

2009 Colorado
Wildland Urban Interface
Grant Application

District Submitting Project:	Boulder
District Priority Number:	643
Dollar Amount Requested:	\$50,000
Matching Share:	\$50,000

Applicant Information	
Applicant:	Lefthand Fire Protection District
Contact Person:	Seth Patterson
Address:	900 Lefthand Canyon Dr
City/Zip Code:	Boulder 80304
Phone (Work/Cell):	720-214-0560/303-717-2396
Email:	spatterson@lefthandfire.org
Fax:	720-214-0560

Community At Risk Information			
Name of Project:	LHFPD Community Wildfire Hazard Reduction Project		
Community Name:	Bar-K Ranch/Sky Ranch Estates		
County:	Boulder	Congressional District:	1
Latitude (decimal degrees):	40° 07' 20"	Longitude (decimal degrees):	105° 27' 11"

Grant Contributors (Matching Share)							
(Applications will be disqualified if insufficient match is identified; federal dollars DO NOT qualify- see criteria & instructions for exception) Please specify each match contributor and the dollar amount of each contribution. DO NOT show grant requested funds in this table. This is for matching share only.							
Contributors: (Please specify)	Bar-K Subd &	Bar-K Assoc	Skyranch Subd	Matoons Subd	Overland Homeowners	Lefthand FPD	TOTAL
Dollars (Hard Match):	\$5,000	\$0	\$10,000	\$7,500	\$5,000	\$10,000	\$37500 ✓
In-Kind (Soft Match):	\$0	\$5,000	\$0	\$2,500	\$0	\$5,000	\$12500 ✓
TOTAL:	\$5000	\$5000	\$10000	\$10000	\$5000	\$15000	\$50000 ✓

Total Project Expense (break down matching share totals from Block #3)				
Budget Detail (Provide additional information in Block #7)	Grant Share (\$ Amount Requested)	Match (from Block #3)		TOTAL
		Dollars	In-Kind	
Personnel / Labor:	\$34,500	\$28,800	\$5,700	\$69000 ✓
Fringe Benefits:	\$0	\$0	\$0	\$0 ✓
Travel:	\$0	\$0	\$0	\$0 ✓
Equipment:	\$5,500	\$5,000	\$500	\$11000 ✓
Supplies:	\$2,500	\$2,000	\$500	\$5000 ✓
Contractual:	\$7,500	\$7,500	\$0	\$15000 ✓
Construction:	\$0	\$0	\$0	\$0 ✓
Other:	\$0	\$0	\$0	\$0 ✓
	\$0	\$0	\$0	\$0 ✓
TOTAL:	\$50000	\$43300	\$6700	\$100000 ✓

Project Summary (check all that apply and answer related questions)			
5	What is the projected duration of this project? (check one) <input type="checkbox"/> One Year <input checked="" type="checkbox"/> Two Years		
	Is this a new project? (check one) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Project Category: Hazard Fuels Reduction <input checked="" type="checkbox"/>		
	Number of acres to be treated:	80	Estimated cost per acre: \$1,200.00
	Number of communities directly affected by this project: 2		
	Project Category: Information & Education <input checked="" type="checkbox"/>		
	Number of citizens to be reached:	300	
	Project Category: Planning <input checked="" type="checkbox"/>		
Number of residences affected:		160	

Project Area Description	
All information for the project must fit into the allotted character space provided below. Attachments will not be considered by the review committee.	
6	<p>Provide a brief overview of the project and the project area. (If applying for a fuels reduction project, identify vegetation types.) 1500 characters</p> <p>The Lefthand Fire Protection District is seeking funding assistance to facilitate and complete several critical hazardous fuel reduction projects that were identified in a comprehensive Community Wildfire Protection Plan completed for the district in 2006. The district covers over 33,000 acres of timber, agriculture land, open range and includes 8 dispersed wildland urban interface subdivisions, as well as the municipality of Jamestown. Elevation ranges from 5,400 ft to over 8,000 ft. Watersheds within the district feed three municipal water supplies. Vegetation ranges from high prairie grass and sage on the eastern plains, ponderosa pine dominating mid-elevation and higher elevation south-facing slopes, and lodgepole pine stands the higher elevations low and north-facing slopes. Of Boulder County's 4 largest recorded wildfires, 3 were located within the Lefthand Fire Protection District.</p> <p>Of the 8 identified WUI's in the district, the Bar-K Ranch complex, including the Bar-K ranch, Sky Ranch, and Mattoon subdivisions, received an EXTREME wildfire hazard and risk rating resulting from the comprehensive NFPA Form 1144 district-wide survey. Through the Lefthand FPD CWPP assessment, fuel reduction treatments were identified and prioritized for the Bar-K area. Community outreach and grant funded hazardous fuels mitigation commenced in the area during the 2008 field season. The purpose of this grant application is to continue mitigation in the Bar-K Ranch and commence fuels reduction in Sky Ranch Estates, as outlined in the CWPP.</p>

Scope of Work / Project Timeline	
All information for the project must fit into the allotted character space provided below. Attachments will not be considered by the review committee.	
7	<p>Provide a brief scope of work which clearly describes how grant funds will be spent. (This should be more specific than the project description. Include any additional information regarding special budget detail in this section.) 1500 characters</p> <p>The proposed project focuses on community outreach and wildfire hazard mitigation in the Bar-K Ranch complex wildland urban interface, including Bar-K Ranch, Mattoon, and Sky Ranch Estates. This interface zone was identified in the LHFPD CWPP, surveyed according NFPA 1144 wildfire hazard assessment protocol, resulting in an EXTREME rating. Recommended treatment units were highlighted in the report. Thinning operations commenced in 2008 and were funded through the 2007 SFA grant award to the Fire district. Fuel reduction focused on the construction of a shaded fuel break and adjacent defensible space improvements for parcels on the west and northwest margins of the subdivision, adjacent to National Forest lands.</p> <p>2009 grant funding would be utilized to fund a mitigation crew directed to complete hazardous fuels treatment in the Bar-K Ranch area, tying-in with proposed treatment units on adjacent USFS land. Remaining funds would be utilized to commence thinning on designated units in the neighboring Mattoon and Sky Ranch subdivisions.</p>

Due the inaccessibility of much of this area to large equipment, the area will be thinned using a fire department mitigation crew. Low impact techniques will be utilized to minimize vehicle travel in the area. The prescription will be according to the CSFS Shaded Fuel Break standards. Tree marking will be completed by CSFS foresters. Burn piles will be created in areas where fire scarring on residual trees will not occur. Piles will be burned on-site during appropriate weather conditions. Round wood greater than 6" will be removed.

Grant funds are requested to assist expenses related to:

- Increase community and homeowner awareness of Firewise defensible space principals, basic fire behavior, scope of effectiveness of structure defense during a wildfire.
- Contract a certified forester to mark trees for removal.
- Utilization of contract sawyers where appropriate and timely use of fire department resources is not feasible.
- Procurement/rental and upkeep of necessary equipment, including PPE, sawyer supplies, chipping in-place, and biomass disposal.
- Compensate a mitigation crew including project manager and sawyers.

Provide a timeline for the project. 500 characters

As a two year project approximately half the funds will be expended during the summer mitigation seasons of 2010 and 2011. The steps taken to reach a state of project completion are as follows:

1. Late winter - Collaborative community outreach/milestone assessment/ grant matching program promotion. Meetings will be planned to allow citizen input and project participation. At least two meeting will occur each year for the combined designated areas of the project.
2. January to May - Mitigation crew organization. Advertising and initial interviews will occur just after the first of each year into February. Crew selection notification and hiring will occur in late March.
3. On-going. Equipment assessment and procurement.
4. Tree marking, cutting, chipping, pile construction, wood distribution occurs during the mitigations season weather permitting – May to August.
5. Pile burning occurs as weather and restrictions permit. Most burning will occur while taking advantage of snow or rain events during the winter and spring months. All of the proposed project area is over 7000 feet burning restrictions will not apply. However, Lefthand FPD will be working with CDPHE and other resources to protect the Denver Metro Airshed.
6. Assessment will be on-going with a five year horizon being established for retreatment as required. Assessment will also include allowing previously untreated parcels to be included and treated as they contribute to the overall goal of contiguous and maintained fuel breaks.

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.).

500 characters

- LHFPD: contributes matching funds, in-kind mitigation, community outreach, and fire management services
- BCES: CWPP certification
- CSFS: Agency to provide certified forester and forest management recommendations and tree marking services. CWPP certification.
- USFS: Developed pending Bar-K Fuel Reduction Project on adjacent agency lands to tie-in with and compliment district mitigation efforts on adjacent private lands. CWPP certification.
- HOA – Provides access to association meetings for community awareness, dues contributions to treatment projects, individual home owner in-kind fuel treatment, and access to private lands.

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 ☐ in development

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

Submit a copy of the CWPP with this application. Copy attached? ☐ yes ☒ no

Project Longevity / Maintenance

Clearly demonstrate how this project will remain effective over time. 500 characters

- 9 Maintenance of new and existing fuel breaks is part of the long-term goals of Left Hand Fire Protection District's Fuels Reduction and Fire Mitigation program. Additional grant funding may be sought in the future to re-treat this area. The department will re-evaluate the regeneration of hazardous fuels after five years. If hazardous fuels have compromised the effectiveness of the fuel break, a second entry will occur.

EXHIBIT A
Financial Assistance Program
Cooperative Match Project
SCOPE OF WORK

Project Number: 530853-002

Cooperator: Lefthand Fire Protection District

Work to be completed:

The proposed project focuses on community outreach and wildfire hazard mitigation in the Bar-K Ranch complex wildland urban interface, including Bar-K Ranch, Mattoon, and Sky Ranch Estates. This interface zone was identified in the LHFPD CWPP, surveyed according NFPA 1144 wildfire hazard assessment protocol, resulting in an EXTREME rating. Recommended treatment units were highlighted in the report. Thinning operations commenced in 2008 and were funded through the 2007 SFA grant award to the Fire district. Fuel reduction focused on the construction of a shaded fuel break and adjacent defensible space improvements for parcels on the west and northwest margins of the subdivision, adjacent to National Forest lands.

2009 grant funding will be utilized to fund a mitigation crew directed to complete hazardous fuels treatment in the Bar-K Ranch area, tying-in with proposed treatment units on adjacent USFS land. Remaining funds would be utilized to commence thinning on designated units in the neighboring Mattoon and Sky Ranch subdivisions.

1. Type of Treatment – Fuels mitigation/reduction/Planning/Information and Education

Milestone dates: Submit signed Cooperator Match and initialed Scope of Work by **August 1, 2009**

E-mail statement of progress by **April 1, 2010** to jane.lopez@colostate.edu

Extension request by **August 1, 2010** OR complete project by **September 1, 2010**

Standards or Guidelines: Will meet CSFS guidelines appropriate for treatment.

Project Period: July 1, 2009 to September 1, 2010

Funded Amount: \$50,000

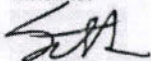
Minimum cooperator match: \$50,000

Deliverables: 80 acres treated

Project Types: Hazardous Fuels Mitigation/Planning/Information and Education

All work completed under this project must be certified as meeting minimum Colorado State Forest Service standards prior to any reimbursement being made to the cooperator. Attachment B to the project entitled "Attachment B, Grant Report/ Reimbursement Request, WSFM Competitive Grants" will be the document used to both request reimbursement and to certify that work has been completed to minimum standards.

Initials:

 7-16-2009

Financial Assistance Program

Cooperative Match Project

To be conducted by: Lefthand Fire Protection District

Project Number: 530853-002

Estimated Project Cost: \$100,000

Funding provided by CSFS: \$50,000

Minimum Recipient Match: \$50,000

Project to be completed by: September 1, 2010

Based on the strength of the application submitted by Lefthand Fire Protection District the Colorado State Forest Service is providing funding in the amount up to but not exceeding \$50,000 to accomplish the project described in the attached scope of work.

As the project lead, Seth Patterson, Lefthand Fire Protection District will be responsible managing the appropriated grant fund dollars within the CSFS/CSU grant guidelines. Costs incurred in implementing the project up to the amount listed above must meet the following requirements:

- A. Complete work as described in "Exhibit A" (scope of work).
- B. Provide documentation that project funds have been matched at a minimum ratio of 1:1.

Complete and submit periodic Grant Report(s) using the form provided in "Exhibit B", as needed, and a Final Report that provides details on expenditures and accomplishments as a result of this project. Submission to:

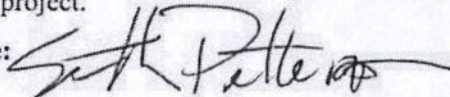
CSFS Fuels Mitigation and Prescribed Fire Manager
5060 Campus Delivery
Colorado State University
Fort Collins, CO 80523

- C. Certify that neither the cooperator nor any principals represented herein are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
- D. Manage the grant funds with consideration of CSU fiscal requirements allowing for indirect charges against appropriate portions of the grant amount awarded, as applicable.

This funding will remain available until September 1, 2010. Extension is available for this project if requested prior to August 1, 2010.

As a representative of the cooperator, I have read and understand the conditions of participating in this cooperative match project.

Cooperator Signature:



Date:

7-16-2009

Mailing Address:

Seth Patterson, Lefthand Fire Protection District
P.O. Box 156
Jamestown, CO 80455
Telephone Number: 720.214.0560/303.717.2396
Email Address: spatterson@lefthandfire.org
Fax: 720.214.0560

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Financial Assistance Program
Cooperative Match Project
SCOPE OF WORK

Project Number: 530853-002

Cooperator: Lefthand Fire Protection District

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Initials:

Rev. March 2007

**Financial Assistance Program
Cooperative Match Project**

To be conducted by: **Lefthand Fire Protection District**

Project Number:	530853-002
Estimated Project Cost:	\$100,000
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Minimum Recipient Match:	\$50,000
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CSFS Fuels Mitigation and Prescribed Fire Manager
5060 Campus Delivery
Colorado State University
Fort Collins, CO 80523

- C. Certify that neither the cooperator nor any principals represented herein are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
- D. Manage the grant funds with consideration of CSU fiscal requirements allowing for indirect charges against appropriate portions of the grant amount awarded, as applicable.

This funding will remain available until September 1, 2010. Extension is available for this project if requested prior to August 1, 2010.

As a representative of the cooperator, I have read and understand the conditions of participating in this cooperative match project.

