



LANDOWNER ASSISTANCE PROGRAMS  
APPLICATION FOR COST-SHARE

Form A

PROJECT NUMBER: \_\_\_\_\_  
(For Official Use Only)

NAME: RIC SOULEN  
MAILING ADDRESS: 15850 STEWARTS RIDGE RD,  
City: LOVELAND State: CO  
Zipcode: 80538  
TELEPHONE NO: 970 214-3943

PROJECT ADDRESS/LEGAL DESCRIPTION: SAME

PRACTICES TO BE COMPLETED BY: 9-15-08

Date

Landowner and CSFS forester:

CSFS forester:

Practice No. & Component Title	Quantity Requested	Quantity Approved	Maximum C/S Amount eligible	C/S Amount Requested	C/S Amount Approved
<u>660-1</u>	<u>1/2 AC.</u>				
<u>660-3</u>	<u>1/2 AC.</u>				
<u>660</u>	<u>1/2 AC.</u>				
		Total:			<u>\$450<sup>00</sup></u>

Request for cost-share assistance under the LOA program is to meet the objective stated in the management plan. **CSFS forester: make sure the correct program is checked below.** One practice per application is allowed. If cost-sharing is approved for the practice requested, I agree to cover expenses at the time of implementation, knowing I will be receiving cost-share funds not exceeding 50% of actual cost. **I understand that I will not be reimbursed for any expenses incurred prior to approval of my application.** Work must be completed according to approved plan and application, and must meet the standard set for each component. For FLEP and I & D, practices must be maintained for a minimum of 10 years. There are no partial payments.

LANDOWNER SIGNATURE: [Signature] DATE: 1-7-08

To be completed by CSFS forester:

CSFS FIELD REVIEW SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Additional USFWS guidelines addressed)

PROGRAM: WUI Incentives D-space: \_\_\_\_\_ FLEP: \_\_\_\_\_  
I & D Prevention and Suppression – Bark Beetle: \_\_\_\_\_  
FRFTP: \_\_\_\_\_ Stevens' Funds: \_\_\_\_\_ SFA: \_\_\_\_\_

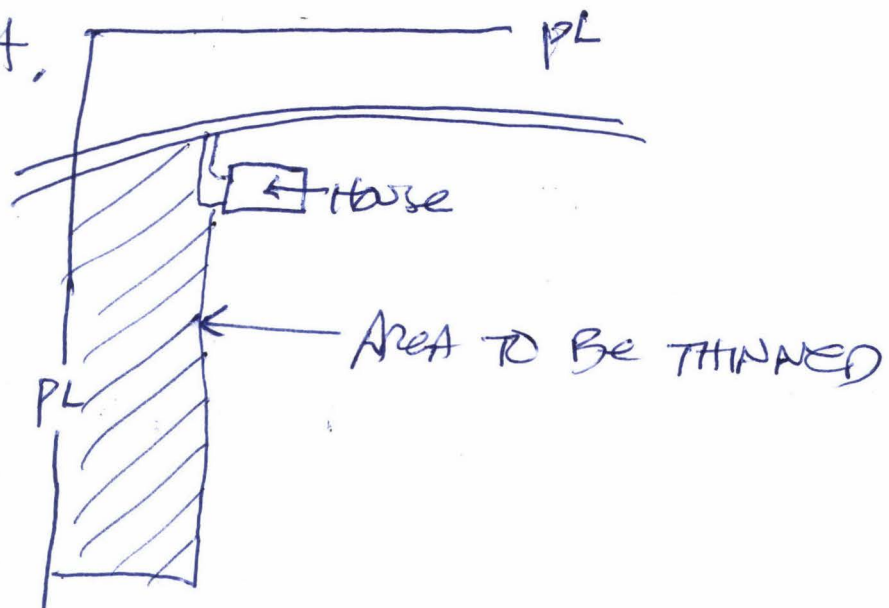
C/S Allocated: [Signature] AMOUNT: \$450<sup>00</sup> DATE: 1/18/08  
CSFS District Forester

Program eligibility is without regard to race, color, religion, national origin, age, gender, sexual orientation, veteran status or disability. For more information contact your local Colorado State Forest Service District Office.

Hi Mike —

THANKS FOR THE OPPORTUNITY TO  
CONTINUE OUR FLEP WORK HERE ON  
THE RIDGE!

