Colorado State Forest Service

Emergency Supplemental

2010 Grant Application

DISTR	ICT'S: Please Complete	
	District Submitting Project:	Boulder
	Forester Submitting Project:	Bryan Baer
	District Priority Number:	1 of 1
	Date Submitted:	8/9/10
FOR	REVIWER'S USE ONI	LY:
	Rating:	

	Applicant Information		
	Applicant:	Ellen Weihenmayer	
	Contact Person:		
1	Address:	682 Partridge Circle	
	City/Zip Code:	Golden, CO 80403	
	Phone (Work/Cell):	303-903-5442	
	Email:	Ellen@touchthetop.com	
	Fax:	303-279-8333	

				Com	munity A	At Risk	Information		
	Name of Project: Community Name(s):			Los Lagos-Weihenmayer Los Lagos					
2	Latitude (decimal degrees):			39.93 N					
		Threat Description (check all that apply)							
	Homes:	X	Numb	per of:	2		Infrastructure:	77.73	imated ue of:
	Businesses:		Numb	per of:		Eco	onomic Viability:	100000	imated ue of:
	Watersheds:	X	Numb	per of:	1	His	toric Structures:	Nun	nber of:
	Other (Desc	Other (Describe):		1-1-1-1					

3	Dollar Amount Requested May Not Exceed \$470 x Number of Acres Proposed For Treatment
	Dollar Amount Requested \$4,700.00
5	Will this Project be conducted as a Pass-Through Grant? X Yes No
	Provide a brief overview of the project and the project area. (If applying for a fuels reduction project, identify vegetation types)
	The project area is located in Gilpin County, which is almost entirely composed of lodgepole pine. Pockets of ponderosa pine are present in the project area as well. The project area is also located at higher elevations, creating difficulty for harvesting during short dry seasons. There are approximately 10 acres targeted for treatment over the next two years. Treatments will consist of a series of patch cuts (0.25-1.0 acre), as well as
	to do thinning throughout other priority areas on the property.

	Scope of Work / Project Timeline All information for the project must fit into the space provided below. Attachments will not be considered by the review committee.					
	Provide a brief scope of work that clearly describes how grant funds will be spent. (This should be more specific than the project description)					
1	The project area will be delineated and set-up by a CSFS Forester. Patch cuts and thinning areas will have a flagged boundary, but only thinning areas will have trees marked for removal. A private contractor (Joe Phillips) will act as a consultant to the landowners, and perform the majority of the project work. Contractor will be primarily dealing with the slash material through chipping, and stacking the remaining round wood for firewood use.					
	Describe all planned long-term maintenance (grant funded or other). Continued maintenance of the treated areas will be continuous, as well as removal of encroaching, undesired vegetation. Landowner will look to continue treating the remaining acres of the property as the current project gets completed to ensure a healthy, mitigated forested stand throughout.					
What is the duration of this project? (check one) 1 Year X2 Years 3 Years 4						
	Provide a timeline for the project					
	Provide a timeline for the project Year # 1: Treat approximately 5 acres closest to residence, through patch cuts and thinning. Year # 2: Treat remaining acres and finish slash work from this year and previous year.					
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	Project Category (check all that apply and answer related questions) Hazard Fuels Reduction X Other Forest Management Treatment					
477						
6	Number of acres to be treated:	10.0	Estimated cost per acre:	\$1,000.0	0	
0	Project Type (check all that apply)					
	Defensible Space	X	Thinning w/o P	roduct		
	Fuelbreak	X	Mast	ication		
	Thinning w/ Product	X		Other		

		Total Project Expense	e (Pass Through)	
	Please fill all fields	Grant Share (\$ Amount Requested)	TOTAL	
7	Contractual Services:	\$4,700.00	\$ 10,000.00	
	TOTAL:	\$4,700.00	\$ 10,000.00	

Grant funding may only be used for Contractual Service.

