> <u>Bellevue, CO</u>	Telephone
Deposit Amount/Check Number	Mailing Address <u>PCFPD</u> <u>Bellevue</u> <u>565 Rustic Rd</u> <u>80512</u>	Scheduling Date(s) <u>7/30</u>
Work to be Performed <u>Take Down large brush tree along fence.</u> <u>Back up Firewood for Mike and chip slash</u> <u>back into back along fence</u>		

Rate

Fixed ☐

Climbing Fees ☐

Total Price:

\$3-400

\$400

Stipulations

- While mitigation work increases the chances of your home surviving a wildfire, it is no guarantee. This work is known to the Client as "preventative measures." Fire Ready assumes no responsibility for losses associated with wildfire.
- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature Buzz Stitt

Printed Name Buzz Stitt

Date 08/01/05

For Fire Ready office use only Detailed Directions	Service Dates _____ _____	Future Work <input type="checkbox"/> Spraying When _____ Quantity _____
	<u>Reasons</u> <input type="checkbox"/> Added Charges _____ <input type="checkbox"/> Discounts _____ <input type="checkbox"/> _____	<input type="checkbox"/> More Mitigation Needed <input type="checkbox"/> Crew Days _____ <input type="checkbox"/> Off-schedule <input type="checkbox"/> Maintenance
Meeting Time _____ Place _____	Total Price _____	
Special Equipment/Notes	Less Deposit _____	
	Total Invoice _____	

Plan - Remove one large pine tree
insect infested - block & cover wood.
Chip limbs & some brush.



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

Telephone: 970-418-0814
Email: fortcollins@fireready.com

Consultant: TONY Quotation for Work Date: 08/06/05

Client Information		How did Client hear of Fire Ready?
Name <u>Old Pueblo C11 Corp</u>	Property Address <u>Pueblo Chapel Community Bldg</u>	Telephone
Deposit Amount/Check Number	Mailing Address	Scheduling Date(s)
Work to be Performed <u>Thinning and mitigation between the river and Pueblo Chapel Community Bldg.</u>		

Rate ☒ Fixed ☐

Climbing Fees ☐

4.5 days @ 1150

Total Price:

5175

Stipulations

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- Should Fire Ready be unable to complete the job due to conditions beyond our control, to include acts of God, Client agrees to pay mobilization costs and all work performed to time of work stoppage.
- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is Insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature

Printed Name

Date

Buzz Smith

Buzz Smith

8/6/05

Plan Create a total forest management Plan on 3 to 4 acres.

Remove Junipers, under tree brush, thin trees +
Remove dead trees. Remove lower dead limbs on all trees
in project area.

Local Community Bldg + Pueblo Chapel grounds.



Fire Ready of Fort Collins
5201 Greenview Drive
Fort Collins, CO 80525

481
Telephone: 970-428-0814
Email: fortcollins@fireready.com

Consultant: Tony Quotation for Work Date: 8-6-05

Client Information		How did Client hear of Fire Ready?
Name <u>Dave Ammons</u>	Property Address <u>42127 PCHW-1</u>	Telephone
Deposit Amount/Check Number	Mailing Address	Scheduling Date(s) <u>8/5</u>
Work to be Performed <u>Thinning around Bunk house and shed. Remove Junipers along back of house. Work w/ Dave to remove selected Aspen on E side of property.</u> <u>Take Load of wood + Garbage to the dump</u>		

Rate ☒ Fixed ☐

Climbing Fees ☐

Total Price:

1 day \$1150 1 dump run \$75

\$1225

Stipulations

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- Payment is due upon completion of job. Late charges are 18% per annum.
- Client is responsible for marking property boundaries, septic systems, and any other special areas of concern.
- Client is responsible for any permits or authorizations for work if required (with Homeowner's Associations, etc).
- Fire Ready is insured. Please contact our office for certificates of insurance.
- This quote is good for ninety (90) days. Please let us know as soon as possible if you want this work done.
- Each Branch Office is independently owned and operated.
- Client holds harmless Fire Ready of Fort Collins and Fire Ready, Inc. from all bodily injuries and property loss.

Client Signature

Buzz Smith

Printed Name

Buzz Smith

Date

8/6/05

For Fire Ready office use only
Detailed Directions

Meeting Time _____ Place _____

Special Equipment/Notes

Service Dates

- Reasons
- ☐ Added Charges _____
- ☐ Discounts _____
- ☐ _____

Total Price _____

Less Deposit _____

Total Invoice _____

Future Work

☐ Spraying
When _____

Quantity _____

☐ More Mitigation Needed

☐ Crew Days _____

☐ Off-schedule

☐ Maintenance