

FILE COPY

***** FILE COPY NON-NEGOTIABLE *****

Original

Date Requested: 01/23/08

V EDWIN LUCIA
E FORT COLLINS DISTRICT OFFICE
N COLORADO STATE FOREST SERVICE
D FOOTHILLS CAMPUS DELIVERY 5060
O FORT COLLINS CO 80523-5060
R

COPY

S COLORADO STATE UNIVERSITY
H CENTRAL RECEIVING
I REFERENCE DOCUMENT NUMBER: AFE 406188
P FORT COLLINS CO 80523-6011

Contact: HOMANN, RICH
Phone: (970)491-3006
Department: CO State Frst Svc

TO:

Financial Assistance Program
DOCUMENT DENIED Appr: KFRASIER - 01/24/2008 02:13

Item #	Description	Qty	UOM	Unit Price	Extension	Acct #	Sub	User
1)	FINANCIAL ASSISTANCE PROGRAM COOPERATIVE MATCH PROJECT; State Fire Assistance (a.k.a. SFA); Project # 530944-07-FC; 07 CPG SFA NFP CG 4	1	LOT	1000.0000	1000.00	530944	5980	
TOTAL:					\$1,000.00			

FINAL PAYMENT OF \$949.00

Payment Request Processed
10-09-08
FORM 828 ATTACHED

NOTIFY THE DEPARTMENT
IMMEDIATELY IF THERE ARE
ANY EXCEPTIONS TO THIS AFE

SIGNATURE

DATE



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)	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)	

Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/> 09-26-08
KC

Name: Ed Lucia

Address: P.O. Box 934
La Porte, CO 80535

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

A 406188

KC
10-08-08

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: 530944-07-FC Cooperator Match: \$ 949.00

Approved Funding: \$ 1,000.00 Total Project: \$ 1,898.00

CSFS Account Number: 530944-5980 Amount of Payment: \$ 949.00

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

Approved by Jane M Lopez Date: 10/1/08
(Program manager signature)

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

Project No. 530944
(For Official Use Only-
No. from original application)

Applicant name (please print): ED LUCIA

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	26.5 x 70 1630.00 N	23 x 11.68 268.00 N	A Labor Cost= 1,898.00 N
Operating Exp ^{3,*} (Actual)			B Oper. Exp.=
Value of donated services and materials (not an actual cost)			C Total value of donations
Revenue Generated (from sale of wood products only) ^{4,*}			D Revenue=
Project Cost	1670.00	268.00	E Total Project (A+B+C-D) = 1,898.00 N
			Amount Originally Approved = \$1000.00 N
How much of your total cost was paid to CSFS for Products and/or Services? \$ - 0 -			Amount to be Reimbursed ⁵ (.5XE) not to exceed Actual Costs \$949.00 N

¹ Any contracted services where payment was made for services.

² Use up to \$ 11.68/hour for Landowner and volunteer time. This is the maximum allowable.

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

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

⁵ Reimbursement amount cannot exceed amount approved. No partial payments.

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

Landowner Signature: [Signature]

Date: 9/22/08

Mailing Address: PO Box 934

City: LAPORTE

County: LARIMER State: CO Zip: 80535

Phone: 970 4825462

Practice certified by: [Signature]
CSFS forster

Payment Approval: [Signature]
CSFS program manager

Amount: \$949.00 Date: 10/1/08

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

LANDOWNER ASSISTANCE PROGRAMS
ACCOMPLISHMENT REPORT (page 2)

Project No. 530944

To be completed by CSFS:

PROGRAM:

WUI Incentives D-space: _____

FLEP: _____

I & D Prevention and Suppression – Bark Beetle: _____

WUI D-space Accomplishment:

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

Acres thinned= 2 Acres pruned= _____

I & D Prevention and Suppression Accomplishment:

No. of infested trees treated: _____

Acres inspected and treated: _____

Acres thinned: _____

FLEP Accomplishment:

#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 = _____		



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TOTAL:					\$1,000.00			

ENCUMBERED

NOTIFY THE DEPARTMENT
IMMEDIATELY IF THERE ARE
ANY EXCEPTIONS TO THIS AFE

SIGNATURE

DATE

CSFS REQUEST FOR SUPPLIES OR SERVICES (other than GSA)

CSFS # 805 Rev. 02/04/05

A 406188

Date: <u>1/15/08</u>	Requested By: <u>M. Hughes</u>	Resale to: _____	CSFS Invoice #: _____
Vendor: <u>Fort Collins District</u> <u>COLO. STATE FOREST SERVICE, BLDG. 1052</u> <u>FOOTHILLS CAMPUS DELIVERY 5060</u> <u>CSU, FT. COLLINS, CO 80523</u> (PLEASE PROVIDE COMPLETE ADDRESS)		Ship To: _____ _____ _____ _____ (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: ENCUMBERED
---	---------------------------------

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	536624	5980			Rawah Ranch LLC/ Pat Timmins		3600. ⁰⁰
2	536624	5980			Carroll V. SoRelle		2,400. ⁰⁰
3	split:				34 Applicants -- See Attached		
4	536624	5980			Spreadsheet		11,200. ⁰⁰
5	RA 530944	5980					20,730. ⁰⁰
6					PLEASE ENCUMBER		
7							
8							
9							
10							