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

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

Attach Project Map Showing Specific Treatment Areas

Weihenmayer



Created By: Bryan Baer CSFS-BO District August, 2010

Patch_Cut

All Gilpin roads



EMERGENCY SUPPLEMENTAL FUNDS LANDOWNER ASSISTANCE PROGRAMS APPLICATION

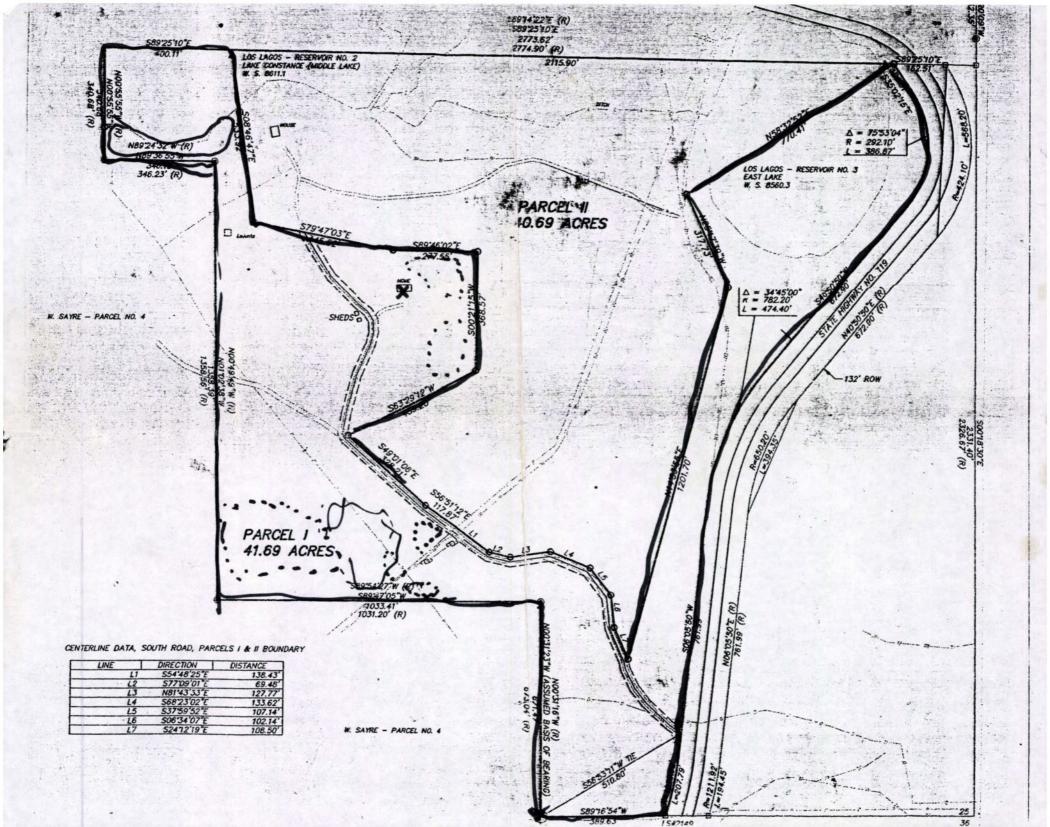
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	golden	State: CO		
Zip code	702 122 90 26			
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		Date		
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	Practice No. &	Quantity	Quantity	
	Component Title	Requested	Approved	
		-		
			Total:	
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objective stated in the n I understand that I wi application. Work mus standard set for each co	sistance under the Emerger nanagement plan. I will not li not be reimbursed for a t be completed according to imponent. Practices must be approved on a case by case	at receive more the any expenses ince to approved plan be maintained for	an the actual c urred prior to and application	approval of my and must meet the 10 years. Requests for
LANDOWNER SIG	NATURE: Ellen W	ihenmane	n	DATE: 7.29.10
To be completed by C				
1000 00		21/	-1-11	DATE, 8/20/201
CSFS FIELD REVI		5		DATE: 8/20/201
(Additional USFWS guide	elines addressed)			
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PROGRAM				
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Funding Allocated:	Allullo_	AMOU	NT:\$ 4700.00	DATE: 8/9/10
(SFS District Forester			
Program alloibility is without	t regard to race, color, religion, t	national origin, age,	gender, sexual orie	entation, veteran status or
disability. For more informati	tion contact your local Colorado	State Porest Service	District Other.	

