

Jerry Burgeron:

- 77 Wandering Elk Way
- between mile marker
9 & 8

5CHIMNEYS

Gerald E. Bergeron

GSB@attglobal.net

77 Wandering Elk Way

Estes Park, Colorado 80517

970-586-5498

Cell: 303-619-5352

Fax: 970-577-1547

Colorado State Forest Service

Emergency Supplemental

2010 Grant Application

DISTRICT'S: Please Complete

District Submitting Project:	Boulder
Forester Submitting Project:	Bryan Baer
District Priority Number:	
Date Submitted:	10-5-2010
FOR REVIEWER'S USE ONLY:	
Rating:	

Applicant Information	
Applicant:	Gerald & Susanne Bergeron
Contact Person:	Jerry and Sue
Address:	77 Wandering Elk Way
City/Zip Code:	Estes Park, CO 80517
Phone (Work/Cell):	970-586-5498
Email:	gsb@attglobal.net
Fax:	970-577-1547

Community At Risk Information			
Name of Project:	Bergeron		
Community Name(s):			
County:	Larimer	Congressional District:	T4N,R73W,Sec27
Latitude (decimal degrees):	40.287 N	Longitude (decimal degrees):	105.548 W
Threat Description (check all that apply)			
Homes:	<input checked="" type="checkbox"/> X	Number of:	2.5
Businesses:	<input type="checkbox"/>	Number of:	
Watersheds:	<input type="checkbox"/>	Number of:	
Infrastructure:	<input type="checkbox"/>	Estimated value of:	
Economic Viability:	<input type="checkbox"/>	Estimated value of:	
Historic Structures:	<input type="checkbox"/>	Number of:	
Other (Describe):	One primary residence, one secondary and one coach/guest house		

Requested Grant Amount / Project Description	
All information for the project must fit into the space provided below. The review committee will not consider attachments.	
Dollar Amount Requested May Not Exceed \$470 x Number of Acres Proposed For Treatment	
Dollar Amount Requested	\$4,700.00
Will this Project be conducted as a Pass-Through Grant?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Provide a brief overview of the project and the project area. (If applying for a fuels reduction project, identify vegetation types)	
<p>The project area is predominantly composed of lodgepole pine, with a small component of fir and patches of aspen. The understory is composed primarily of random grasses, as well as a large amount of random juniper patches. Slopes range from moderate to ~20%. The project area is bordered by Wandering Elk Way on the south and Gillette Rd. on the west, giving for the best access.</p>	

Scope of Work / Project Timeline

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

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

- 4 Grant funding will be used to reduce the hazardous fuels that are currently present. In many areas there are a high number of trees per an acre, as well areas where encroaching trees have created for a dense canopy. In these areas fuels will be reduced in a way that breaks up the forested canopy, creating more spacing between the trees retained. Trees will also be limbed up to a minimum of six feet, to reduce the amount of ladder fuels present. Where smaller vegetation poses a threat to laddering, those fuels will be mitigated as well. Slash will most likely be hauled off site or chipped, but the option for piling slash to burn is always reserved.

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

Homeowner's will continually monitor property for undesirable encroaching vegetation and remove upon discovery. Continue to prune ladder-fuels as they become present. Continue to use preventative spraying tactics to high-value trees.

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

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

Provide a timeline for the project

Project work will begin as soon as chosen contractor is available, and will continue through completion, targeted for Fall 2011.

Interagency Collaboration

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

- 5 None

Community Wildfire Protection Plan (CWPP)

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

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

6	Project Category (check all that apply and answer related questions)			
	Hazard Fuels Reduction <input checked="" type="checkbox"/> Other Forest Management Treatment <input type="checkbox"/>			
	Number of acres to be treated:	10.0	Estimated cost per acre:	\$1,000.00
	Project Type (check all that apply)			
	Defensible Space	<input checked="" type="checkbox"/>	Thinning w/o Product	<input checked="" type="checkbox"/>
	Fuelbreak	<input type="checkbox"/>	Mastication	<input type="checkbox"/>
	Thinning w/ Product	<input type="checkbox"/>	Other	<input type="checkbox"/>

7	Total Project Expense (Pass Through)		
	<i>Please fill all fields</i>	Grant Share (\$ Amount Requested)	TOTAL
	Contractual Services:	\$4,700.00	\$ 4,700.00
	TOTAL:	\$4,700.00	\$ 4,700.00

Grant funding may only be used for Contractual Service.

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

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


Attach Project Map Showing Specific Treatment Areas


Bergeron Project Proposal Area




Bergeron Proposal Area: 10.0 Acres



 Bergeron_Proposal_Area

 Bergeron_Residence

 MajorRoads

Created By: Bryan Baer
CSFS- Boulder Dist.
October, 2010

0 250 500 1,000 1,500 Feet



COPY



Colorado State Forest Service Program Payment Request

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

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

11-30-11
KC

Name: GERALD BERGERON

Address: 77 WANDERING ELK WAY

ESTES PARK, CO 80517

Approved for Payment
C.S.F.S.