As you know, last summer I  
WORKED HARD TO COMPLETE THE WORK  
LEFT OVER FROM THE LAST SEVERAL  
YEARS, PRIMARILY CLEARING SLASH.  
THIS YEAR we would like to  
COMPLETE THE THINNING / DEFENSIBLE  
SPACE ON THE SOUTH SIDE OF THE  
HOUSE (WHICH WE HAD PLANNED TO DO LAST YEAR  
BUT NEVER GOT TO), IT IS THE LAST  
SECTION LEFT NEAR THE HOUSE. Here's  
A SKETCH,



THANKS AGAIN! — RIC AND JULIE



Fort Collins District  
5060 Campus Delivery  
Fort Collins, Colorado 80523-5060  
(970) 491-8660  
FAX: (970) 491-8645

January 18, 2008

Ric Soulen  
15850 Stellers Ridge Rd.  
Loveland, CO 80538

Dear Ric:

Your Landowner Assistance Program application has been reviewed. The amount approved is shown on the attached copy of your application. Our office received nearly \$90,000 in grant requests. We were only able to partially fund projects and some were not funded at all.

This grant requires a 50/50 fund match. The project must be completed September 1, 2008. If it becomes apparent you will not be able to complete the project by this day, please contact our office as soon as possible.

Enclosed you will also find an Accomplishment Report and a Cost Documentation form. Upon completion of the practice, contact our office to schedule a final inspection. All costs and revenues must be documented on these forms. Final reimbursement cannot be processed without completion of these forms.

If you have any questions or concerns, please call me at (970) 491-8453. Thank you for your interest in the stewardship of your forest and in our Landowner Assistance Program.

Sincerely,

A handwritten signature in cursive script, reading "Michael M. Hughes".

Michael M. Hughes  
Assistant District Forester  
Fort Collins District

Enclosures





**LANDOWNER ASSISTANCE PROGRAMS  
ACCOMPLISHMENT REPORT FOR REIMBURSEMENT**

Project No. 536790-FC

(For Official Use Only-

No. from original application)

Applicant name (please print): Ric Soulen

	Total Contracted Services <sup>1</sup>	Total Landowner Services <sup>2</sup>	Totals
Labor Cost		<del>940<sup>24</sup></del> \$1412.78	A Labor Cost= \$1412.78 <del>940<sup>24</sup></del>
Operating Exp <sup>3,*</sup>		90 <sup>38</sup>	B Oper. Exp.= 90 <sup>38</sup>
Revenue Generated (from sale of wood products only) <sup>4,*</sup>			C Revenue= —
Project Cost			D Total Project \$1503.16 (A+B-C) = <del>1030.62</del>
			Amount Originally Approved = 500 <sup>62</sup>
How much of your total cost was paid to CSFS for Products and/or Services? \$ <u>0</u>			Amount to be Reimbursed <sup>5</sup> (.5XD) \$500.00

<sup>1</sup> Any contracted services where payment was made for services.

<sup>2</sup> Use up to \$ 11.68 for Landowner time. This is the maximum allowable.

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

<sup>4</sup> Any revenue generated from the sale of wood products is deducted from total project cost.

<sup>5</sup> Reimbursement amount cannot exceed amount approved. There are no partial payments for FLEP or without prior approval.

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

Landowner Signature: [Signature]

Date: 9/14/07

Mailing Address: 15850 STELLER RIDGE

City: LOVELAND

County: WAZI State: CO Zip: 80538

Phone: 970-214-3943

Practice certified by: [Signature]

CSFS Service Representative

Payment Approval: \_\_\_\_\_ Amount: \_\_\_\_\_ Date: \_\_\_\_\_

CSFS

Return this form, along with your completed Cost Documentation Form to your local **Colorado State Forest Service District Office**.  
Landowner Assistance Program funds may be reportable as taxable income. Please consult your tax advisor.

LANDOWNER ASSISTANCE PROGRAMS  
ACCOMPLISHMENT REPORT (page 2)

Project No. 536790-FC

*Southern*

To be completed by CSFS forester:

**PROGRAM:**

WUI Incentives D-space: X I & D Prevention and Suppression – Bark Beetle: \_\_\_\_\_  
FLEP: \_\_\_\_\_ FRFTP: \_\_\_\_\_ STEVENS' Fund: \_\_\_\_\_ SFA: X

**WUI D-space Accomplishment:**

No. of D-spaces = \_\_\_\_\_ Acres slash disposal = \_\_\_\_\_ Acres fuel breaks = \_\_\_\_\_  
Acres thinned = 1 Acres pruned = \_\_\_\_\_

**I & D Prevention and Suppression Accomplishment:**

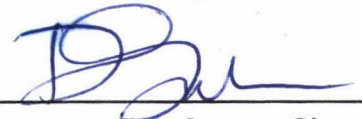
No. of infested trees treated: \_\_\_\_\_  
Acres inspected and treated: \_\_\_\_\_  
Acres thinned: \_\_\_\_\_

**FLEP Accomplishment (Not included above):**

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

# 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 \$11.68/hr. Separate expenses by component (activity). Attach receipts.