Cooperator Signature:

Date:

Mailing Address:

Seth Patterson, **Lefthand Fire Protection District**
900 Lefthand Canyon Drive
Boulder, CO 80304
Telephone Number: 720.214.0560/303.717.2396
Email Address: spatterson@lefthandfire.org
Fax: 720.214.0560

CSFS REQUEST FOR SUPPLIES OR SERVICES (other than GSA)

CSFS # 805 Rev. 02/04/05

Date: 8-31-09	Requested By: M. Moorman	Resale to:	CSFS Invoice #:				
Vendor: <u>Left Hand FPD</u> <u>Attn: Seth Patterson</u> <u>900 Left Hand Cyn. N.</u> <u>Boulder, CO 80302</u> (PLEASE PROVIDE COMPLETE ADDRESS)		Ship To: <u>Colo. State Forest Service</u> <u>Boulder Dist.</u> <u>5625 Wte Hwy.</u> <u>Longmont, CO 80503</u> (PLEASE PROVIDE COMPLETE DELIVERY ADDRESS)					
Reason for Vendor Selection: <input type="checkbox"/> Sole Source (attach completed Sole Source Justification Form) <input type="checkbox"/> Previous Supplier <input type="checkbox"/> Other			Terms:				
Shipping Instructions: <input type="checkbox"/> FOB Fort Collins, Colorado <input type="checkbox"/> FOB		Delivery Date:	Deliver to: Initials _____ Bldg _____ Room _____ Phone _____				
#	Account	Subcode	Qty	UOM	Description of Supplies or Services	Unit Price	Item Total
1	5308530	6693	1	EA	Financial Assistance	50,000	50,000
2					Program		
3					Cooperative Match Project		
4							
5					Project completion Date		
6					09-01-2010		
7							
8							
9							
10							
SPECIAL INSTRUCTIONS:			Expenditure Approval: Authorized Signature: <u>[Signature]</u> Date: <u>8/31/09</u>			Subtotal: \$ <u>50,000</u> Discount: \$ _____ TOTAL: \$ <u>50,000</u>	



Lefthand Fire Protection District
900 Lefthand Canyon Drive
Boulder, CO 80302

Allen Owen

Colorado State Forest Service

District Forester

5625 Ute Highway

Longmont, CO 80503

April 5, 2011

Dear Allen,

Please accept this request to extend the Colorado State grant # 5308053 through September 30, 2011.

The Lefthand Fire mitigation crew and members of various other fire departments have completed approximately 50% of the grant work to date.

Our mitigation efforts were interrupted to assist the Four Mile Fire crew prior to, during, and after the Four Mile Canyon fire last season.

Thank you for considering the extension,



Tom Stoffel

Fire Chief

Calwood



Pine Top Project - 15.46acres

-  Calwood_PineTop:_10.22ac
-  Calwood_Lodge:_5.24ac

0 125 250 500 750 1,000 Feet

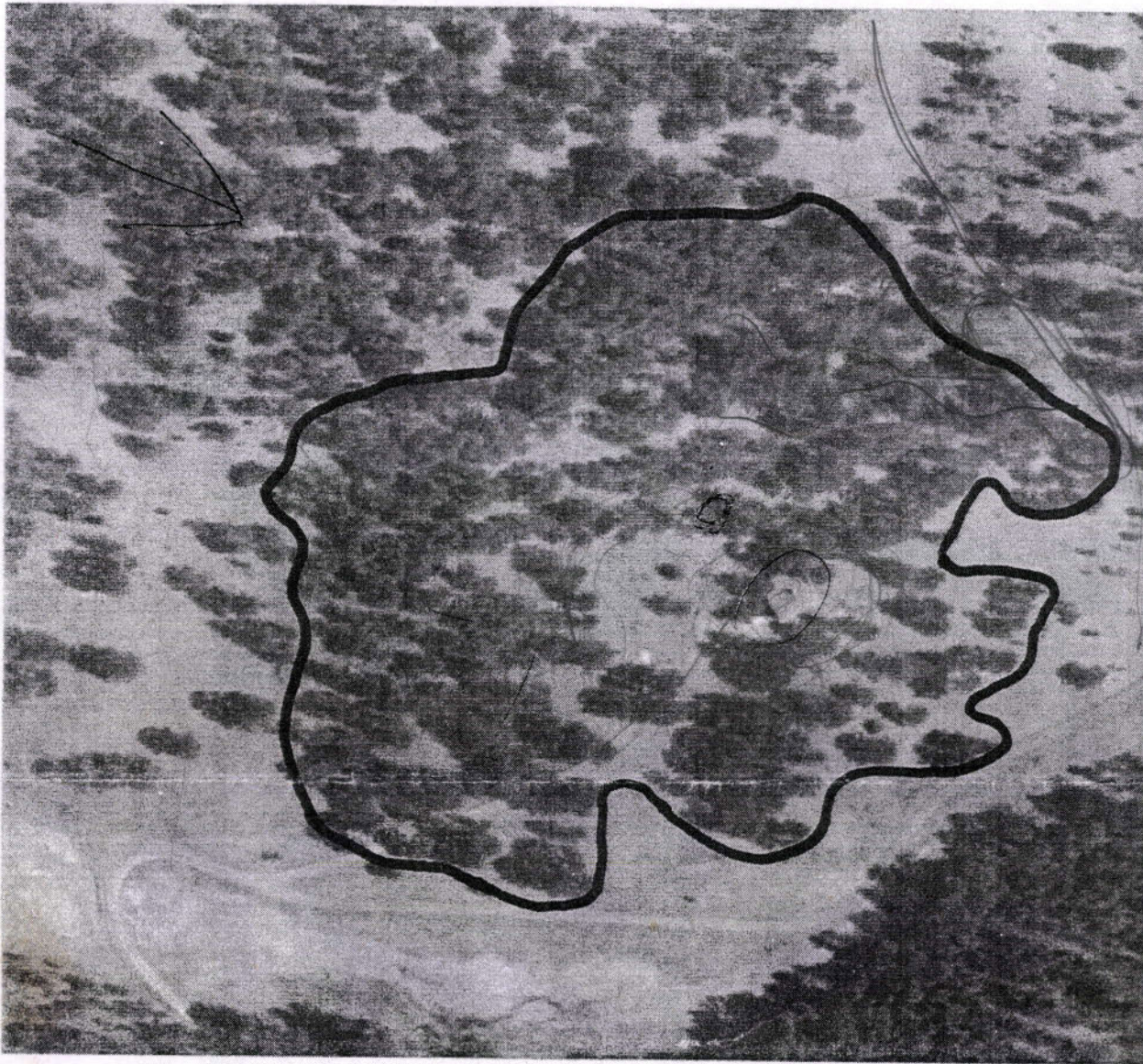
Created By: Bryan Baer
Colorado State Forest Service
Boulder District
March 12, 2010



#2382 Soder

*9777-LOK

Google maps Address



Pine Top Project

12/1/09
4.5 hrs
4 qts paint
conference w/staff 12/4

RATHEL 449-0603
Angie info@calwood.org
Tom Stosel

3-12-2010: (GPS)

2.0 Hours



Google maps Address



Cabin/Lodge Thinning Project

THIS RANDED

SFA '09		5308530 - 002				
50/50 grant		\$50,000 (\$625/ac)	80 acres			
	DATE	Payments	Bar-K Ranch	Mattoon	Sky Ranch	Cal-Wood
1	5/31/2011	\$ 10,000.00				23
2	4/26/2012	\$ 23,797.56	38.4			
3	10/24/2012	\$ 8,400.00				7
4	11/9/2012	7,698.50	8.2	9		
5						
6						
7						
8						
9						
10						
11						
TOTAL		\$49,896.06	46.6	9		30
						Total 85.6

Remaining: \$103.94

FRFT '09		5308910				
50/50 grant		\$80,500 (\$500/ac)	161 acres			
	DATE		Souders	LOTP	Other (N Foothills Ranch)	
1	4/19/2012	\$54,430.00	59	29.6	20.3	
2	9/24/2012	\$14,892.75		12	20	
3	11/9/2012	3,413.50	4.5		1	
4						
5						
6						
7						
8						
9						
10						
11						
					TOTAL	
		\$72,736.25	63.5	41.6	41.3	146.4

Remaining:

\$7,763.75

14.6 acres remaining

COPY



Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input checked="" 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 type="checkbox"/>

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

06-21-11
kc

Name: Left Hand Fire Protection District

Address: Attn: Tom Stoffel

900 Left Hand Canyon Drive

Boulder, CO 80302

Approved for Payment
C.S.F.S.
1374684
06-21-11
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: 530853-002-130 Cooperator Match: \$10,000 ~ This Period

Approved Funding: 50,000 Total Project: \$20,000 ~ This Period

CSFS Account Number: 5308530002-6693 Amount of Payment: \$10,000 ~

09CPG SFA CGI FRFT

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

Approved by: [Signature]
(Program manager signature)

Date: 6-20-2011

EXHIBIT B
GRANT REPORT/REIMBURSEMENT REQUEST
COMPETITIVE GRANTS

Project Number: G5-08053

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. Project #: G5-08053	2. Project Funding Amount: \$50,000.00	3. Community Protected: Jamestown/Bar K Ranch
4. Make Payment To: Name: Lefthand Fire Protection District Address: 900 Lefthand Canyon Drive Boulder, CO 80302		5. Period of Performance: From: 1-Jan-10 To: 16-Jul-10

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.)

23 acres treated, 1,014 trees removed as marked by CSFS and Cal-Wood Forester Busby.

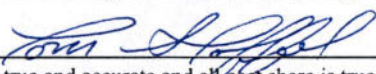
7. Reimbursement Request:
Project to Date Reimbursement Request Amount cannot exceed the total Project obligation as identified in the Project Document. The Total Reimbursement Request Amount cannot exceed the Total Matching Funds amount for the period being billed.

	Current Period			Project to Date		
	Reimbursement Amount Requested For Out of Pocket Expenses	Matching Funds		Reimbursement Amount Requested For Out of Pocket Expenses	Matching Funds	
		Cash (hard match)	Donated (Inkind match)		Cash (hard match)	Donated (Inkind match)
Labor*	\$6,779.00	\$6,779.00		\$6,779.00	\$6,779.00	
Material**	\$3,221.00	\$3,221.00		\$3,221.00	\$3,221.00	
Total	\$10,000.00	\$10,000.00		\$10,000.00	\$10,000.00	


Donated time and materials can only be counted towards the matching component.
 * Use actual costs or \$20.25/hour for donated or volunteers' time.
 ** Use actual costs or fair market value of donated materials, supplies, or equipment use.

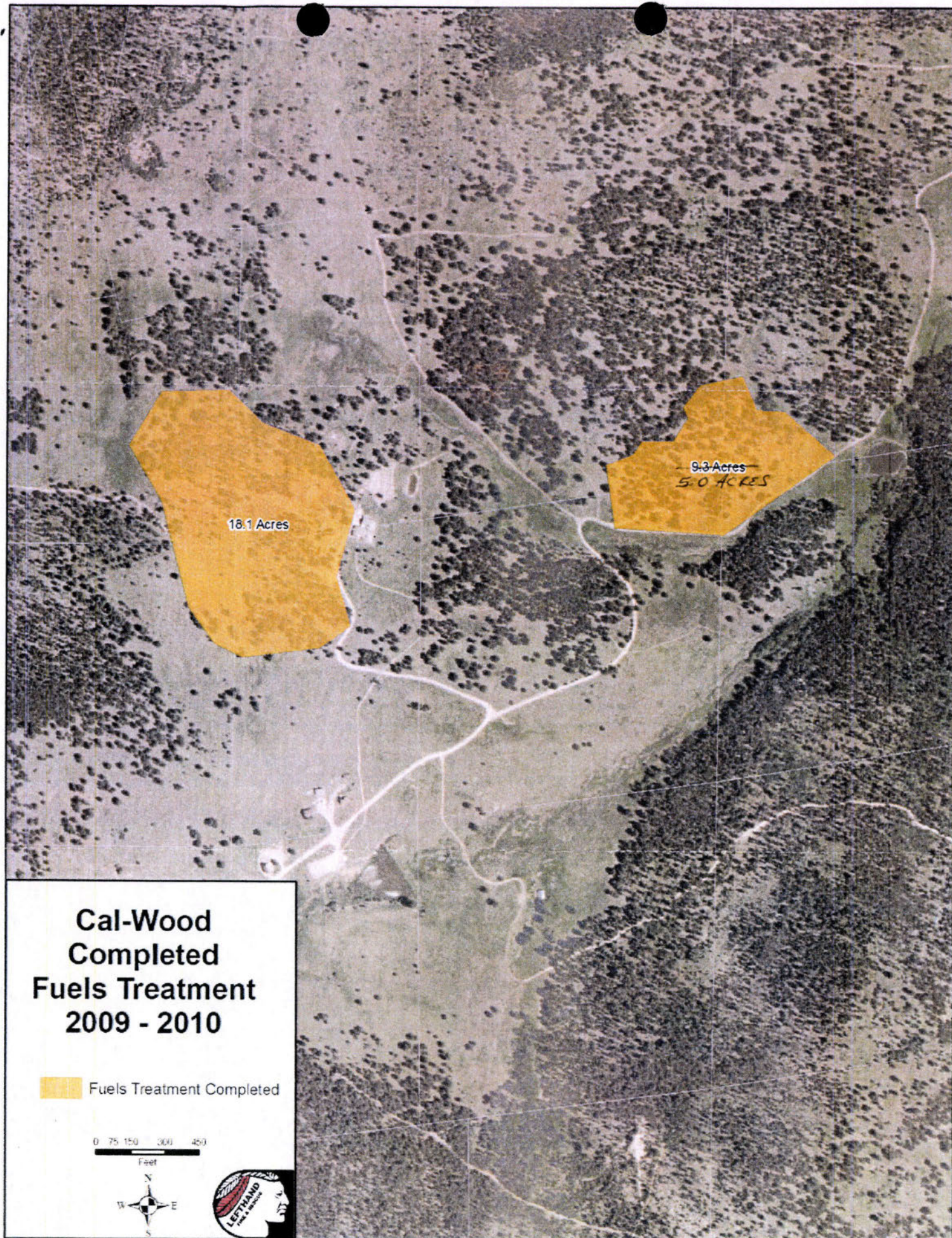
8. Amount Paid to CSFS for Products and/Or Services : \$219.00 invoice # 77976

9. I request reimbursement in the amount of \$10,219.00 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 project documents.


Signature:  Date: 5/25/11

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

10. Certification (To be completed by CSFS District):
 Work meets minimum standards as set forth by CSFS.
 Signature:  Date: 5/31/11



**Cal-Wood
Completed
Fuels Treatment
2009 - 2010**

 Fuels Treatment Completed

0 75 150 300 450

Feet





Lefthand Fire Protection District
900 Lefthand Canyon Drive
Boulder, CO 80302

May 25, 2011

Colorado State Forest Service
Allen Owen
District Forester
5625 Ute Highway
Longmont, CO 80503

Re: Grant # G5-08053, reimbursement request

Dear Allen,

Please review and approve the enclosed reimbursement request for mitigation treatments performed by members of Lefthand Fire, Boulder Rural Fire, Lyons Fire and Four Mile Fire Departments at the Cal-Wood Educational Facility.