1609793

11-30-11
KC

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

Grant Number: 5308400-BO-09 ~

Approved Funding: \$ 4,700.00 -

Total Project: \$ 15,080.00

CSFS Account Number: 5308400-6693 ~

Amount of Payment: \$ 2,350.00 ~

'09SUP HAZ FUELS Fr BO

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

Approved by [Signature]
(Program manager signature)

Date: 11/29/11

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

Project No. 5308400-80-09 ~
(For Official Use Only-
No. from original application)

Applicant name (please print): GERALD BERGERON ~

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	\$ 10,080.00	/	A Labor Cost= \$ 10,080.00
Operating Exp ³ , (Actual)			B Oper. Exp.= N/A
Project Cost			C Total Project (A+B) = \$ 10,080.00
			Amount Originally Approved = \$ 4,700.00
			Amount to be Reimbursed not to exceed \$470 Per Acre \$ 2,350.00 ~

¹ Any contracted services where payment was made for services.

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

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

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

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

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

Landowner Signature: _____

Date: 11/11/11

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

Mailing Address: 77 WANDERING ELK WAY

City: ESTES PARK

County: LARIMER State: CO Zip: 80517

Phone: 970-586-5498

Practice certified by: Bryan Butler (B B)

CSFS forester

Payment Approval: [Signature]

CSFS program manager

Amount: \$2,350.00

Date: 11/29/11

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

01/19/10

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

Project No. 5308400-Bo-c9

To be completed by CSFS forester:

PROGRAM:

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

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

5.0 ACRES
HAZ. FUELS RED.

WUI D-space Accomplishment:

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

Acres thinned – _____ Acres pruned = _____

I & D Prevention and Suppression Accomplishment:

No. of infested trees treated: _____

Acres inspected and treated: _____

Acres thinned: _____

Accomplishment (Not included above) – LOA Practice Number:

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



Colorado State Forest Service Program Payment Request

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

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

Name: GERALD BERGERON

Address: 77 WANDERING ELK WAY

ESTES PARK, CO 80517

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

Grant Number: 5308400-BO-C9

Approved Funding: \$ 4,700.00

Total Project: \$ 15,080.00

CSFS Account Number: 5308400-6693

Amount of Payment: \$ 2,350.00

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

Approved by _____
(Program manager signature)

Date: _____

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

Project No. 5308400-B0-C9
(For Official Use Only-
No. from original application)

Applicant name (please print): GERALD BERGERON

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	\$ 10,080.00	/	A Labor Cost= \$ 10,080.00
Operating Exp ^{3,*} (Actual)			B Oper. Exp.= N/A
Project Cost			C Total Project (A+B) = \$ 10,080.00
			Amount Originally Approved = \$ 4,700.00
			Amount to be Reimbursed not to exceed \$470 Per Acre \$ 2,350.00

¹ Any contracted services where payment was made for services.

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

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

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

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

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

Landowner Signature: [Signature]

Date: 11/11/11

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

Mailing Address: 77 WANDERING ELK WAY City: ESTES PARK

County: LARIMER State: CO Zip: 80517 Phone: 970-586-5498

Practice certified by: BRYAN BAER (B B)
CSFS forester

Payment Approval: _____ Amount: _____ Date: _____
CSFS program manager

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

01/19/10

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

Project No. 5308400-80-c9

To be completed by CSFS forester:

PROGRAM:

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

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

5.0 ACRES
HAZ. FUELS RED.

WUI D-space Accomplishment:

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

Acres thinned = _____ Acres pruned = _____

I & D Prevention and Suppression Accomplishment:

No. of infested trees treated: _____

Acres inspected and treated: _____

Acres thinned: _____

Accomplishment (Not included above) – LOA Practice Number:

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

Healthy Forest Mitigation Services

311 Warwick Street

Frederick, Colorado 80530

303-833-0329 or 303-775-6585

wildfire2283@msn.com



Invoice

Invoice: 1033-2

Date: October 18, 2011

Property Owner: Jerry Bergeron

Property Address: 77 Wandering Elk Way
Allenspark, Colorado 80510

Cost Summary

- Felling / Bucking of trees of final 5 acres of the 10 acres set up for the grant project 5 acres @ \$1000/acre (\$5,000)
- Chipping of all slash over 10 acres @ \$500/acre (\$5,000)
- Limbing of all remaining trees (N/C)
- Removal of needles around structures 4 hours @\$20/hr (\$80)
- Meeting requirements set forth in the ESF grant

TOTAL:

\$10,080.00

Comments: This invoice is the final invoice for this project.

Thank you

Nicole Palestro



COPY

Colorado State Forest Service Program Payment Request

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

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

08-16-11
KC

Name: GERALD BERGERON

Address: 77 WANDERING ELK WAY

ESTES PARK, CO 80517

Approved for Payment
C.S.F.S.

1458478

08-16-11

KC

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

Grant Number: 5308400-BO-09~

Approved Funding: \$4,700.00

Total Project: \$5,000.00

CSFS Account Number: 5308400-6693

'09SUP HAZ FUELS Fr BO

Amount of Payment: \$2,350.00~

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

Approved by [Signature]
(Program manager signature)

Date: 8/15/11

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

Project No. 5308400-BO-09
(For Official Use Only-
No. from original application)

Applicant name (please print): Gerald Bergeron

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	\$5000.00		A Labor Cost= \$5,000.00
Operating Exp ^{3,*} (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = \$5,000.00
			Amount Originally Approved = \$4,700.00 -
			Amount to be Reimbursed not to exceed \$470 Per Acre \$2,350.00

¹ Any contracted services where payment was made for services.