Landowner Signature

Date	By Whom:	Activity/Expense:	Hours	Expenses
6/4	owner	SLASH	1.5	
6/15	"	"	2.0	
6/16	"	"	3.5	
6/19	"	"	2.0	
6/27	"	THINNING	2.5	
6/28	"	"	2.5	
7/5	"	SLASH	2.0	
7/8	"	THINNING	1.0	
7/11	"	"	2.5	
7/18	"	SLASH	2.0	
7/19	"	THINNING/SLASH	2.0	
7/25	"	"	2.0	
7/26	"	SLASH	3.0	
7/29	"	"	2.5	
8/1	"	"	2.0	
8/2	"	THINNING	2.0	
8/8	"	"	2.5	
8/9	"	SLASH	3.5	
8/12	"	"	3.0	
8/22	"	"	3.0	
8/23	"	THINNING / SLASH	4.0	
8/29	"	"	1.5	
8/30	"	"	2.0	
9/3	"	"	3.5	
9/5	"	"	3.0	
9/6	"	SLASH	2.5	
9/7	"	"	3.0	
9/9	"	SLASH	3.0	
9/12	"	"	4.0	
9/13	"	"	3.5	
9/14	"	"	3.5	

28 7/25

44 hrs  
8/12

60.5

CHAIN, GAS, OIL, SHARPENING → 90.38

80.5 HRS.  
x 11.68 17.55  
940.24 1,412.78



BATH POWER EQUIPMENT  
1505 TIMBERLINE RD  
FT COLLINS, CO 80524  
(970) 484-5024

Date.....: 08-29-07 15:28:50  
Invoice #....: 072671, Page 1  
Customer #...: CASH  
Salesperson..: 17  
P.O. #.....:

BILL TO: CASH  
C A S H

SHIP TO:  
C A S H

- INVOICE -  
TERMS: CASH

MFR	PART/MODEL #	DESCRIPTION	QTY SLD	QTY B/O	PRICE	NET	TOTAL	T   S X   O
STI	26RS 81E	26RS 81E CHAIN LOOP	1	0	42.65	42.65	42.65	T
STI	0781 319 8014	2.6 OZ. 1 GALLON MIX	1	0	2.69	2.69	2.69	T

25% RESTOCKING FEE ON ALL RETURNS. NO RETURNS ON SPECIAL ORDER ITEMS  
LABOR GAURANTEED FOR 30 DAYS FROM NOTIFICATION. THANK YOU FOR YOUR PATRONAGE

SUBTOTAL	45.34
TAX	3.04
INVOICE TOTAL	48.38
(CCard) AMOUNT TENDERED	48.38
CHANGE	0.00

RECEIVED BY: \_\_\_\_\_

+ 42<sup>00</sup>  
SHARPENING  
(CAN'T FIND  
RECEIPT!)



## Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Bureau of Land Management Task Order Program	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Forest Land Enhancement Program (a.k.a.: FLEP)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input 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"/>

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

09-25-07  
KC

Name: RIC SOULEN

Address: 15850 STELLER RIDGE  
LOVELAND, CO 80538

**Approved for Payment  
C.S.F.S.**

A795482  
09-25-07  
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: 536790-FC Cooperator Match: \$1,003.16

Approved Funding: \$500.00 Total Project: \$1,503.16

CSFS Account Number: 536790-5980 Amount of Payment: \$500.00

Circle one:    1<sup>st</sup> Payment    2<sup>nd</sup> Payment    3<sup>rd</sup> Payment    Final Payment

Approved by   
 (Program manager signature)

Date: 9/27/07



2021

V SOULEN RIC  
E 15850 STELLER RIDGE RD  
N LOVELAND CO 80538  
D  
O  
R

Contact: SUNDSTROM, GREG  
Phone: (970)491-6303  
Department: CO State Frst Svc

TO:

Item #	Description	Qty	UOM	Unit Price	Extension	Acct #	Sub	User
1)	FINANCIAL ASSISTANCE PROGRAM COOPERATIVE MATCH PROJECT; State Fire Assistance (SFA); 536790-FC	1	LOT	500.0000	500.00	536790	5980	
TOTAL:					\$500.00			

SIGNATURE

DATE \_\_\_\_\_