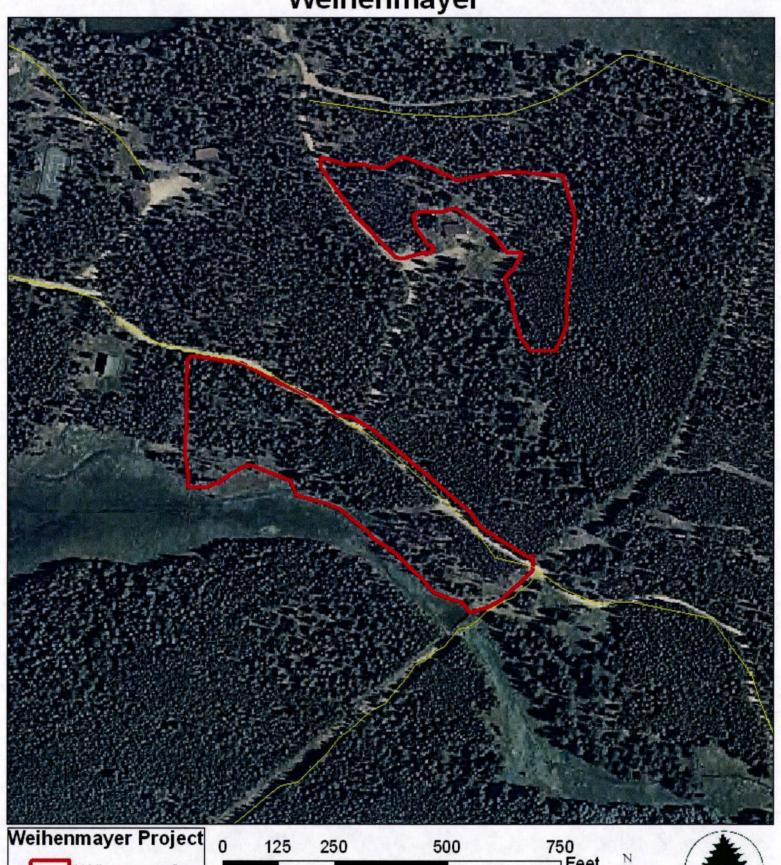
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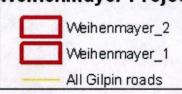
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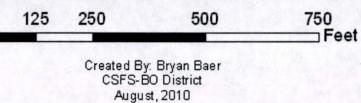
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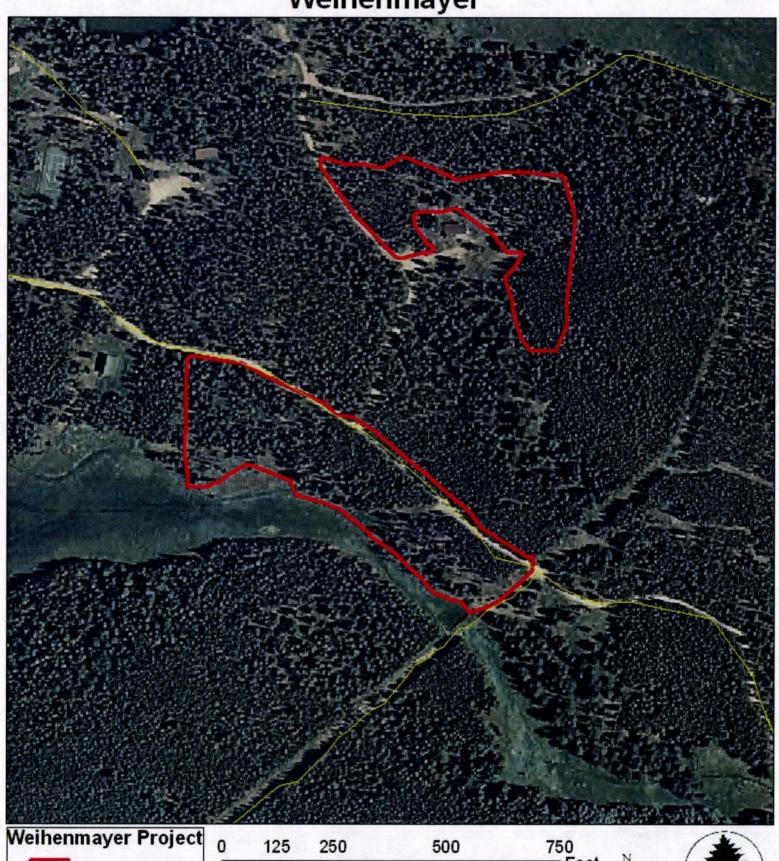