Please note that only (5) of the (9.3) acres marked were treated at the property manager's request.

Lastly, the CSFS costs on line #8 and the donated costs of Cal-Wood's forester Busby for marking trees were not included in section #7.

Thank you,

Tom Stoffel
Fire Chief
Lefthand Fire Protection District



COPY

Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	
Insect and Disease Prevention and Suppression Program	
State Fire Assistance (a.k.a.: SFA)	X
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)	

☒ Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/>
12-13-12
KaName: Left Hand FPDAddress: 900 Left Hand Canyon Dr.Boulder, CO 80302Attn: Chief Russell Leadingham

Approved for Payment

CSFS.

2187895

12-13-12

Ka

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

Grant Number: 5308530-002-BO ~ Cooperator Match: \$15,397.00 ~~\$11,418.50~~Approved Funding: \$ 50,000 ~

5308500 -

Total Project: \$19,117.00 ~CSFS Account Number: 5308530-6693Amount of Payment: \$7698.50 ~

'09CAG SFA CGG WUI /CWPP FRFT

Circle one: 1st Payment 2nd Payment 3rd Payment Final Payment ~Approved by [Signature]
(Program manager signature)Date: 11/16/12

EXHIBIT B
CSFS GRANT REPORT/REIMBURSEMENT REQUEST

In order to receive reimbursement, you must provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by receipts for actual costs (out of pocket expenses) incurred by the recipient. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and have corresponding match.

1. Project/Account #: 5308530-002	2. Total Award Amount: \$50,000
3. Project Name: BAR-K area Mitigation	4. Reimbursement Amount to Date: \$42,197.56
5. Make Payment To: Lefthand FPD Name: Lefthand FPD Attn: Russell Leadingham Address: 900 Lefthand Canyon Dr, Boulder, CO 80302	6. Period of Performance (Project Period): From: May 2012 To: November 1, 2012

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. 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, etc., for which the award was granted. Attach additional sheets as necessary.

Created wildland defensible space on seven properties in the BAR-K and Matoon's Highlands subdivisions. 17.2 acres total, See attachment for individual project details

8. Reimbursement Request: I request reimbursement in the amount of \$7698.50 for the work completed and documented above.

Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Award Amount	B. Recipient Contribution	C. Non-recipient Contribution	D. Total Contributions	E. Reimbursement Requested Amount	F. Total Match Ratio %
			B + C		E / D
\$50,000	\$15,397	\$3,720	\$19,117	\$7,698.50	40%

* Use results from Exhibit B: Financial Assistance Programs Reimbursement Calculation Worksheet to complete table above. Include Exhibit B: and Form D Cost Documentation or other approved documentation with Exhibit B to request reimbursement.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: _____

Date: 11/9/12

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: _____

Date: 11/9/12

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: _____

Date: 11/16/12

COPY

Exhibit B 1

(Accompanies Exhibit B-Reimbursement Request)

CSFS Financial Assistance Cost-Share Program Reimbursement Calculation Worksheet*

A. Award amount obligated from funding source (To earn the obligated award amount, the recipient must complete 100% of the deliverables agreed to in the Statement of Work)	B. Recipient Contribution: (AKA: cash; hard match; in-kind/soft match; actual costs) INCLUDES: (contracted services with receipts) (recipients' own labor to be valued at current volunteer labor rate) (labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented) (equipment rental with receipts) (use of recipient-owned equipment to valued at market rental rate) (cost of supplies with receipts: this includes items such as bar oil and two cycle fuel, but does not include repairs or other parts, such as chains, sparkplugs, etc.) (materials with receipts) (materials, if provided to valued at market price) (meeting room rental with receipts) (meeting room provided by recipient to be valued at market price) (printing with receipts) <i>Current volunteer labor rate is the correct rate at the time of reimbursement request. Any recipient contributions can be used as match to an award. Reimbursement for these contributions can not exceed the obligated amount and must meet the cost share rate.</i>	C. Non-recipient Contribution: (AKA: donated; in-kind/soft match; volunteer) INCLUDES: (volunteers' labor to be valued at current volunteer labor rate) (donated materials/supplies to be valued at market value) (donated use of equipment to be valued at rental rate) (meeting room provided to be valued at market price) While non-recipient contributions can be used as match to an award, the recipient will not be reimbursed for these contributions.	D. Total Contributions (AKA: Total Project Value; Total Project Costs) (B + C)	E. Reimbursement Amount (will be equal to or less than A and must meet the matching requirement)	F. Total Match Ratio (Cost-share rate) (E / D)
\$50,000.00	\$15,397.00	\$3,720.00	\$19,117.00	\$7,698.50	40%

*Use From D-Cost Documentation or other approved documentation to support calculations



Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input checked="" 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 type="checkbox"/>

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

Name: Left Hand FPD

Address: 900 Left Hand Canyon Dr.

Boulder, CO 80302

Attn: Chief Russell Leadingham

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: 5308530-002-B0 Cooperator Match: \$15,397.00

Approved Funding: \$ 50,000 Total Project: \$19,117.00

CSFS Account Number: 5308530-6693 Amount of Payment: \$ 7698.50

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

Approved by _____ Date: _____
(Program manager signature)

Copy
to Scott 11/12

EXHIBIT B
CSFS GRANT REPORT/REIMBURSEMENT REQUEST

In order to receive reimbursement, you must provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by receipts for actual costs (out of pocket expenses) incurred by the recipient. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and have corresponding match.

1. Project/Account #: 5308530-002	2. Total Award Amount: \$50,000
3. Project Name: BAR-K area Mitigation	4. Reimbursement Amount to Date: \$42,197.56
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Created wildland defensible space on seven properties in the BAR-K and Matoon's Highlands subdivisions. 17.2 acres total,
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			B + C		E / D
\$50,000	\$15,397	\$3,720	\$19,117	\$7,698.50	40%

* Use results from Exhibit B: Financial Assistance Programs Reimbursement Calculation Worksheet to complete table above. Include Exhibit B: and Form D Cost Documentation or other approved documentation with Exhibit B to request reimbursement.

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Grant Recipient Signature: _____

Date: 11/9/12

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: _____

Date: 11/9/12

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: _____

Date: _____

Exhibit B 1

(Accompanies Exhibit B-Reimbursement Request)

CSFS Financial Assistance Cost-Share Program Reimbursement Calculation Worksheet*

A. Award amount obligated from funding source (To earn the obligated award amount, the recipient must complete 100% of the deliverables agreed to in the Statement of Work)	B. Recipient Contribution: (AKA: cash; hard match; in-kind/soft match; actual costs) INCLUDES: (contracted services with receipts) (recipients's own labor to be valued at current volunteer labor rate) (labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented) (equipment rental with receipts) (use of recipient-owned equipment to valued at market rental rate) (cost of supplies with receipts: this includes items such as bar oil and two cycle fuel, but does not include repairs or other parts, such as chains, sparkplugs, etc.) (materials with receipts) (materials, if provided to valued at market price) (meeting room rental with receipts) (meeting room provided by recipient to be valued at market price) (printing with receipts) <i>Current volunteer labor rate is the current rate at the time of reimbursement request. Any recipient contributions can be used as match to an award. Reimbursement for these contributions can not exceed the obligated amount and must meet the cost share rate.</i>	C. Non-recipient Contribution: (AKA: donated; in-kind/soft match; volunteer) INCLUDES: (volunteers' labor to be valued at current volunteer labor rate) (donated materials/supplies to be valued at market value) (donated use of equipment to be valued at rental rate) (meeting room provided to be valued at market price) While non-recipient contributions can be used as match to an award, the recipient will not be reimbursed for these contributions.	D. Total Contributions (AKA: Total Project Value; Total Project Costs) (B + C)	E. Reimbursement Amount (will be equal to or less than A and must meet the matching requirement)	F. Total Match Ratio (Cost-share rate) (E / D)
\$50,000.00	\$15,397.00	\$3,720.00	\$19,117.00	\$7,698.50	40%

*Use From D-Cost Documentation or other approved documentation to support calculations

CSFS FINANCIAL ASSISTANCE COST-SHARE PROGRAM COST DOCUMENTATION

The following are activities conducted for completion of the Financial Assistance Program practice for which I have been funded. The value of each the activity is itemized below. Attach receipts.

Date m/d/yr	By Whom	Activity/Expense**	Hours	Value (\$)
May	LHFPD	Dan Walters 4.8 ac /		\$5995.00
October	LHFPD	Patrick Griffin 1 ac		\$822.00
October	LHFPD	Karen Feary 1 ac		\$522.00
Sept	LHFPD	Luke Parsons 4.2 ac		\$3966.00
Sept.	Tucker Partridge	McIntosh, Dick 1 ac		\$2700.00
October	LHFPD	Jeff Hohensee 1ac		\$1392.00
		13 ac=\$1184.38/ac		15,397/2= \$7698.50
June	Cram	John Cram 4.2 ac 3h chipping @ \$100/h=\$300+\$180 labor+160hr @ \$20.25		\$3720

*Use Exhibit B1 Financial Assistance Programs Reimbursement Calculation Worksheet to be sure you account for the type of activities, expenses and other contributions provided to complete project, or phase of project.


Grant Recipient Signature

11/9/12
Date


District Forester Signature

11/9/12
Date

BILL TO	
Dan Walters	11
608 Allen Ave.	
Longmont, CO 80503	

Invoice

DATE	INVOICE #
8/30/2012	613

DESCRIPTION	AMOUNT
Labor, 163 hrs @ \$27.50/hr	4,482.50
Chipper, 18.1 hrs @ 55/hr	995.50
Equipment (saws), 9 Days @ \$50/hr	450.00
Fuel, 16.8 Gal. @ \$4.00/Gal	67.20
Less 50% Match for CSFS Grant	(5995) -2,997.60
	1249 ac
	Amount Due \$2,997.60

Payments/Credits Received	\$0.00
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BILL TO
Pat & Dina Griffin PO Box 246 Jamestown, CO 80455

Invoice

DATE	INVOICE #
11/5/2012	632

[illegible]

Payments/Credits Received	\$0.00
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Left Hand Fire Protection District
900 Lefthand Canyon Drive
Boulder, CO 80302
(720) 214-0560
(720) 214-0559 (Fax)

Final
Inv. #: 629
(e-mailed to Cust. 10/5/12)

Date: October 2, 2012

PROPOSAL FOR MITIGATION WORK

Customer Name: Karen Feary Phone: 435-201-0209
Address: 98 Crockett Trl
City, ST Zip: Ward, CO
E-Mail: kfeary@msn.com

Description of project (defensible space/wildfire mitigation, chipping, misc. treatments):
Cut trees marked with blue paint, all slash to be broadcast chipped, beetle bole wood to be broadcast chipped. Homeowner is eligible for up to 50/50 cost reimbursement through State funding, homeowner eligible for up to 50% out of pocket cost tax deduction.

Item/Description	Hours	Rate	TOTAL
Labor			
2 Person Crew	10	\$30	\$300
			\$
			\$
Equipment			
Truck	1d	\$50	\$50
Chipper	1h	\$100h	\$100
Materials			
Saws	2d	\$36d	\$72
			\$
GRAND TOTAL:			\$522

CSFS 261
Homeowner 261

Property Owner Permission to Perform Mitigation Work and Mutual Release of Liability

I will inform LHFPD of any known hazards that might be affected, prior to the chipping work described above on the property.

I also warrant that I have the legal right and authority to grant access to the property for the purpose of performing the work described above.

I understand that the LHFPD chipper operator is allowed to feed material into the chipper. Additional personnel may hand or stage material for the LHFPD chipper operator.

Further, I understand that LHFPD will waive any claims against me for injuries to its personnel or equipment that may suffer as a result of performing the work on my property (except for injuries or damages caused by my intentional acts), and that the liability of LHFPD to me is governed by the Colorado Governmental Immunity Act.

Signed _____



Left Hand Fire Protection District
900 Lefthand Canyon Drive
Boulder, CO 80302
(720) 214-0560
(720) 214-0559 (Fax)

Final
Inv # 630
(e-mailed to Cust. 10/5/12)

Date: August 2, 2012

PROPOSAL FOR MITIGATION WORK

Customer Name: Sally and Luke Parsons Phone: 303-459-1107
Address: 180 Crockett Tr.
City, ST Zip: Jamestown CO, 80455
E-Mail: Sallyparsons726@gmail.com

Description of project (defensible space/wildfire mitigation, chipping, misc. treatments):
Fall and remove trees marked w/bumblebee, thin small fir stands appropriately for mixed age stand.
Broadcast chip slash, firewood to remain at homeowner's request. Broadcast chip all previous burn piles except large refuse pile with mixed stumps (to be buried by homeowner). Work performed meets the 50/50 CSFS grant. Any work performed by homeowner will reduce match at a \$20/h rate. Homeowner is eligible for tax deduction of 50% of hard match in 2012 taxes. All work performed in a workmanlike manner.

Item/Description	Hours	Rate	TOTAL
Labor			
2 Person Crew	50	\$30	\$3000
			\$
			\$
Equipment			
Truck Charge	3d	\$50/d	\$150
Chipper	6	\$100/h	\$600
Materials			
Saws	2@3d	\$36/s/d	\$216
			\$
GRAND TOTAL:			\$3966

Property Owner Permission to Perform Mitigation Work and Mutual Release of Liability

I will inform LHFPD of any known hazards that might be affected, prior to the chipping work described above on the property.

I also warrant that I have the legal right and authority to grant access to the property for the purpose of performing the work described above.

I understand that the LHFPD chipper operator is allowed to feed material into the chipper. Additional personnel may hand or stage material for the LHFPD chipper operator.

Further, I understand that LHFPD will waive any claims against me for injuries to its personnel or equipment that may suffer as a result of performing the work on my property (except for injuries or damages caused by my intentional acts), and that the liability of LHFPD to me is governed by the Colorado Governmental Immunity Act.

CSFS 1983
Homeowner 1983
4.2 ac
862.17 ac

Tucker's Firewood and Tree Mitigation Services

Billing Statement for Tree Removal Project for Richard McIntosh @ Rock Lake Road Bar K Ranch
Colorado 80481

*This is a FINAL Bill for all tree work completed

- Cut down 3 marked trees around studio one of which needed to be climbed and taken down in sections due to location. Cut all of these tree sections into 12 inch burnable tree lengths which were stacked in specified location. All slash from these 3 trees were carried approximately 50 yards to loading zone where truck was located. Also trimmed branches off of 2 other trees around studio.

\$300

- Removed large Douglas fir tree right by front door of house.
Climbed and top roped

\$500

- Cut 11 trees marked around the house those were originally marked for cut down.

\$750

- Loaded all slash produced from all trees cut onsite. Hauled slash on large dump truck to designated dumping area in Nederland.

\$1000

- This was the original Bid agreement

- Extra removed approximately 10 more marked trees.