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

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

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

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

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

Landowner Signature: [Signature]

Date: 8/10/2011

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

Mailing Address: 77 Wandering Elk Way

City: Estes Park

County: LARIMER State: CO Zip: 80517

Phone: 970-586-5498

Practice certified by: Bryan Bzer (BB)
CSF forester

Payment Approval: [Signature]
CSES program manager

Amount: \$2,350.00 Date: 8/15/11

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

01/19/10

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

Project No. 5308400-80-09

To be completed by CSFS forester:

PROGRAM:

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

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

5.0 Acres
Haz. Fuels Red.

WUI D-space Accomplishment:

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

I & D Prevention and Suppression Accomplishment:

No. of infested trees treated: _____
Acres inspected and treated: _____
Acres thinned: _____

Accomplishment (Not included above) – LOA Practice Number:

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



Colorado State Forest Service Program Payment Request

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

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

Name: GERALD BERGERON

Address: 77 WANDERING ELK WAY

ESTES PARK, CO 80517

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

Grant Number: 5308400-80-09

Approved Funding: \$ 4,700.00

Total Project: \$ 5,000.00

CSFS Account Number: 5308400-6693

Amount of Payment: \$ 2,350.00

Circle one:

1st Payment

2nd Payment

3rd Payment

Final Payment

Approved by _____

(Program manager signature)

Date: _____

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

Project No. 5308400-30-09
(For Official Use Only-
No. from original application)

Applicant name (please print): Gerald Bergeron

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	\$5,000.00		A Labor Cost= \$5,000.00
Operating Exp ^{3,*} (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = \$5,000.00
			Amount Originally Approved = \$4,700.00
			Amount to be Reimbursed not to exceed \$470 Per Acre \$2,350.00

¹ Any contracted services where payment was made for services.

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

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

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

Landowner Signature: [Signature]

Date: 8/10/2011

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

Mailing Address: 77 Wandering Elk Way

City: Estes Park

County: Larimer State: CO Zip: 80517

Phone: 970-586-5498

Practice certified by: Bryan Boer (BB)
CSFS forester

Payment Approval: _____ Amount: _____ Date: _____
CSFS program manager

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

01/19/10

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

Project No. 5308400-80-09

To be completed by CSFS forester:

PROGRAM:

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

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

5.0 Acres
Haz. Fuels Red.

WUI D-space Accomplishment:

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

Acres thinned = _____ Acres pruned = _____

I & D Prevention and Suppression Accomplishment:

No. of infested trees treated: _____

Acres inspected and treated: _____

Acres thinned: _____

Accomplishment (Not included above) – LOA Practice Number:

#1 Plan Acres = _____

#5 Acres = _____

#9 Acres treated = _____

#2 Acres tree planting = _____

#6 Acres treated = _____

#10 Acres of restoration = _____

Acres treated = _____

#7 Acres treated = _____

#11 Acres = _____

#3 Acres treated = _____

#8 Acres treated = _____

#4 Acres planted/ renovated = _____

From: RICHARD NICOLE PALESTRO <wildfire2283@msn.com>

Subject: Healthy Forest Mitigation

Date: July 31, 2011 8:15:07 PM MDT

To: Gerald Bergeron <gsb@attglobal.net>

1 Attachment, 51.9 KB

Hello, Here is an invoice for part of the work completed on your property. Bryan Baer should be back in the office on monday August 1 so you can get the reimbursement for this portion started.

Thank You,

Nicole

Healthy Forest Mitigation Services
311 Warwick Street
Frederick, Colorado 80530
303-833-0329 or 303-775-6555
wildfire2283@msn.com



Invoice

Invoice: 1033-1

Date: July 30, 2011

Property Owner: Jerry Bergeron

Property Address: 77 Wandering Elk Way
Allenspark, Colorado 80510

Cost Summary

- Felling / Bucking of trees of 5 acres of the 10 acres set up for the grant project
- Chipping of slash
- Limbing of all remaining trees
- Meeting requirements set forth in the ESF grant

TOTAL: \$5,000.00

Comments: This invoice is to cover a portion of the work that has been completed on the project. A final invoice will be submitted after the project has been completed and inspected by the landowner as well as a representative from the CSFS.

Thank you

Nicole Palestro

SUSANNE S BERGERON REVOCABLE TRUST
77 WANDERING ELK WAY
ESTES PARK, CO 80517

63-965 922
660

671

DATE Aug 2, 2011

PAY TO THE
ORDER OF

Healthy Forest Mitigation

\$5000.00

Five thousand and 00/100

DOLLARS



NORTHERN TRUST, NA

NORTHERN TRUST ANCHOR ACCOUNT



Northern Trust

MEMO

Completed Work

Bryan Baer

MP

⑆066009650⑆ 1710184300⑆ 00671