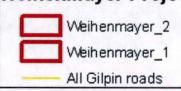


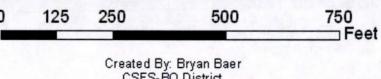




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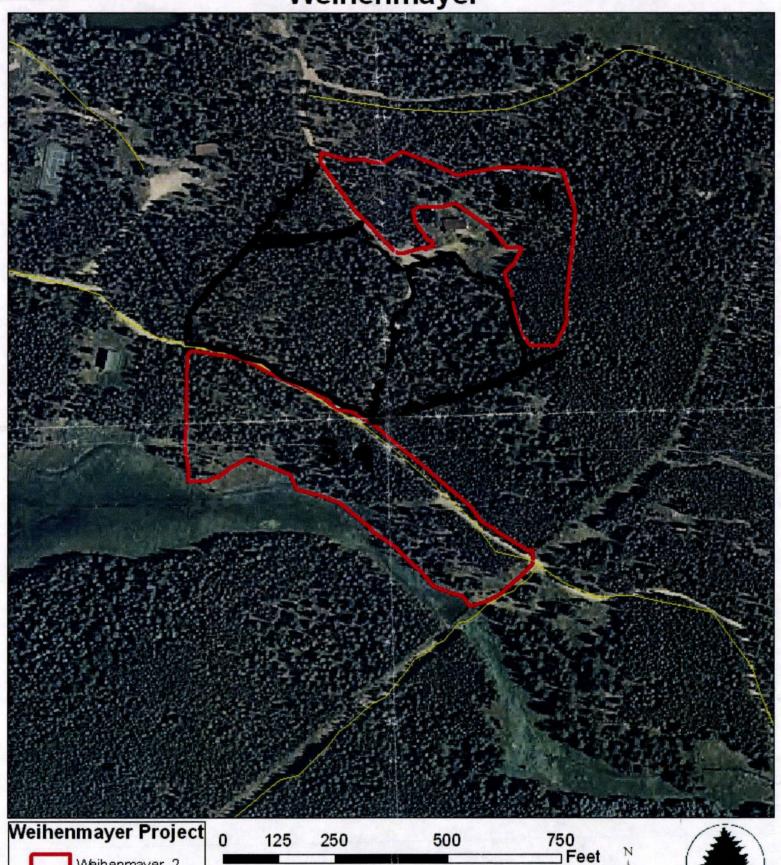
Created By: Bryan Baer CSFS-BO District August, 2010

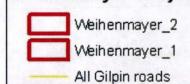




2.4+3.9= [.3] Need -> 3.7

Weihenmayer





Created By: Bryan Baer CSFS-BO District

August, 2010





Hi, Allen and Bryan.
These copies are for
your Boulder District
Office files.

Best regards, Karen Carlin (970) 491-3006





Colorado State Forest Service Program Payment Request

	GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
	Bureau of Land Management Task Order Program	
	Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	
	Forest Land Enhancement Program (a.k.a.: FLEP)	
	Insect and Disease Prevention and Suppression Program	
	State Fire Assistance (a.k.a.: SFA)	
	Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	
	Stevens Fuels Treatment Funds	
	Cooperative Fire Agreement (Active Fire Suppress on Cooperators; CRS#R-24-103-206-01)	
	Emergency Supplemental Funds (a.k.a.: ESF)	K
9 9 1	Checked for Federal suspension and debarment (State Office) http://www.epls.gov	1 By 9/4/12
Name:	ELLEN WEIHENMAYER	
Address:	682 PARTRIDGE CIRCLE AD	proved for Payment
	GOLDEN, CO 80403	C.S.F.S.
	~	2042499
		(Re
The a	bove named has submitted a project application that has been revi led by the Colorado State Forest Service for funding from Federal Assistance	ewed and ce.
Grant Nur	nber: <u>5308400-Bo-04</u> ~	
Approved	Funding: \$ 4,700.00 N Total Project: \$ 14,460	.00
CSFS Acco	ount Number: 5308400 - 6693 Amount of Payment: \$2,5	350. ~ N
Circle one	1 st Payment 2 nd Payment 3 rd Payment Final Payment	
Approved	by	

Colorado State Forest Service Colorado State University Fort Collins ~ Colorado 80523-5060 ~ (970) 491-6303 ~ FAX: (970) 491-7736

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

Project No. 5308400 Bo - 04 (For Official Use Only-No. from original application)