\$150

Total Amount- \$2700

We Accept Cash or Check

Check must be payable to: Rebecca Strom 1510 Raven Court E, Estes Park, Co 80517

Thanks,

Tucker Pattridge and Crew

Paid Check - Oct - 7th 2012

Check # 2261

Tucker Pattridge

Invoice

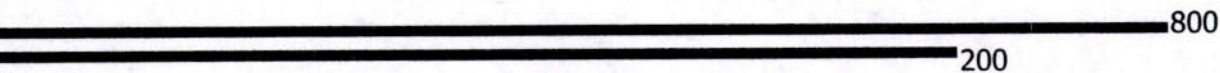
[illegible]

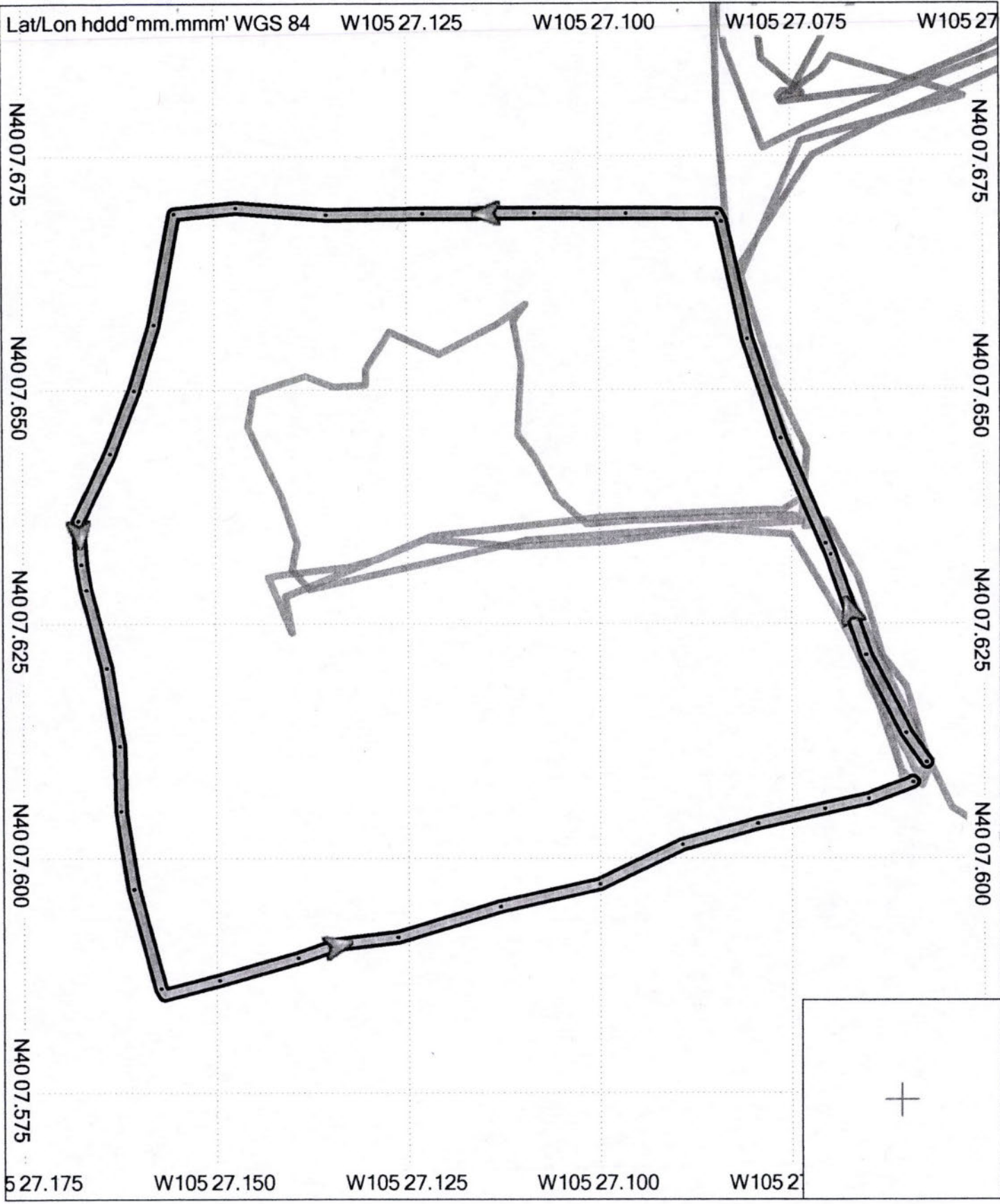
Payments/Credits Received	\$0.00
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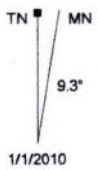
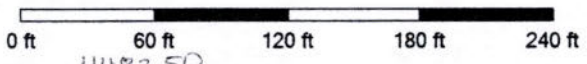
Google earth

feet
meters





Global Map



Internal Storage

walters 4482.50 4.8ac

GARMIN.

Lat/Lon hddd°mm.mmm' WGS 84

W105 27.025

W105 27.000

W105 26.975

N40 07.775

N40 07.775

N40 07.750

N40 07.750

N40 07.725

N40 07.725

N40 07.700

N40 07.700

N40 07.675

W105 27.075

W105 27.050

W105 27.025

W105 27.000

Global Map

0 ft 60 ft 120 ft 180 ft 240 ft

Internal Storage

Coam 4.2ac

GARMIN

TN MN
9.3°
1/1/2010



COPY

Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	
Insect and Disease Prevention and Suppression Program	
State Fire Assistance (a.k.a.: SFA)	X
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)	

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

11-09-12

Name: LEFTHAND FIRE PROTECTION DISTRICTAddress: 900 LeftHand Canyon Dr.Boulder, CO 80302ATTN: CHIEF RUSSELL LEADINGHAM

Approved for Payment

C.S.F.S.

2141365

11-09-12

K

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: 5308530-002-BO ~ Cooperator Match: 13,441.90 ~Approved Funding: \$50,000 ~ Total Project: 18,757.53 ~CSFS Account Number: 5308530-6693 ~ Amount of Payment: \$8400.00 ~

09CPG SFA CGI FRFT
09CPG SFA CGG WUI/CWPP FRFT

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

Approved by: [Signature]
(Program manager signature)Date: 11/7/12

EXHIBIT B
CSFS GRANT REPORT/REIMBURSEMENT REQUEST

In order to receive reimbursement, you must provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by receipts for actual costs (out of pocket expenses) incurred by the recipient. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and have corresponding match.

1. Project/Account #: <u>5308530 -BO -002</u>	2. Total Award Amount: <u>\$50,000</u>
3. Project Name: <u>CAL-WOOD</u>	4. Reimbursement Amount to Date: <u>33,797.56</u>
5. Make Payment To: <u>LEFTHAND FIRE PROTECTION DISTRICT</u> Name: Attn: <u>RUSSELL LEADINGHAM</u> Address: <u>900 LEFTHAND CANYON DR.</u> <u>BOULDER, CO 80302</u>	6. Period of Performance (Project Period): From: <u>4/27/12</u> To: <u>9/19/12</u>

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. 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, etc., for which the award was granted. Attach additional sheets as necessary.

*7 acres of fuels mitigation treatment at
Cal-Wood, "Mica Mine" project, Product removal
(firewood) and all slash chipped and utilized
for road hardening*

8. Reimbursement Request: I request reimbursement in the amount of \$ 8400.00 for the work completed and documented above.

Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Award Amount	B. Recipient Contribution	C. Non-recipient Contribution	D. Total Contributions	E. Reimbursement Requested Amount	F. Total Match Ratio %
			B + C		E / D
<u>\$50,000</u>	<u>13,441.90</u>	<u>5315.63</u>	<u>18,757.53</u>	<u>8400.00</u>	<u>45%</u>

* Use results from Exhibit B: Financial Assistance Programs Reimbursement Calculation Worksheet to complete table above. Include Exhibit B: and Form D Cost Documentation or other approved documentation with Exhibit B to request reimbursement.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: _____

Date: 9/19/12

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: _____

Date: 9/19/12

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: _____

Date: 11/7/12

COPY

Exhibit B 1

(Accompanies Exhibit B-Reimbursement Request)

CSFS Financial Assistance Cost-Share Program Reimbursement Calculation Worksheet*					
A. Award amount obligated from funding source (To earn the obligated award amount, the recipient must complete 100% of the deliverables agreed to in the Statement of Work)	B. Recipient Contribution: (AKA: cash; hard match; in-kind/soft match; actual costs) INCLUDES: (contracted services with receipts) (recipients' own labor to be valued at current volunteer labor rate) (labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented) (equipment rental with receipts) (use of recipient-owned equipment to valued at market rental rate) (cost of supplies with receipts: this includes items such as bar oil and two cycle fuel, but does not include repairs or other parts, such as chains, sparkplugs, etc.) (materials with receipts) (materials, if provided to valued at market price) (meeting room rental with receipts) (meeting room provided by recipient to be valued at market price) (printing with receipts) <i>Current volunteer labor rate is the current rate at the time of reimbursement request. Any recipient contributions can be used as match to an award. Reimbursement for these contributions can not exceed the obligated amount and must meet the cost share rate.</i>	C. Non-recipient Contribution: (AKA: donated; in-kind/soft match; volunteer) INCLUDES: (volunteers' labor to be valued at current volunteer labor rate) (donated materials/supplies to be valued at market value) (donated use of equipment to be valued at rental rate) (meeting room provided to be valued at market price) While non-recipient contributions can be used as match to an award, the recipient will not be reimbursed for these contributions.	D. Total Contributions (AKA: Total Project Value; Total Project Costs) (B + C)	E. Reimbursement Amount (will be equal to or less than A and must meet the matching requirement)	F. Total Match Ratio (Cost-share rate) (E / D)
\$50,000.00	\$13,441.90	\$5,315.63	\$18,757.53	\$8,400.00	45%

*Use From D-Cost Documentation or other approved documentation to support calculations



COPY
to Scott 10/24/12

Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input checked="" 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 type="checkbox"/>

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

Name: LEFTHAND FIRE PROTECTION DISTRICT

Address: 900 Left Hand Canyon Dr.
Boulder, CO 80302
ATTN: CHIEF Russell Leedingham

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: 5308530-002-BO Cooperator Match: 13,441.90

Approved Funding: \$50,000 Total Project: 18,757.53

CSFS Account Number: 5308530-6693 Amount of Payment: \$8400.00

109 CPG SFA CGI FRFT

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

Approved by _____ Date: _____
 (Program manager signature)

COPY

EXHIBIT B
CSFS GRANT REPORT/REIMBURSEMENT REQUEST

In order to receive reimbursement, you **must** provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by receipts for actual costs (out of pocket expenses) incurred by the recipient. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and have corresponding match.

1. Project/Account #: <u>5308530-BO-002</u>	2. Total Award Amount: <u>\$50,000</u>
3. Project Name: <u>CAL-WOOD</u>	4. Reimbursement Amount to Date: <u>33,797.56</u>
5. Make Payment To: <u>LEFTHAND FIRE PROTECTION DISTRICT</u>	
Name: _____ Attn: <u>RUSSELL LEADINGHAM</u> Address: <u>900 Lefthand Canyon Dr.</u> <u>BOULDER, CO 80302</u>	
6. Period of Performance (Project Period): From: <u>4/27/12</u> To: <u>9/19/12</u>	

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. 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, etc., for which the award was granted. Attach additional sheets as necessary.

*7 acres of fuels mitigation treatment at
Cal-Wood, "Micavhine" project, Product removal
(firewood) and all slash chipped and utilized
for road hardening*

8. Reimbursement Request: I request reimbursement in the amount of \$ 8400.00 for the work completed and documented above.

Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Award Amount	B. Recipient Contribution	C. Non-recipient Contribution	D. Total Contributions	E. Reimbursement Requested Amount	F. Total Match Ratio %
			B + C		E / D
<u>\$50,000</u>	<u>13,441.90</u>	<u>5315.63</u>	<u>18,757.53</u>	<u>8400.00</u>	<u>45%</u>

* Use results from Exhibit B: Financial Assistance Programs Reimbursement Calculation Worksheet to complete table above. Include Exhibit B: and Form D Cost Documentation or other approved documentation with Exhibit B to request reimbursement.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: _____

Date: 9/19/12

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: _____

Date: 9/19/12

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: _____

Date: _____

Exhibit B 1

(Accompanies Exhibit B-Reimbursement Request)

CSFS Financial Assistance Cost-Share Program Reimbursement Calculation Worksheet*					
A. Award amount obligated from funding source (To earn the obligated award amount, the recipient must complete 100% of the deliverables agreed to in the Statement of Work)	B. Recipient Contribution: (AKA: cash; hard match; in-kind/soft match; actual costs) INCLUDES: (contracted services with receipts) (recipients's own labor to be valued at current volunteer labor rate) (labor of recipient's employees-salaried employees-to be valued at actual amount and must be documented) (equipment rental with receipts) (use of recipient-owned equipment to valued at market rental rate) (cost of supplies with receipts; this includes items such as bar oil and two cycle fuel, but does not include repairs or other parts, such as chains, sparkplugs, etc.) (materials with receipts) (materials, if provided to valued at market price) (meeting room rental with receipts) (meeting room provided by recipient to be valued at market price) (printing with receipts) <i>Current volunteer labor rate is the correct rate at the time of reimbursement request. Any recipient contributions can be used as match to an award. Reimbursement for these contributions can not exceed the obligated amount and must meet the cost share rate.</i>	C. Non-recipient Contribution: (AKA: donated; in-kind/soft match; volunteer) INCLUDES: (volunteers' labor to be valued at current volunteer labor rate) (donated materials/supplies to be valued at market value) (donated use of equipment to be valued at rental rate) (meeting room provided to be valued at market price) While non-recipient contributions can be used as match to an award, the recipient will not be reimbursed for these contributions.	D. Total Contributions (AKA: Total Project Value; Total Project Costs) (B + C)	E. Reimbursement Amount (will be equal to or less than A and must meet the matching requirement)	F. Total Match Ratio (Cost-share rate) (E / D)
\$50,000.00	\$13,441.90	\$5,315.63	\$18,757.53	\$8,400.00	45%

*Use From D-Cost Documentation or other approved documentation to support calculations

Form D-ES

**EMERGENCY SUPPLEMENTAL FUNDS
LANDOWNER ASSISTANCE PROGRAMS
COST DOCUMENTATION**

I have incurred the following expenses for completion of the LOA Program practice for which I have been funded. These expenses are itemized below. Labor rate to be used if landowner is doing the work is \$20.25/hr. Separate expenses by component (activity). Attach receipts.

Landowner Signature

CALWOOD - ANGIE BUSBY + VOLUNTEERS
MICA MINE PROJECT

Date	By Whom:	Activity/Expense:	Hours	Expenses
4/23	Angie	checking in on work progress/asking questions	1	20.25
4/27	Angie	checking in on project status	1	20.25
4/28	Angie	chainsaw/hauled staged logs	8	162.00
4/28	NCCC (4)	haul logs into truck, spread chip on road	32	\$1,458.00
5/2	Angie	checking in on progress	1	20.25
5/20	ENR	hauling wood from site to barn	3.5	70.88
5/20	CYP Vol (7)	spread chip, wood into truck to barn	24.5	496.13
5/30	Angie	check-in w/ project work	1	20.25
5/25	Angie	walk thru w/ Allen and Chris	2	40.50
6/6	Angie	haul/drag logs alongside road	5	101.25
6/10	Angie	haul wood out of field	3	60.75
6/10	MSC (24)	haul wood out of field, spread chip - 3 hrs	72	\$1,458.00
6/13	Angie	back on wood and split chain	7	141.75
7/11	Angie (am)	haul wood into truck	3	60.75
7/11	Rocky (am)	haul wood into truck	3	60.75
7/11	CYP am (am)	haul wood into truck, start along road	36	729.00
7/11	Angie (pm)	haul wood to road, spread chip	3.5	70.88
7/11	Rocky (pm)	spread chip on road	3.5	70.88
7/11	CYP (pm)	spread chip on road, haul logs to road (15p)	52.5	1,063.13
Total			262.5	\$5,315.63
			HOURS	MONIES

7/2010

To:

Invoice No.

D75947

**Colorado
State**
FOREST
SERVICE

Date:

JUNE 5 2012

Item	Unit Cost	Total
1 CALIBORN MICH MINE UNIT		
2 FUEL REDUCTION PROJECT		
3 7 Acres - M-1000 Lumber Service		
4 PERMITS/LABOR 100 HOURS	45/hr.	4500.00
5 EQUIPMENT - TRUCK/ATV 10 DAYS	30/DAY	300.00
6 SUPPLIES - PAINT, FENCING		100.00
7 LOG ARCH - EQUIPMENT 5 DAYS	15/DAY	75.00
8		
9		
Tax Exempt No. _____	Sales Tax	—

Total 4975.00

CX-CA-MO Amount Paid: 4975.00

Amount Due ~~1111.00~~

Ck# 3059

Dated 6-12-12

Rcv'd By MM

F.Y. 11-12

CSFS Originator

Payment Due By

JUNE 25, 2012

Remit to:

Funding	Amount
1940300	4380
	615
	4975.00

Deposit No.

Date

CAL WOOD MITIGATION COST SHEET

LABOR

DATE	EMPLOYEE	RATE	HOURS	TOTAL	
4/23/2012	FRIESS	\$20.00	8	\$160.00	
4/23/2012	GROFF	\$20.00	8	\$160.00	
4/24/2012	GROFF	\$20.00	8	\$160.00	
4/25/2012	GROFF	\$20.00	8	\$160.00	
4/26/2012	FRIESS	\$20.00	6	\$120.00	
4/26/2012	GROFF	\$20.00	6	\$120.00	
4/30/2012	FRIESS	\$20.00	8	\$160.00	(ACTUALLY WORKED U
4/30/2012	GROFF	\$20.00	8	\$160.00	(ACTUALLY WORKED U
5/1/2012	FRIESS	\$20.00	8	\$160.00	(ACTUALLY WORKED U
5/1/2012	GROFF	\$20.00	8	\$160.00	
5/2/2012	FRIESS	\$20.00	8	\$160.00	(ACTUALLY WORKED U
5/2/2012	GROFF	\$20.00	8	\$160.00	(ACTUALLY WORKED U
5/3/2012	FRIESS	\$20.00	8	\$160.00	
5/3/2012	GROFF	\$20.00	8	\$160.00	
5/8/2012	FRIESS	\$20.00	8	\$160.00	(ACTUALLY WORKED U
5/8/2012	GROFF	\$20.00	8	\$160.00	
5/9/2012	FRIESS	\$20.00	8	\$160.00	
5/9/2012	GROFF	\$20.00	8	\$160.00	
5/14/2012	FRIESS	\$20.00	10	\$200.00	(ACTUALLY WORKED U
5/14/2012	GROFF	\$20.00	10	\$200.00	
5/15/2012	FRIESS	\$20.00	10	\$200.00	(ACTUALLY WORKED U
5/15/2012	GROFF	\$20.00	10	\$200.00	(ACTUALLY WORKED U
5/16/2012	GROFF	\$20.00	10	\$200.00	
5/16/2012	FRIESS	\$20.00	10	\$200.00	
5/21/2012	FRIESS	\$20.00	10	\$200.00	
5/21/2012	GROFF	\$20.00	10	\$200.00	

5/22/2012 FRIESS	\$20.00	10	\$200.00
5/22/2012 GROFF	\$20.00	10	\$200.00
5/29/2012 FRIESS	\$20.00	10	\$200.00
5/29/2012 GROFF	\$20.00	10	\$200.00
5/29/2012 CATHCART	\$20.00	10	\$200.00
5/30/2012 FRIESS	\$20.00	10	\$200.00
5/30/2012 GROFF	\$20.00	10	\$200.00
5/30/2012 CATHCART	\$20.00	10	\$200.00
	\$20.00 X	300 HOURS	\$6,000.00

EQUIPMENT

DATE	EQUIPMENT	RATE	HOURS	TOTAL
4/23/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
4/24/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
4/25/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
4/26/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
4/30/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
5/1/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
5/2/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
5/3/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
5/8/2012	4148/SAWS	\$50.00	1 DAY	\$50.00
5/9/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
5/14/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
5/15/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
5/16/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
5/21/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
5/22/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
5/29/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
5/30/2012	4158/SAWS	\$50.00	1 DAY	\$50.00
		\$50.00	X 1 DAY	\$850.00
4/24/2012	CHIPPER	\$55.00/HOUR	3.6	\$198.00
4/25/2012	CHIPPER	\$55.00/HOUR	2.2	\$121.00
4/26/2012	CHIPPER	\$55.00/HOUR	2.3	\$126.50
4/30/2012	CHIPPER	\$55.00/HOUR	1.4	\$77.00
5/1/2012	CHIPPER	\$55.00/HOUR	3	\$165.00
5/2/2012	CHIPPER	\$55.00/HOUR	2.4	\$132.00
5/3/2012	CHIPPER	\$55.00/HOUR	2.1	\$115.50

5/8/2012 CHIPPER	\$55.00/HOUR	3.4	\$187.00
5/9/2012 CHIPPER	\$55.00/HOUR	3	\$165.00
5/14/2012 CHIPPER	\$55.00/HOUR	2.8	\$154.00
5/15/2012 CHIPPER	\$55.00/HOUR	2.2	\$121.00
5/16/2012 CHIPPER	\$55.00/HOUR	3.5	\$192.50
5/21/2012 CHIPPER	\$55.00/HOUR	2.7	\$148.50
5/22/2012 CHIPPER	\$55.00/HOUR	2.5	\$137.50
5/29/2012 CHIPPER	\$55.00/HOUR	2.3	\$126.50
5/30/2012 CHIPPER	\$55.00/HOUR	1.3	\$71.50
	\$55.00/HOUR X	40.7	\$2,238.50

OTHER COSTS

57.1 GALLONS OF DIESEL FUEL

\$228.40

CAL WOOD SO FAR-

\$9,316.90

**CSFS FINANCIAL ASSISTANCE COST-SHARE PROGRAM
COST DOCUMENTATION**

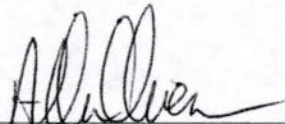
The following are activities conducted for completion of the Financial Assistance Program practice for which I have been funded. The value of each the activity is itemized below. Attach receipts.

Date m/d/yr	By Whom	Activity/Expense**	Hours	Value (\$)
5/12	LHFPD MITCREW	FUEL REDUCTION PROJECT - CALWOOD MICA MINE PERSONNEL PAYROLL - SEE ATTACHED SPREADSHEET		6000.00
5/12	LHFPD MITCREW	EQUIPMENT - SAWS/chipper		2238.50
5/12	LHFPD MITCREW	DIESEL		228.40
6/12	CSFS MITCREW	PERSONNEL, EQUIPMENT, SUPPLIES		4975.00
6/12	ANGIE BUSBY CAL-WOOD	IN-KIND w/ youth volunteer, FIREWOOD REMOVAL SLASH/chip cleanup	262.5	5315.63

*Use Exhibit B1 Financial Assistance Programs Reimbursement Calculation Worksheet to be sure you account for the type of activities, expenses and other contributions provided to complete project, or phase of project.


Grant Recipient Signature

9/21/12
Date


District Forester Signature

10/24/12
Date

Cal-Wood 2012

Crew Time

Rate: \$20/hr.

Name	Date	Total Hrs
Ben Groff	4/23/2012	8
Ben Groff	4/24/2012	8
Ben Groff	4/25/2012	8
Ben Groff	4/26/2012	8
Ben Groff	4/30/2012	8
Ben Groff	5/1/2012	8
Ben Groff	5/2/2012	8
Ben Groff	5/3/2012	8
Ben Groff	5/8/2012	8
Ben Groff	5/14/2012	10
Ben Groff	5/15/2012	10
Ben Groff	5/16/2012	10
Ben Groff	5/21/2012	10
Ben Groff	5/22/2012	10
Ben Groff	5/29/2012	9.25
Ben Groff	5/30/2012	10
Ben Groff	6/12/2012	10
Ben Groff	8/9/2012	8
Ben Groff Total		159.25
Max Cathcart	5/29/2012	9.25
Max Cathcart	5/30/2012	10
Max Cathcart Total		19.25
Melissa Friess	4/23/2012	8
Melissa Friess	4/26/2012	6.5
Melissa Friess	4/30/2012	8
Melissa Friess	5/1/2012	8.5
Melissa Friess	5/2/2012	8.5
Melissa Friess	5/3/2012	8.5
Melissa Friess	5/8/2012	8.5
Melissa Friess	5/9/2012	8.5
Melissa Friess	5/10/2012	8.5
Melissa Friess	5/14/2012	10.5
Melissa Friess	5/15/2012	10.5
Melissa Friess	5/16/2012	10
Melissa Friess	5/21/2012	10
Melissa Friess	5/22/2012	10
Melissa Friess	5/29/2012	9.25
Melissa Friess	5/30/2012	10
Melissa Friess Total		143.75
Hrs Grand Total		322.25

Did not use.

per updated cost-sheet
from COBRAW - in
reimbursement package

AD
10/24/12

Total \$6445.00



COPY

Approved for Payment
C.S.F.S.

1835691

05-04-12

K2

Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	
Insect and Disease Prevention and Suppression Program	
State Fire Assistance (a.k.a.: SFA)	X
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)	

☒ Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/>
Name: Lefthand Fire Protection DistrictAddress: 900 Lefthand Canyon Dr.Boulder, CO 80302

~

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: 5308530-002-B0 ~ Cooperator Match: \$23,797.56Approved Funding: \$50,000 ~ Total Project: \$47,595.12CSFS Account Number: 5308530-6693 ~ Amount of Payment: \$23,797.56 ~
'09CPG SFA CGI FRFTCircle one: 1st Payment 2nd Payment 3rd Payment Final PaymentApproved by Jane Dwyer Date: 5/4/2012
(Program manager signature)

EXHIBIT B
GRANT REPORT/REIMBURSEMENT REQUEST
COMPETITIVE GRANTS

Project Number: Grant # 5308530 - 002 - 80 ~

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. Project #: 5308530 - 002	2. Project Funding Amount: \$50,000	3. Community Protected: Bar-K, Sky Ranch, Matoons Hlds
4. Make Payment To: Lefthand FPD Name: Lefthand Fire Protection District Address: 900 Left Hand Canyon Dr. Boulder, CO 80302		5. Period of Performance: From: 7/1/2009 To: 1/15/2012

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.)

Acres Completed: 38.39 acres

Aprox. # of Piles Burned: 150

Firewood: 200 cords

See Documentation

7. Reimbursement Request: \$ 223,797.56 ~

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

	Current Period				Project to Date			
	Reimbursement Amount Requested	Matching Funds		Total Costs	Reimbursement Amount Requested	Matching Funds		Total Costs
	For Out of Pocket Expenses	Cash (hard match)	Donated (Inkind match)		For Out of Pocket Expenses	Cash (hard match)	Donated (Inkind match)	
Labor*	\$23,797.56	\$17,291.00	\$6,506.56	\$47,595.12	\$30,576.56	\$24,070.00	\$6,506.56	\$61,153.12
Material**					\$3,221.00	\$3,221.00		\$6,442.00
Total	\$23,797.56	\$17,291.00	\$6,506.56	\$47,595.12	\$33,797.56	\$27,291.00	\$6,506.56	\$67,595.12

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

* Use actual costs or \$20.25/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 \$ 223,797.56 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 project documents.

Signature: 

Date: 4/26/12

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

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

Work meets minimum standards as set forth by CSFS.

Signature: 

Date: 4-26-12

COPY



Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	
Insect and Disease Prevention and Suppression Program	
State Fire Assistance (a.k.a.: SFA)	X
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)	

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

Name: Left Hand Fire Protection District

Address: 900 Left Hand Canyon Dr.
Boulder, CO 80302

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: 5308530-002-B0 Cooperator Match: \$23,797.56

Approved Funding: \$50,000 Total Project: \$47,595.12

CSFS Account Number: 5308530-6693 Amount of Payment: \$23,797.56
'09CP6 SFA CGI FRFT

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

Approved by _____
 (Program manager signature)

Date: _____

EXHIBIT B
GRANT REPORT/REIMBURSEMENT REQUEST
COMPETITIVE GRANTS

Project Number: Grant # 5308530 - 002

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. Project #: 5308530 - 002	2. Project Funding Amount: \$50,000	3. Community Protected: Bar-K, Sky Ranch, Matoons Hlds
4. Make Payment To: Lefthand FPD Name: Lefthand Fire Protection District Address: 900 Left Hand Canyon Dr. Boulder, CO 80302		5. Period of Performance: From: 7/1/2009 To: 1/15/2012

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.)

Acres Completed: 38.39 acres
 Aprox. # of Piles Burned: 150 See Documentation
 Firewood: 200 cords

7. Reimbursement Request: \$ 23,797.56

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

	Current Period				Project to Date			
	Reimbursement Amount Requested	Matching Funds		Total Costs	Reimbursement Amount Requested	Matching Funds		Total Costs
	For Out of Pocket Expenses	Cash (hard match)	Donated (Inkind match)		For Out of Pocket Expenses	Cash (hard match)	Donated (Inkind match)	
Labor*	\$23,797.56	\$17,291.00	\$6,506.56	\$47,595.12	\$30,576.56	\$24,070.00	\$6,506.56	\$61,153.12
Material**					\$3,221.00	\$3,221.00		\$6,442.00
Total	\$23,797.56	\$17,291.00	\$6,506.56	\$47,595.12	\$33,797.56	\$27,291.00	\$6,506.56	\$67,595.12

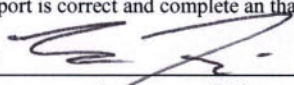
Donated time and materials can only be counted towards the matching component.