Applicant name (please print): Ellen Weihenmayer

	Total Contracted Services 1	Total Landowner Services ²	Totals
Labor Cost (Actual)	\$14,460.00		# 14,460.00
Operating Exp ³ . (Actual)			B Oper. Exp.=
Project Cost		a seminar	C Total Project (A+B) = 4 14, 460.00
			Amount Originally Approved
			Amount to be Reimbursed not to exceed \$470 Per Acre

¹ Any contracted services where payment was made for services.	N
² Use up to \$ 20.25/hour for Landowner time. This is the maximum allowab	ole.
³ Equipment rental, supplies, etc. needed to complete project. (Tools and Eq	
⁴ Reimbursement amount cannot exceed amount approved. Requests for par	tial payments will be considered on a case by case basi
⁵ Reimbursement amount cannot exceed \$470 acres for Emergency Supplem	nental Funds.
* Attach receipts, Cost Documentation Form D-ES (contractor costs, your ti	me ledger, gas, oil, etc). Keep copies for your files.
Oll. Anil.	3 27 12
Landowner Signature: Ellen Weihenmager	Date: 8-23.12
All expenses are true and accurate and all cost share is true and accurate.	
Mailing Address: 682 Partridge Circle	City: Golden
	City: OO7
County: Jefferson State: CO Zip: 80403	Phone: 303 273 9076
	Thome
Practice certified by: BRYAN BAER (BB)	
CSFS forester	
Payment Approval: Amount &	6/20/17
Payment Approval: Amount: 4	2,350.00 Date: 8/30/12
est's program manager	

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

01/19/10

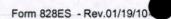


EMERGENCY SUPPLEMENTAL FUNDS LANDOWNER ASSISTANCE PROGRAMS ACCOMPLISHMENT REPORT (page 2)

Project No. 5308400-80-04

PF	ROGRAM:				EDAME
W	UI Incentives D-space: STEVENS' I storation Grant (SB71 and H	Fund:	SFA:ESF:_		Hrz. Fues RED.
	I D-space Accomplishment:				
No	of D-spaces =	Acres slash dis	posal =	Acres fuel break	cs =
1	Acres thinned =	Acres pruned			
	No. of infested Acres inspected Acres thinned:	trees treated:			
1	Plan Acres =	#5	Acres =	#9	Acres treated =
	Acres tree planting =	#6	Acres treated =	#10	Acres of restoration =
	Acres treated =	#7	Acres treated =	#11	Acres =
		40	Acres treated		
3	Acres treated =	#0	Acres dealed		







Colorado State Forest Service Program Payment Request

Rureau	of Land Manag	gement Task Or	rder Progra	m			
Durcau							
Volunte	er or Rural Fire	Assistance (a.	k.a.: VFA/R	FA)			
Forest L	and Enhancen	nent Program (a	a.k.a.: FLEF)			
Insect a	nd Disease Pre	evention and S	uppression	Program	****	To the	7 12
State Fi	e Assistance (a.k.a.: SFA)		The state of			
Front Ra	inge Fuels Trea	atment Partner	ship (a.k.a.	: FRFTP)			
Stevens	Fuels Treatme	ent Funds	2003-				
	tive Fire Agree 206-01)	ement (Active Fi	ire Suppres	sion Coo	perators; (CRS#R-	
Emerge	ncy Supplemer	ntal Funds (a.k.	a.: ESF)				X
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		DEN, C					
wed by the mber: 5	GOL: amed has su the Colorado St 308400 - F 1: \$ 4,70 mber: \$308	bmitted a protate Forest Ser	oject applrvice for fu	ication tonding from	hat has om Federa	Assista	0.°

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

Project No. 5308400 - Bo - o4
(For Official Use OnlyNo. from original application)

Applicant name (please print): Ellen Weihenmayer

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	\$14,460.00		# 14,460.00
Operating Exp ³ , (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = # 14, 460.
			Amount Originally Approved
			Amount to be Reimbursed not to exceed \$470 Per Acre

Any contracted services where payment was made for services. ² Use up to \$ 20.25/hour for Landowner time. This is the maximum allowable. ³ Equipment rental, supplies, etc. needed to complete project. (Tools and Equipment purchases are not reimbursable.) ⁴ Reimbursement amount cannot exceed amount approved. Requests for partial payments will be considered on a case by case basis. ⁵ Reimbursement amount cannot exceed \$470/acres for Emergency Supplemental Funds. * Attach receipts, Cost Documentation Form D-ES (contractor costs, your time ledger, gas, oil, etc). Keep copies for your files. Landowner Signature: Ellen Weihenmager Date: 8-23.12 All expenses are true and accurate and all cost share is true and accurate. City: Golden Mailing Address: 682 Partridge Circle Phone: 303 273 9076 County: Jefferson State: CO Zip: 80403 Practice certified by: BAYAN BAER Date: Payment Approval: Amount: CSFS program manager

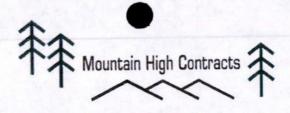
Return this form, along with your completed Cost Documentation Form to your local <u>Colorado State Forest Service District Office</u>. Retain documentation such as receipts and payment for six (6) years. The IRS considers reimbursable funds as ordinary income. Please consult your tax advisor.

01/19/10

Project No. 5306400-B0-04

To be completed by CSFS forester: 5.0 ACRES PROGRAM: WUI Incentives D-space: _____ I & D Prevention and Suppression - Bark Beetle: _____ HAZ. FUELS RED FRFTP: STEVENS' Fund: SFA: ESF: Forest Restoration Grant (SB71 and HB1199): WUI D-space Accomplishment: No. of D-spaces = Acres slash disposal = Acres fuel breaks = Acres thinned = Acres pruned = I & D Prevention and Suppression Accomplishment: No. of infested trees treated: Acres inspected and treated: Acres thinned: Accomplishment (Not included above) - LOA Practice Number: #9 Acres treated = #5 Acres =____ #1 Plan Acres =____ #10 Acres of restoration = #6 Acres treated = #2 Acres tree planting =____ #11 Acres = #7 Acres treated =____ Acres treated =____ #8 Acres treated = #3 Acres treated = #4 Acres planted renovated =





Phone# 303-203-3442. Date 6-4-2012

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	· CK#		
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All claims and returned goods MUST be accompanied by this invoice within 30 days.

Note: Total Invoice payment is due within 10 days of completion of work or date of delivery. Late fees of 2% will apply monthly on all amounts not received within 15 days of invoice date.

Rec'd by

Order# 2 3 68

Thank you

VISA

TOTAL



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Phone#

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		TOTAL	2700						

All claims and returned goods MUST be accompanied by this invoice within 30 days.

Note: Total Invoice payment is due within 10 days of completion of work or date of delivery. Late fees of 2% will apply monthly on all amounts not received within 15 days of invoice date.

Rec'd by

Order# 2 > 1 9

Thank you





Date 6 - 30 2012



Phone# 3 1 2 442 Date 7-17-2013

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		TOTAL	2,00	11.1

Note: Total Invoice payment is due within 10 days of completion of work or date of delivery. Late fees of 2% will apply monthly on all amounts not received within 15 days of invoice date.

Rec'd by

Order#

Thank you







Order#	23	11	Phone#	303-	963-	5442	Date	3-4-2012
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Address	642	Parto	. 2/2 2	1	1.1=	Colden	,60	80403

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All claims and returned goods MUST be accompanied by this invoice within 30 days.

Note: Total Invoice payment is due within 10 days of completion of work or date of delivery. Late fees of 2% will apply monthly on all amounts not received within 15 days of invoice date.

Rec'd by

Thank you

VISA





Phone# 303-905-5442

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To it	Sec. 9910		
		TAX	

All claims and returned goods MUST be accompanied by this invoice within 30 days.

Note: Total Invoice payment is due upon completion of work or date of delivery. All checks for payment will be made payable to: Joe Phillips. Checks returned by the bank due to insufficient funds are subject to a \$35 fee plus collection costs.

Rec'd by

Order#

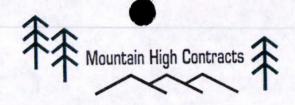
Thank you

VISA

TOTAL



Date 8-16-2012



Order# 2347	Phone#313-903-5442	Datelo - 4-2012
Name Ellen & Er	K Weihenmayer	ALE SALES
Address 682 Porti	dye Circle Golden, Co	80403

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		TOTAL	16000

All claims and returned goods MUST be accompanied by this invoice within 30 days.