* Use actual costs or \$20.25/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

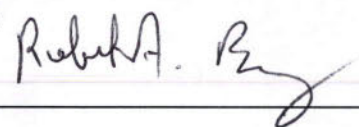
9. I request reimbursement in the amount of \$ 23,797.43 for the work completed and documented above. I certify that to the best of my knowledge and belief this report is correct and complete and that all outlays reported are for the purposes set forth in the project documents.

Signature:  Date: 4/26/12

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

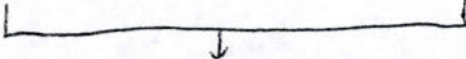
10. Certification (To be completed by CSFS District):

Work meets minimum standards as set forth by CSFS.

Signature:  Date: 4-26-12

Upper Lefthand Fire Protection District
Wildfire Mitigation Grant Reimbursement Request

PROPERTY	ACREAGE	REIMBURSEMENT REQUEST	HARD MATCH LABOR/MATL'S	CUSTOMER PAID AMOUNT	SOFT MATCH DONATION/LABOR	TOTAL COSTS
Limon	1.4	\$875.00	\$1,430.00	\$600.00	\$0.00	\$2,305.00
Andrews	2.5	\$1,562.50	\$2,742.00	\$1,500.00	\$0.00	\$4,304.00
Duncan	1.96	\$1,225.00	\$933.00	\$0.00	\$165.83	\$2,323.83
Armon	1.56	\$975.00	\$3,137.00	\$600.00	\$0.00	\$4,112.00
BarkStables	1.25	\$781.25	\$1,049.00	\$0.00	\$1,365.70	\$3,195.95
Davidson	1.6	\$1,000.00	\$565.00	\$300.00	\$351.16	\$1,916.16
Rozinek	1.41	\$881.25	\$569.00	\$0.00	\$312.16	\$1,762.41
Old Ski Rd.	16.16	\$10,100.00	\$3,416.00	\$0.00	\$1,658.35	\$15,174.35
Valley Lake	3.9	\$2,437.75	\$0.00	\$0.00	\$2,146.10	\$4,583.85
McVey	1.4	\$875.00	\$959.00	\$250.00	\$0.00	\$1,834.00
Thurman	1.27	\$793.75	\$460.00	\$460.00	\$0.00	\$1,253.75
Stoffel	1.25	\$781.25	\$1,055.00	\$675.00	\$0.00	\$1,836.25
Bleil	1.34	\$837.50	\$976.00	\$0.00	\$507.26	\$2,320.76
DiVincinzo	1.39	\$868.75	\$0.00	\$0.00	\$0.00	\$868.75

38.39	\$23,994.00 max, due to match is: \$23,797.56	\$17,291.00	\$4,385.00	\$6,506.56	\$47,791.56 ↓ \$47,595.12
					
		\$23,797.56			

Note: Numbers had to be altered, because max reimbursement is equal to amount of matching efforts.

LIMON PROPERTY COST SHEET

168 St. Vrain Trl.
Jamestown, CO 80481

SALARIES

DATE	EMPLOYEE	HOURS	RATE	TOTALS
9/29/2009	Caylor	8	\$20	\$160
Total		8	X \$20	\$160
9/29/2009	Groff	5	\$20	\$100
9/30/2009	Groff	8	\$20	\$160
Total		13	X \$20	\$260
9/29/2009	Farrell	4	\$20	\$80
9/30/2009	Farrell	8	\$20	\$160
		12	X \$20	\$240
9/30/2009	Mignery	5	\$20	\$100
		5	X \$20	\$100
Totals For Labor		38 HOURS	X \$20	\$760

EQUIPMENT

DATE	EQUIPMENT	HOURS/DAYS	RATE	TOTALS
9/29/2009	Chipper	1 DAY	\$320	\$320
9/30/2009	Chipper	1 DAY	\$320	\$320
9/29/2009	Bar Oil	2 DAYS	\$6	\$6
9/29/2009	Saw Gas	1 DAY	\$12	\$12
9/30/2009	Saw Gas	1 DAY	\$12	\$12

Totals for Equipment **\$670**

TOTAL COST OF LABOR AND EQUIPMENT- \$1,430.00

ANDREWS COST SHEET

47 Ranch Rd.
Ward, CO 80481

SALARIES

DATE	EMPLOYEE	HOURS	RATE	TOTALS
10/1/2009	FARRELL	7	\$19	\$133
10/2/2009	FARRELL	7	\$19	\$133
10/4/2009	FARRELL	6	\$19	\$114
10/5/2009	FARRELL	8	\$19	\$152
10/6/2009	FARRELL	8	\$19	\$152
10/7/2009	FARRELL	8	\$19	\$152
				\$836
10/5/2009	GROFF	8	\$19	\$152
10/6/2009	GROFF	4	\$19	\$76
10/7/2009	GROFF	5	\$19	\$95
				\$323
10/5/2009	CAYLOR	8	\$19	\$152
10/6/2009	CAYLOR	4	\$19	\$76
10/7/2009	CAYLOR	5	\$19	\$95
				\$323

Total Cost- Salaries

\$1,482.00

EQUIPMENT

DATE	EQUIPMENT	HOURS/DAYS	RATE	TOTALS
10/1/2009	4158/SAWS	1 DAY	\$50	\$50
10/2/2009	4158/SAWS	1 DAY	\$50	\$50
10/4/2009	4158/SAWS	1 DAY	\$50	\$50
10/5/2009	4158/SAWS	1 DAY	\$50	\$50
10/6/2009	4158/SAWS	1 DAY	\$50	\$50
10/7/2009	4158/SAWS	1 DAY	\$50	\$50
10/5/2009	CHIPPER	1 DAY	\$40	\$320
10/5/2009	CHIPPER	1 DAY	\$40	\$320
10/6/2009	CHIPPER	1 DAY	\$40	\$320
Total Cost- Equipment				\$1,260.00

TOTAL COST OF LABOR AND EQUIPMENT-

\$2,742.00

DUNCAN MITIGATION COST SHEET

84 Ridge Rd.
Ward, CO 80481

SALARIES

DATE	EMPLOYEE	HOURS	RATE	TOTAL
9/22/2009	GROFF	4	\$19	\$76
9/29/2009	GROFF	8	\$19	\$152
				<hr/> \$228
9/22/2009	CAYLOR	4	\$19	\$76
9/29/2009	CAYLOR	1	\$19	\$19
				<hr/> \$95
9/22/2009	STOFFEL	4	\$20	\$80
9/29/2009	STOFFEL	1	\$20	\$20
9/30/2009	STOFFEL	2	\$20	\$40
				<hr/> \$140
Total cost- Labor				\$463.00

EQUIPMENT

DATE	EQUIPMENT	HOURS/DAYS	RATE	TOTALS
9/22/2009	CHIPPER	8	\$40	\$320
9/22/2009	4158 P/U SAWS	1 DAY	\$50	\$50
9/29/2009	4158 P/U SAWS	1 DAY	\$50	\$50
9/30/2009	4158 P/U SAWS	1 DAY	\$50	\$50
Total Cost- Equipment				<hr/> \$470.00

TOTAL COST LABOR AND EQUIPMENT- \$933.00

DUNCAN COST SHEET- SOFT MATCH

84 RANCH RD.

WARD, CO 80481

LABOR

DATE	HOMEOWNER	HOURS	RATE	TOTALS
9/20/2009	DUNCAN	6	\$19.51	\$117.06
9/21/2009	DUNCAN	2	\$19.51	\$39.02
9/29/2009	DUNCAN	0.5	\$19.51	\$9.75

Total hours- 8.5 HOURS x \$19.51 \$165.83

BAR K STABLE AREA MITIGATION COST SHEET

122 RANCH RD.

JAMESTOWN, CO 80455

LABOR

DATE	EMPLOYEE	TASK	HOURS	RATE	TOTALS
9/21/2010	GROFF	CHIPPING	8	\$19.00	\$76.00
9/22/2010	GROFF	BURNING	8	\$19.00	\$76.00
9/21/2010	CAYLOR	CHIPPING	8	\$19.00	\$76.00
9/22/2010	CAYLOR	BURNING	8	\$19.00	\$76.00
9/21/2010	FARRELL	CHIPPING	8	\$19.00	\$76.00
9/21/2010	MIGNERY	CHIPPING	8	\$19.00	\$76.00
9/22/2010	STOFFEL	BURNING	10	\$20.00	\$200.00
TOTAL LHFPD LABOR HOURS-			58 HOURS-		\$656.00

SOFT MATCH

DATE	EMPLOYEE	TASK	HOURS	RATE	TOTALS
5/27/2010	J. KUTSCHER	CUTTING	6	\$19.51	\$117.06
5/28/2010	J. KUTSCHER	CUTTING	6	\$19.51	\$117.06
7/6/2010	J. KUTSCHER	CUTTING	4	\$19.51	\$78.04
7/8/2010	J. KUTSCHER	PILING	4	\$19.51	\$78.04
7/13/2010	J. KUTSCHER	CUTTING	6	\$19.51	\$117.06
7/15/2010	J. KUTSCHER	PILING	3	\$19.51	\$58.53
7/16/2010	J. KUTSCHER	PILING	8	\$19.51	\$156.08
7/17/2010	J. KUTSCHER	CUTTING	6	\$19.51	\$117.06
7/22/2010	J. KUTSCHER	CUTTING	4	\$19.51	\$78.04
7/23/2010	J. KUTSCHER	CUTTING	4	\$19.51	\$78.04
7/25/2010	J. KUTSCHER	CUTTING	3	\$19.51	\$58.53
7/29/2010	J. KUTSCHER	CUTTING	4	\$19.51	\$78.04
7/30/2010	J. KUTSCHER	PILING	1	\$19.51	\$19.51
7/31/2010	J. KUTSCHER	PILING	4	\$19.51	\$78.04
7/22/2010	J. MUMFORD	CUTTING	4	\$19.51	\$78.04
7/25/2010	J. MUMFORD	CUTTING	3	\$19.51	\$58.53
SOFT MATCH TOTAL-			70 HOURS	X \$19.51	1,365.70

EQUIPMENT

DATE	EQUIPMENT	HOURS/DAYS	RATE	TOTALS
9/21/2010	CHIPPER	8	\$40.00	\$320.00
9/21,22/10	FUEL (LHFPD)			\$43.00
9/22/2010	TORCH FUEL (J. KUTSCHER)			\$30.00
TOTAL EQUIPMENT COST-				\$393.00

TOTAL LHFPD COST- \$1,049.00

TOTAL SOFT MATCH- \$1,365.70



Boulder County

Zoom In Full View

Zoom Out Pan

Search **Layers**

Parcels

Search by:
Address

Enter street number
or range e.g.
1345, 1300-1499,
(blank)

Enter street name
(ignore case and omit
"n", "s", "rd", "ave", "st"
etc.):

Click or
press enter

Other Layers

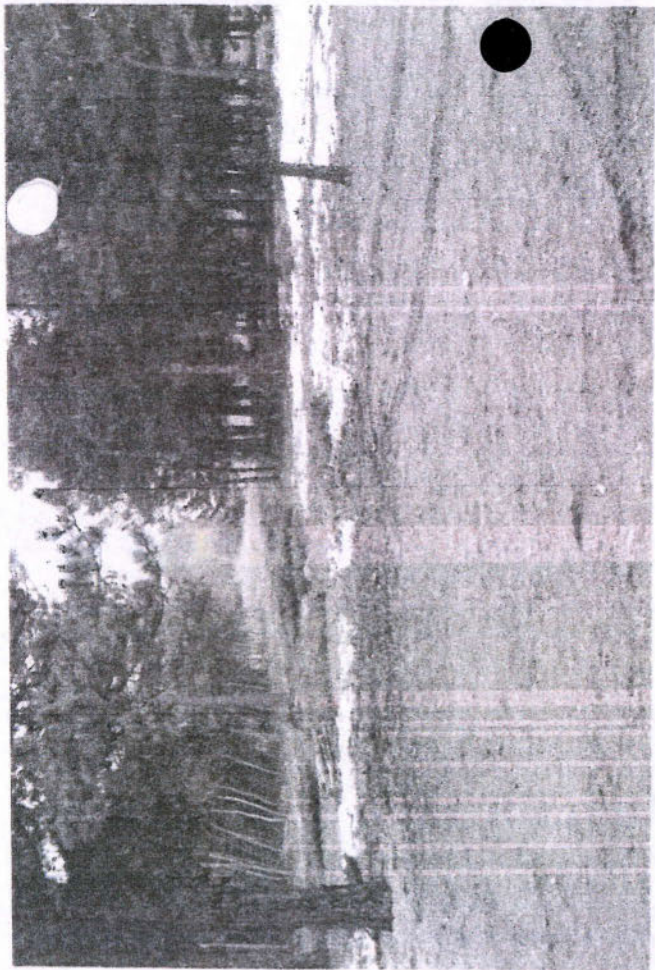
Approximate area: 1.63 acres

ROCK LAKE RD

SPUR CT

© 2009 Boulder County, Colorado (Aerial Photographs: Spring/Summer, 2006)

Questions or Comments email webmaster



(C)





C



DAVISON MITIGATION COST SHEET

788 ROCK LAKE RD.

WARD, CO 80481

LABOR

DATE	EMPLOYEE	HOURS	RATE	TOTALS
11/3/2009	GROFF	2.5	\$19	\$47.50
11/3/2009	CAYLOR	2.5	\$19	\$47.50
11/3/2009	STOFFEL	1	\$20	\$20
Total LHFPD Labor-				\$115.00

SOFT MATCH				
10/17/2009	M. AIROLA	1.5	\$19.51	\$29.26
10/17/2009	J. AIROLA	1.5	\$19.51	\$29.26
10/10/2009	B. DAVISON	3	\$19.51	\$58.53
10/11/2009	B. DAVISON	3	\$19.51	\$58.53
10/16/2009	B. DAVISON	3	\$19.51	\$58.53
10/19/2009	B. DAVISON	0.5	\$19.51	\$9.75
10/16/2009	R. DAVISON	3	\$19.51	\$58.53
10/18/2009	R. DAVISON	1	\$19.51	\$19.51
10/19/2009	R. DAVISON	1.5	\$19.51	\$29.26
		18 HOURS	X \$19.51	\$351.16

EQUIPMENT

DATE	EQUIPMENT	HOURS/DAYS	RATE	TOTALS
11/3/2009	CHIPPER	2.5 HOURS	\$40	\$100
11/3/2009	4158 P/U	1 DAY	\$50	\$50
Equipment Totals-				\$150

TOTAL LFFPD COST OF LABOR AND EQUIPMENT- **\$265.00**

SOFT MATCH- **\$351.16**



Left Hand Fire Protection District
900 Lefthand Canyon Drive
Boulder CO 80302
(720) 214-0560
(720) 214-0559 (Fax)

PROPOSAL FOR MITIGATION WORK

Customer Name: PAUL AND CLAIRE ROZINEK Phone: (303) 459-9045
Address: 902 ROCK LAKE R.
City, ST Zip: JAMESTOWN, CO 80481
E-Mail: _____

Description of work:

CHIP SLASH GENERATED FROM MITIGATION WORK

1.41 AC

Total Amount: \$ 569.00

Property Owner Permission to Perform Mitigation Work and Mutual Release of Liability

I give my permission for trees on my property marked by representatives of Left Hand Fire Protection District (LHFPD) to be removed by LHFPD. I will inform LHFPD of any known hazards that might be affected, prior to the cutting of any trees on the property.

I also warrant that I have the legal right and authority to grant access to the property for the purpose of performing the work described above.

Further, I understand that LHFPD will waive any claims against me for injuries to its personnel or equipment that may suffer as a result of performing the work on my property (except for injuries or damages caused by my intentional acts), and that the liability of LHFPD to me is governed by the Colorado Governmental Immunity Act.

- ☐ Check here if you wish to keep the logs for your personal use, NOT FOR RESALE
☐ Check here if you do not wish to keep the logs.

Signed _____, Homeowner
Printed _____, Homeowner
_____, Address
_____, Phone Number

ROZINEK MITIGATION COST SHEET

902 ROCK LAKE RD.
JAMESTOWN, CO 80481

LABOR

DATE	EMPLOYEE	HOURS	RATE	TOTALS
9/10/2009	GROFF	4	\$19	\$76
9/10/2009	CAYLOR	4	\$19	\$76
9/10/2009	MIGNERY	4	\$19	\$76
9/10/2009	FARRELL	4	\$19	\$76
9/10/2009	STOFFEL	4	\$20	\$80
TOTAL LHFPD LABOR HOURS-		20		\$384.00

SOFT MATCH

9/7/2009	J. ROZINEK	8	\$19.51	\$156.08
9/7/2009	P. ROZINEK	8	\$19.51	\$156.08
TOTAL SOFT MATCH HOURS-		16 X \$19.51		\$312.16

EQUIPMENT

DATE	EQUIPMENT	HOURS/DAYS	RATE	TOTALS
9/10/2009	CHIPPER	4	\$40	\$160.00
9/10/2009	4158 P/U	4	\$25	\$25.00
TOTAL EQUIPMENT COST-				\$185.00

TOTAL LHFPD LABOR AND EQUIPMENT COST- \$569.00

TOTAL SOFT MATCH- \$312.16

OLD SKI RD. MITIGATION COST SHEET

BAR K ASSOCIATION
P.O. BOX 264
JAMESTOWN, CO, 80455

LABOR

DATE	EMPLOYEE	HOURS	RATE	TOTAL
10/22/2009	GROFF	12	\$19.00	\$228.00
10/23/2009	GROFF	8	\$19.00	\$152.00
12/2/2009	GROFF	8	\$19.00	\$152.00
12/3/2009	GROFF	8	\$19.00	\$152.00
12/14/2009	GROFF	8	\$19.00	\$152.00
12/15/2009	GROFF	8	\$19.00	\$152.00
10/22/2009	CAYLOR	8	\$19.00	\$152.00
10/23/2009	CAYLOR	8	\$19.00	\$152.00
12/2/2009	CAYLOR	8	\$19.00	\$152.00
10/22/2009	STOFFEL	12	\$20.00	\$240.00
10/23/2009	STOFFEL	8	\$20.00	\$160.00
10/27/2009	STOFFEL	2	\$20.00	\$40.00
11/11/2009	STOFFEL	4	\$20.00	\$80.00
12/14/2009	STOFFEL	8	\$20.00	\$160.00
12/15/2009	STOFFEL	8	\$20.00	\$160.00
12/18/2009	STOFFEL	4	\$20.00	\$80.00
7/12/2010	STOFFEL	3	\$20.00	\$60.00
10/29/2009	FARRELL	8	\$19.00	\$152.00
11/11/2009	FARRELL	5	\$19.00	\$95.00
11/15/2009	FARRELL	6	\$19.00	\$114.00
12/1/2009	FARRELL	3	\$19.00	\$57.00
12/2/2009	FARRELL	5	\$19.00	\$95.00
12/14/2009	FARRELL	8	\$19.00	\$152.00
12/15/2009	FARRELL	8	\$19.00	\$152.00
12/16/2009	FARRELL	5	\$19.00	\$95.00
TOTAL LHFPD LABOR COST-				\$3,336.00

SOFT MATCH

DATE	EMPLOYEE	HOURS	RATE	TOTAL
9/23/2009	J. KUTSCHER	6	\$19.51	\$117.06
9/24/2009	J. KUTSCHER	8	\$19.51	\$156.08
9/26/2009	J. KUTSCHER	4	\$19.51	\$78.04

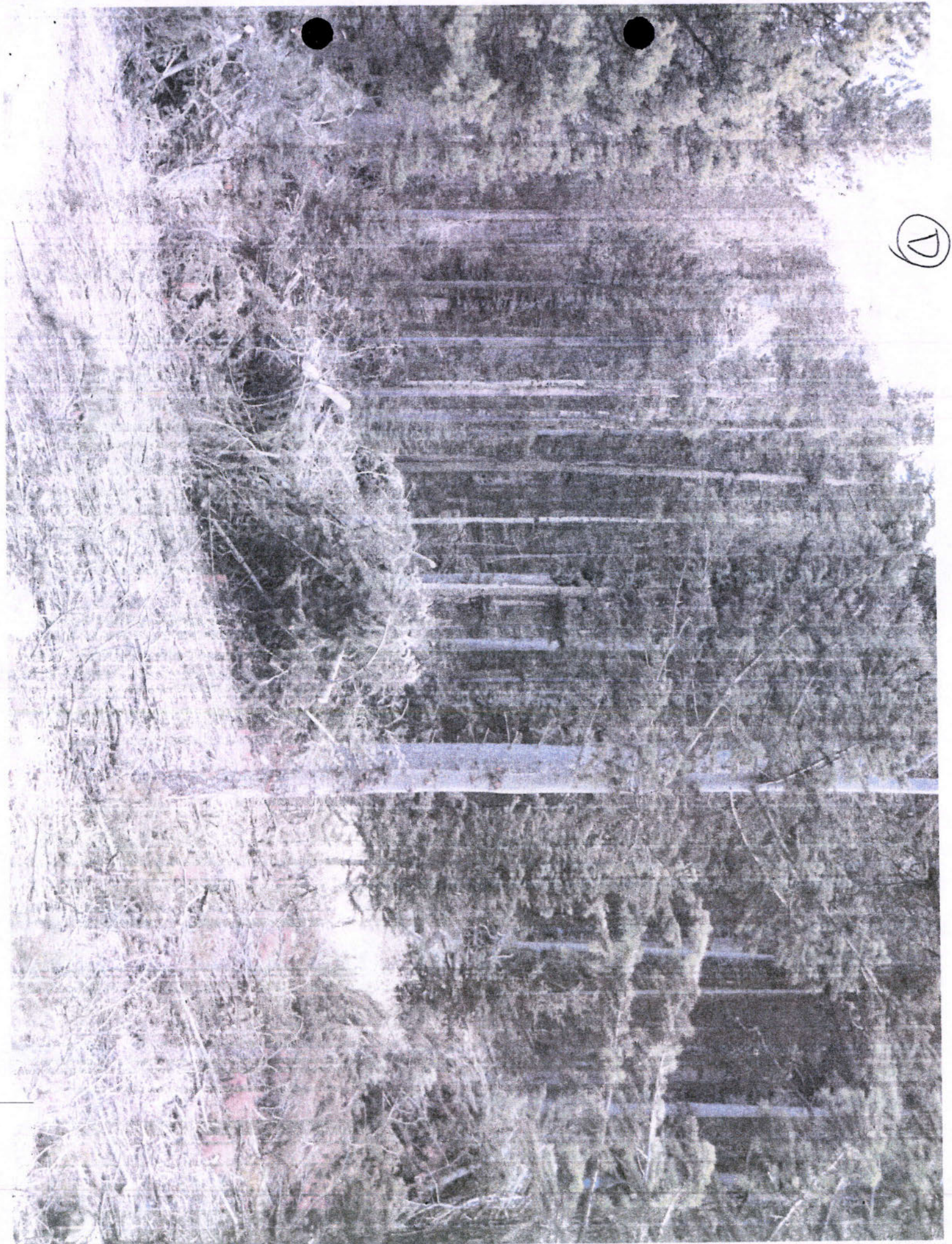
9/27/2009	J. KUTSCHER	4	\$19.51	\$78.04
10/1/2009	J. KUTSCHER	3	\$19.51	\$58.53
10/2/2009	J. KUTSCHER	5	\$19.00	\$97.55
10/3/2009	J. KUTSCHER	3	\$19.51	\$58.53
10/22/2009	J. KUTSCHER	12	\$19.51	\$234.12
12/2/2009	J. KUTSCHER	8	\$19.51	\$156.08
12/14/2009	J. KUTSCHER	8	\$19.51	\$156.08
12/15/2009	J. KUTSCHER	8	\$19.51	\$156.08
12/18/2009	J. KUTSCHER	8	\$19.51	\$156.08
12/18/2009	C. RYAN	4	\$19.51	\$78.04
12/18/2009	B. FOSTER	4	\$19.51	\$78.04
SOFT MATCH HOURS-		85 HOURS	X \$19.51	\$1,658.35

EQUIPMENT

DATE	EQUIPMENT	HOURS/DAYS	RATE	TOTAL
ALL	FUEL (SAWS, TORCH, VEHICLE)			\$80.00
	TOTAL LHFPD EQUIPMENT			\$80.00

TOTAL LHFPD COST LABOR AND EQUIPMENT \$3,416.00

TOTAL SOFT MATCH HOURS- \$1,658.35





(D)





(D)



A



AFTER



BEFORE

LOWER VALLEY LAKE AREA

BAR-K ASSOCIATION

JED SMITH RD

317 RANCH RD.

JAMESTOWN, CO 80481

LABOR

DATE	EMPLOYEE	TASK	HOURS	RATE	TOTALS
8/14/2009	J. KUTSCHER	BUILD PILES	4	\$19.51	\$76.00
8/15/2009	J. KUTSCHER	BUILD PILES	4	\$19.51	\$76.00
8/16/2009	J. KUTSCHER	BUILD PILES	4	\$19.51	\$76.00
8/18/2009	J. KUTSCHER	BUILD PILES	4	\$19.51	\$76.00
9/1/2009	J. KUTSCHER	CUTTING	6	\$19.51	\$114.00
10/15/2009	J. KUTSCHER	CUTTING	4	\$19.51	\$76.00
10/16/2009	J. KUTSCHER	BUILD PILES	4	\$19.51	\$76.00
10/18/2009	J. KUTSCHER	BUILD PILES	6	\$19.51	\$114.00
10/22/2010	J. KUTSCHER	CUTTING	3	\$19.51	\$58.53
10/23/2010	J. KUTSCHER	CUTTING	3	\$19.51	\$58.53
10/24/2010	J. KUTSCHER	CUTTING	4	\$19.51	\$76.00
10/26/2010	J. KUTSCHER	BUILD PILES	3	\$19.51	\$58.53
10/28/2010	J. KUTSCHER	BUILD PILES	4	\$19.51	\$76.00
10/30/2010	J. KUTSCHER	BUILD PILES	6	\$19.51	\$114.00
11/1/2010	J. KUTSCHER	BUILD PILES	4	\$19.51	\$76.00
11/2/2010	J. KUTSCHER	CUTTING	4	\$19.51	\$76.00
11/4/2010	J. KUTSCHER	BUILD PILES	6	\$19.51	\$114.00
11/10/2010	J. KUTSCHER	BUILD PILES	3	\$19.51	\$58.53
11/17/2010	J. KUTSCHER	BURNING PILES	5	\$19.51	\$97.55
11/27/2010	J. KUTSCHER	BUILD PILES	2	\$19.51	\$39.02
2/14/2011	J. KUTSCHER	BURNING PILES	4	\$19.51	\$76.00
3/8/2011	J. KUTSCHER	BURNING PILES	4	\$19.51	\$76.00
8/8/2011	J. KUTSCHER	CUTTING	6	\$19.51	\$114.00
8/9/2011	J. KUTSCHER	CUTTING	2	\$19.51	\$39.02
			99 HOURS	X \$19.51	\$1,891.71
11/4/2010	J. AIROLA	BUILD PILES	6	\$19.51	\$114.00
11/17/2010	J. AIROLA	BURNING PILES	5	\$19.51	\$97.55
			11 HOURS	X \$19.51	\$211.55
TOTAL SOFT MATCH HOURS-			110 HOURS	X \$19.51	\$2,146.10

BELOW VALLEY LAKE F



Claudia Kutscher

From: "Claudia Kutscher" <claud1@fullsignal.net>
To: "Claudia Kutscher" <claud1@fullsignal.net>
Sent: Wednesday, October 27, 2010 5:29 PM
Attach: IMG_0448.JPG; IMG_0451.JPG
Subject: 2 pictures for you

You have been sent 2 pictures.