Note: Total Invoice payment is due within 10 days of completion of work or date of delivery. Late fees of 2% will apply monthly on all amounts not received within 15 days of invoice date.

Rec'd by

Thank you





1-9-12

Hi. Allen and Bryan.

This copy is for your Boulder

District Office files.

Best regards.

Karen Carlon

(970) 491-3006





Colorado State Forest Service Program Payment Request

	GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):		
	Bureau of Land Management Task Order Program		
	Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)		
	Forest Land Enhancement Program (a.k.a.: FLEP)		
	Insect and Disease Prevention and Suppression Program		
	State Fire Assistance (a.k.a.: SFA)		
	Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)		
	Stevens Fuels Treatment Funds		
	Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)		Topic State
	Emergency Supplemental Funds (a.k.a.; ESF)	X	
me:	ELLEN WEIHENMAYER 682 PARTRIOGE CIRCLE		
		ppro	ved for Pay
	~	-	648035
			12-30-11
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approv	above named has submitted a project application that has been reved by the Colorado State Forest Service for funding from Federal Assistantes: 5308400 - 80 - 04 ~ [Funding: # 4,700,60 N Total Project: # 12,50]	ince.	d and
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Colorado State University Fort Collins ~ Colorado 80523-5060 ~ (970) 491-6303 ~ F

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

Project No. 5308400 - Bo- 04

(For Official Use OnlyNo. from original application)

Applicant name (please print): Eilen Weihenmayer

Total Total Totals Contracted Landowner Services 1 Services² A Labor Cost= \$ 12,500.00 Labor Cost \$ 12,500.00 (Actual) B Oper. Exp.= Operating Exp³, (Actual) **Project Cost** C Total Project (A+B) =\$12,500.00 Amount Originally Approved = 4.700.00 Amount to be Reimbursed not to exceed \$470 Per Acre \$ 2,350.00

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

Landowner Signature: Ellen Weinmuy Date: 12.8.11

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

Mailing Address: 682 Partridge Circle City: 60/dem

County: State: CO Zip: 80403 Phone: 3032739076

Practice certified by: Bryon BAER (BB)

CSFS forester

Payment Approval: Amount: 52,350.00 Date: 12/35/4

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



01/19/10

¹ Any contracted services where payment was made for services.

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

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

⁴ Reimbursement amount cannot exceed amount approved. Requests for partial payments will be considered on a case by case basis. ⁵ Reimbursement amount cannot exceed \$470/acres for Emergency Supplemental Funds.



Colorado State Forest Service Program Payment Request

	GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
	Bureau of Land Management Task Order Program	
	Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	
	Forest Land Enhancement Program (a.k.a.: FLEP)	116
	Insect and Disease Prevention and Suppression Program	
	State Fire Assistance (a.k.a.: SFA)	
	Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	
	Stevens Fuels Treatment Funds	
	Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	
	Emergency Supplemental Funds (a.k.a.: ESF)	×
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EMERGENCY SUPPLEMENTAL FUNDS LANDOWNER ASSISTANCE PROGRAMS ACCOMPLISHMENT REPORT FOR REIMBURSEMENT (Page 1)

Project No. 5308400 Bo- 04
(For Official Use OnlyNo. from original application)

Applicant name (please print): Eilen Weihen mayor

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	\$ 12,500.00	A	# 12,500.00
Operating Exp ^{3,*} (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = # 12,500.00
			Amount Originally Approved =
			Amount to be Reimbursed not to exceed \$470 Per Acre

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

01/19/10

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

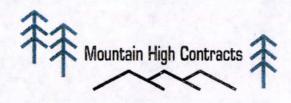
Project No. 5308400 - Bo - 04

To be completed by CSFS forester:

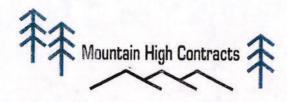
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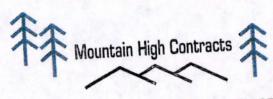


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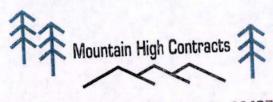
Note: Total Invoice payment is due within 10 days of completion of work or date of delivery. Late fees of 2% will apply monthly on all amounts not received within 15 days of invoice date.

Rec'd by

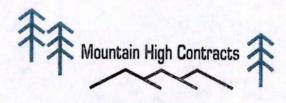
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