IMG_0448.JPG
IMG_0451.JPG

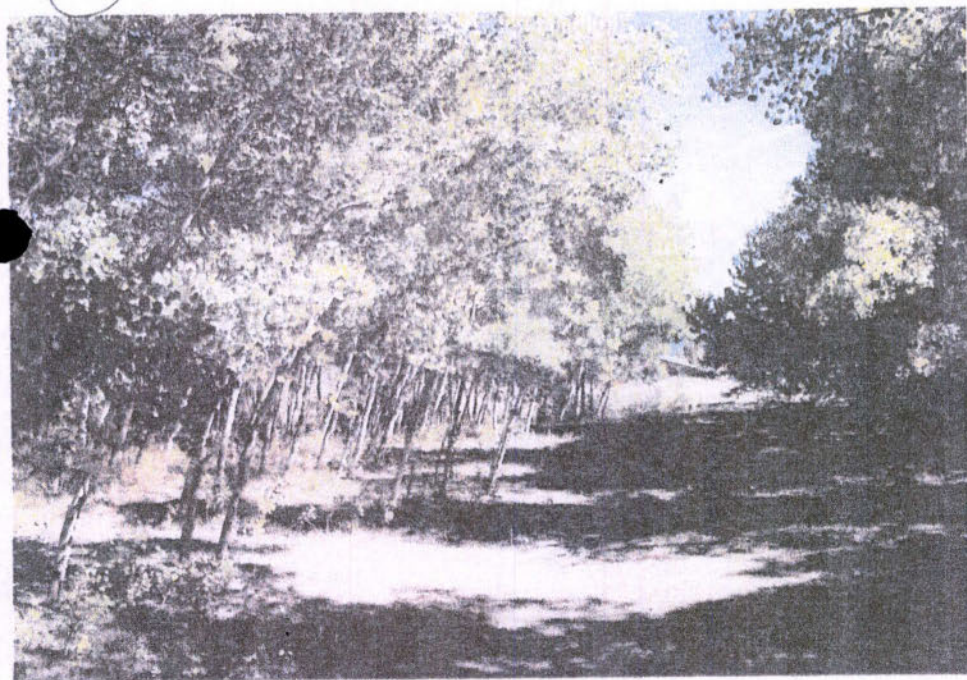
These pictures were sent with Picasa, from Google.
Try it out here: <http://picasa.google.com/>





CUT ALL
30' x 480
FIRE DOT EATING
CHIPPED STUMP OF
LIND

(2) GATE S.W. CORNER / ACCESS TO 30' EASEMENT



(2)



(3) BELOW VALLEY LAKE



(3) BELOW VALLEY LAKE (BEFORE CUTTING) (F)

MCVEY MITIGATION COST SHEET

12 TILGHMAN RD.
WARD, CO 80481

LABOR

DATE	EMPLOYEE	HOURS	RATE	TOTALS
9/15/2009	GROFF	4	\$19.00	\$76.00
9/16/2009	GROFF	4	\$19.00	\$76.00
		8	X \$19.00	\$152.00
9/15/2009	CAYLOR	4	\$19.00	\$76.00
9/16/2009	CAYLOR	4	\$19.00	\$76.00
		8	X \$19.00	\$152.00
9/15/2009	STOFFEL	4	\$20.00	\$80.00
9/16/2009	STOFFEL	4	\$20.00	\$80.00
		8	X \$20.00	\$160.00
9/15/2009	FARRELL	4	\$19.00	\$76.00
9/16/2009	FARRELL	4	\$19.00	\$76.00
		8	X \$19.00	\$152.00

TOTAL HOURS- 32 HOURS \$616.00

EQUIPMENT

DATE	EQUIPMENT	HOURS/DAYS	RATE	TOTALS
9/15/2009	CHIPPER	4	\$40.00	\$160.00
9/16/2009	CHIPPER	4	\$40.00	\$160.00
9/15,16/09	FUEL		\$23.00	\$23.00
EQUIPMENT TOTAL-				\$343.00

TOTAL PROJECT COST \$959.00

Completed 9/15/09
V# 7996



Left Hand Fire Protection District
900 Lefthand Canyon Drive
Boulder CO 80302
(720) 214-0560
(720) 214-0559 (Fax)

Grant Project Code
BANK 10

PROPOSAL FOR MITIGATION WORK

Customer Name: Vickey McVey Phone: (303) 459-3052
Address: _____
City, ST Zip: _____
E-Mail: _____

Description of work:

Labor, Materials & Equipment to mitigate
wildland fire fuels and create defensible
space at the above address.

50% Grant
50% Property Owner

Total Amount: \$ 500

Property Owner Permission to Perform Mitigation Work and
Mutual Release of Liability

I give my permission for trees on my property marked by representatives of Left Hand Fire Protection District (LHFPD) to be removed by LHFPD. I will inform LHFPD of any known hazards that might be affected, prior to the cutting of any trees on the property.

I also warrant that I have the legal right and authority to grant access to the property for the purpose of performing the work described above.

Further, I understand that LHFPD will waive any claims against me for injuries to its personnel or equipment that may suffer as a result of performing the work on my property (except for injuries or damages caused by my intentional acts), and that the liability of LHFPD to me is governed by the Colorado Governmental Immunity Act.

- ☒ Check here if you wish to keep the logs for your personal use, NOT FOR RESALE
☐ Check here if you do not wish to keep the logs.

Signed Vickey McVey Homeowner
Printed _____ Homeowner
_____, Address
_____, Phone Number

PAID



PAID

DATE	INVOICE #
6/24/2011	579

[illegible]



Left Hand Fire Protection District
PO Box 156
Jamestown, CO 80455
(720) 214-0560
(720) 214-0559 (Fax)

Date: 5/26/11

PROPOSAL FOR MITIGATION WORK

Customer Name: MIKE THURMAN Phone: 303-678-2976
Address: 754 THORNWOOD CIRCLE
City, ST Zip: LONGMONT CO 80503
E-Mail:

Description of project (defensible space/wildfire mitigation, chipping, misc. treatments):

166 BRAMER - FIRE MITIGATION, FELL 2 TREES,
CHIPPING, LOT 42 OVERLAND 1.27AC

Item/Description	Hours	Rate	TOTAL
Labor			
5/26/11 - MIKE	8	25.	\$ 200.
6/23/11 - MIKE	2	25.	\$ 50.
Equipment			
CHIPPER,	24	40.	\$ 960.
TRUCK, SAW			\$ 50.
Materials			\$
			\$ 400.
GRAND TOTAL:			\$ 1650.

Property Owner Permission to Perform Mitigation Work and
Mutual Release of Liability

I will inform LHFPD of any known hazards that might be affected, prior to the chipping work described above on the property

I also warrant that I have the legal right and authority to grant access to the property for the purpose of performing the work described above.

I understand that the LHFPD chipper operator is allowed to feed material into the chipper. Additional personnel may stand or stage material for the LHFPD chipper operator.

Further, I understand that LHFPD will waive any claims against me for injuries to its personnel or equipment that may suffer as a result of performing the work on my property (except for injuries or damages caused by my intentional acts), and that the liability of LHFPD to me is governed by the Colorado Governmental Immunity Act.

Signed:

Mike Thurman

Printed:

MIKE THURMAN

LH Invoice # 579
(mailed 6/26/11)



DATE	INVOICE #
10/6/2011	592

[illegible]



Left Hand Fire Protection District
PO Box 156
Jamestown, CO 80455
(720) 214-0560
(720) 214-0559 (Fax)

#592
(e-mailed)

Date: 8/4/11

PROPOSAL FOR MITIGATION WORK

Customer Name: TOM STOFFEL Phone: _____
Address: 646 ROCK LAKE RD. BAR K
City, ST Zip: BOULDER, CO, 80302
E-Mail: _____

Description of project (defensible space/wildfire mitigation, chipping, misc. treatments):
CUT + CHIP DEAD TREES.

Item/Description	Hours	Rate	TOTAL
Labor			
MIKE - 7/28/11 - CUT + CHIP TREES.	4	25.	\$ 100.
MIKE - 7/29/11 - "	8	25.	\$ 200.
			\$
Equipment			
P/U TRUCK 4158 + SAWS			\$
CHIPPER			\$
Materials			
			\$
			\$
1.25 Ac		GRAND TOTAL:	\$ 300.00

Property Owner Permission to Perform Mitigation Work and
Mutual Release of Liability

+ 375 - P. Bleiljo
\$ 6.75

I will inform LHFPD of any known hazards that might be affected, prior to the chipping work described above on the property.

I also warrant that I have the legal right and authority to grant access to the property for the purpose of performing the work described above.

I understand that the LHFPD chipper operator is allowed to feed material into the chipper. Additional personnel may hand or stage material for the LHFPD chipper operator.

Further, I understand that LHFPD will waive any claims against me for injuries to its personnel or equipment that may suffer as a result of performing the work on my property (except for injuries or damages caused by my intentional acts), and that the liability of LHFPD to me is governed by the Colorado Governmental Immunity Act.

Signed _____

Printed _____

STOFFEL MITIGATION COST SHEET

646 ROCK LAKE RD.

JAMESTOWN, CO 80481

LABOR

DATE	EMPLOYEE	HOURS	RATE	TOTALS
5/26/2010	GROFF	8	\$19.00	\$152.00
5/27/2010	GROFF	4	\$19.00	\$76.00
5/28/2010	GROFF	8	\$19.00	\$152.00
		20 HOURS	X 19.00	\$380.00

BLEIL MITIGATION COST SHEET

648 ROCK LAKE RD.
JAMESTOWN, CO 80455

LABOR

DATE	EMPLOYEE	HOURS	RATE	TOTALS
8/1/2011	MARZANO	4	\$19.00	\$76.00
8/2/2011	MARZANO	4	\$19.00	\$76.00
8/3/2011	MARZANO	6	\$19.00	\$114.00
14 HOURS X \$19.00				\$266.00

EQUIPMENT

DATE	EQUIPMENT	HOURS	RATE	TOTAL
8/1/2011	CHIPPER	4	\$40.00	\$160.00
8/2/2011	CHIPPER	4	\$40.00	\$160.00
8/3/2011	CHIPPER	6	\$40.00	\$240.00
8/1/2011	4158 P/U	1 DAY	\$50.00	\$50.00
8/2/2011	4158 P/U	1 DAY	\$50.00	\$50.00
8/3/2011	4158 P/U	1 DAY	\$50.00	\$50.00
TOTAL EQUIPMENT COST-				\$710.00

SOFT MATCH				
DATE	EMPLOYEE	HOURS	RATE	TOTALS
9/3/2011	KUTSCHER	4	\$19.51	\$78.04
9/4/2011	KUTSCHER	4	\$19.51	\$78.04
9/7/2011	KUTSCHER	6	\$19.51	\$117.06
9/10/2011	KUTSCHER	4	\$19.51	\$78.04
9/4/2011	J. AIROLA	4	\$19.51	\$78.04
9/10/2011	J. AIROLA	4	\$19.51	\$78.04
DONATED TIME-		26 HOURS X \$19.51	\$507.26	

TOTAL LHFPD COST \$976.00

SOFT MATCH \$507.26

LOT 14



Left Hand Fire Protection District
PO Box 156
Jamestown, CO 80455
(720) 214-0560
(720) 214-0559 (Fax)

#591
(mailed hand copy)

Date: 8/4/11

PROPOSAL FOR MITIGATION WORK

Customer Name: PATTY BLEIL Phone: 303-459-3388
Address: 648 ROCKLAKE RD. BAR K
City, ST Zip: _____
E-Mail: _____

Description of project (defensible space/wildfire mitigation, chipping, misc. treatments):
CUT + CHIP 15 DEAD TREES BY TOMS HOUSE.
TOM MADE AGREEMENT FOR \$50. PER TREE.

Item/Description	Hours	Rate	TOTAL
Labor			
MIKE - 8/1/11 - CUT + CHIP TREES	4		\$
MIKE - 8/2/11 - "	4		\$
MIKE - 8/3/11 - "	6		\$
Equipment			
P/U TRUCK 4158 + SAWS			\$ N/C
CHIPPER			\$
Materials			
			\$
			\$
1.27 AC		GRAND TOTAL:	\$ 750.

Property Owner Permission to Perform Mitigation Work and
Mutual Release of Liability

for Tom - Bill Patty
#375.00 - Tom
will split
when

I will inform LHFPD of any known hazards that might be affected, prior to the chipping work described above on the property.
I also warrant that I have the legal right and authority to grant access to the property for the purpose of performing the work described above.

I understand that the LHFPD chipper operator is allowed to feed material into the chipper. Additional personnel may hand or stage material for the LHFPD chipper operator.

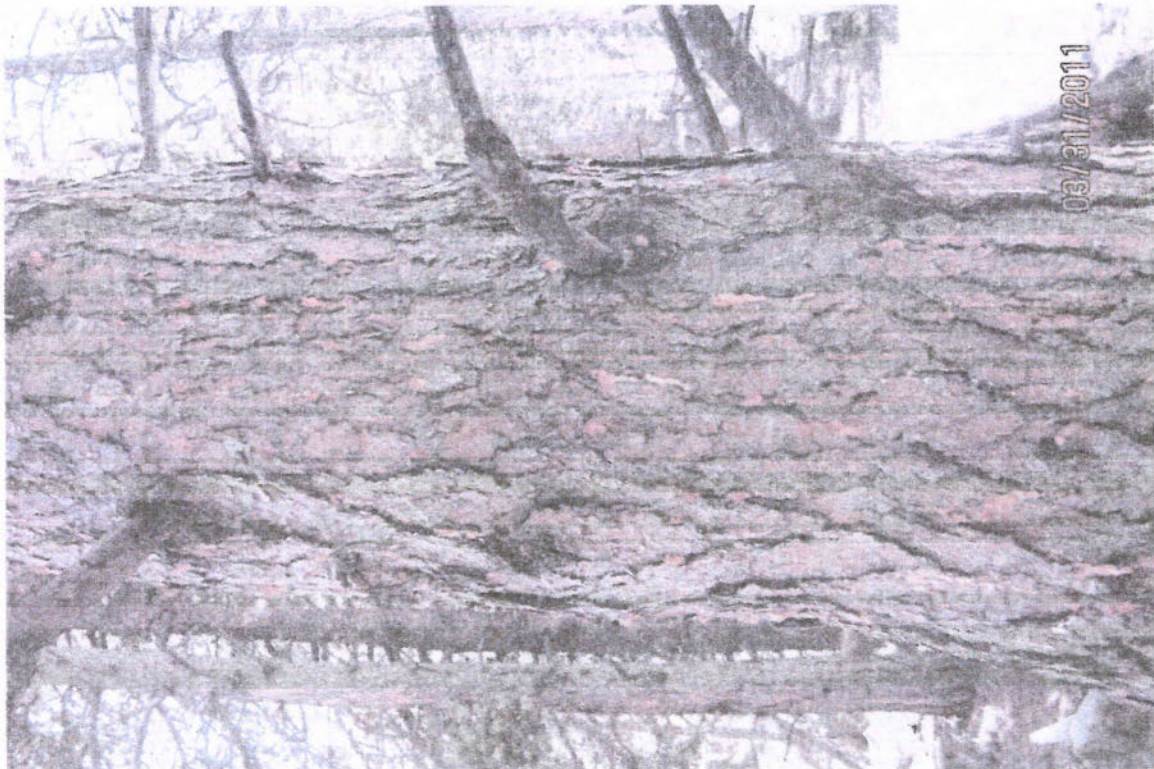
Further, I understand that LHFPD will waive any claims against me for injuries to its personnel or equipment that may suffer as a result of performing the work on my property (except for injuries or damages caused by my intentional acts), and that the liability of LHFPD to me is governed by the Colorado Governmental Immunity Act.

Signed _____

Printed _____

DIVINCINZO

BURK 30' STRIP
+ SALS LOT (E)



1.39 AC

San K 30' STRIP



AFTER CUTTING 30' STRIP
FIRE DIRT 1/11 CHIPPED
SLASH

Box K 30' STRIP (Before Cutting) (E)



+ →
SALS
1 Acre lot
to work



SALS D
Hillside

Before Cutting



W. OF
SKE RD
BARK

(D)



BELOW
PENNYLAKE
F