SPECIAL INSTRUCTIONS:	Expenditure Approval: Authorized Signature: <u>M. Hughes</u> Date: <u>1/15/08</u>	Subtotal: \$ _____ Discount: \$ _____ TOTAL: \$ _____
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**LOA Grant 2008
Fort Collins District**

Funding Distribution & Project Tracking

Applicant	FLEP Practice	FLEP Code	Qty Requested	C/S Amount Requested	C/S Amount Approved	Acres Treated (Completed)	Date Inspected	Payment Amount
13) Hargrave, Darwin	Thinning	666-1	2	\$1,000.00	\$1,000.00	A 406173		
Hargrave, Darwin	Chipping	666-2	2	\$600.00				
Hargrave, Darwin	Defensible Space	666-6.302	2	\$2,400.00				
14) Herrmann, Ray	Thinning	666-1	3	\$750.00	\$750.00	} 1,050 - A 406177		
Herrmann, Ray	Slash Hauling	666-3	2	\$300.00	\$300.00			
15) Janssen, Marvin	Fuelbreak	394-2	1	\$1,000.00	\$1,000.00	A 406182		
16) King, Robert	Thinning	666-1	10	\$5,000.00	\$1,000.00	A 406183		
King, Robert	Slash Burning	338-3	10	\$1,000.00				
17) Lucia, Edwin	Thinning	666-1	3	\$1,500.00	\$1,000.00	A 406188		
Lucia, Edwin	Slash Burning	338-3	3	\$300.00				
18) Martin, Tim	Slash Burning	338-3	5	\$500.00	\$500.00	A 406189		
Martin, Tim	Chipping	666-2	2	\$600.00				
Martin, Tim	Defensible Space	666-6.302	2	\$2,400.00				
Martin, Tim	Thinning	666-1	4	\$2,000.00	\$500.00	A 406190		
19) Merriman, Joanna	Thinning	666-1	2	\$1,000.00	\$1,000.00	A 406192		
20) Milus, Gene	Fuelbreak	394-2	1.5	\$1,500.00	\$1,000.00	A 406225		
21) Moore, Randy	Thinning	666-1	1	\$480.00	\$480.00	} \$730 - A 406227		
Moore, Randy	Chipping	666-2	1	\$250.00	\$250.00			
22) Myers, Estes Park	Thinning	666-1	3	\$1,500.00	\$1,000.00	A 406228		
Myers, Estes Park	Chipping	666-2	3	\$900.00				
23) Pickens, John	Thinning	666-1	4	\$2,000.00	\$1,000.00	A 406230		
24) Reading, John	Pruning	660	5	\$375.00				
Reading, John	Thinning	666-1	5	\$2,500.00	\$1,000.00	A 406231		
Reading, John	Chipping	666-2	5	\$1,500.00				
Reading, John	Defensible Space	666-6.302	1	\$1,000.00				
25) Ronca, Carlie	Pruning	660	3.25	\$243.00				
Ronca, Carlie	Thinning	666-1	3.25	\$1,625.00	\$1,000.00	A 406232		
Ronca, Carlie	Slash Burning	338.3	9.75	\$975.00				
26) Snyder, Glenn	Pruning	660	4	\$300.00				
Snyder, Glenn	Thinning	666-1	2	\$1,000.00	\$1,000.00	A 406235		
Snyder, Glenn	Chipping	666-2	2	\$600.00				
Snyder, Glenn	Slash Hauling	666-3	2	\$600.00				
27) Snyder, John	Thinning	666-1	15	\$7,500.00	\$1,000.00	A 406239		
Snyder, John	Chipping	666-2	15	\$4,500.00				
28) Soulen, Ric	Thinning	666-1	0.5	\$250.00	\$250.00	} \$450 - A 406243		
Soulen, Ric	Slash Hauling	666-3	0.5	\$150.00	\$150.00			
Soulen, Ric	Pruning	660	0.5	\$50.00	\$50.00			
29) Tanella, Larry	Defensible Space	666-6.302	1	\$1,200.00	\$1,000.00	A 406245		
30) Tuttle, Ron	Fuelbreak	394-2	1	\$1,000.00	\$1,000.00	A 406247		
31) Van Velson, Tom	Thinning	666-1	3	\$1,500.00	\$1,000.00	A 406249		
Van Velson, Tom	Slash Hauling	666-3	3	\$900.00				
32) Weider, Carl	Slash Burning	338-3	2	\$200.00				
Weider, Carl	Fuelbreak	394-2	3	\$3,000.00	\$1,000.00	A 406250		
33) Winn, Byron	Thinning	666-1	10	\$5,000.00	\$500.00	A 406251		
34) Young, Michael	Thinning	666-1	3	\$1,500.00	\$1,000.00	A 406254		
Young, Michael	Slash Burning	338-3	5	\$500.00				
Total:				\$88,348.00	\$31,930.00	0.00		\$0.00

530944
07 CPG SFA
MFP CG4
Totals
\$20,730



COLORADO'S
FLEP FOREST LAND
 ENHANCEMENT PROGRAM
 APPLICATION FOR COST-SHARE

PROJECT NUMBER: _____
 (For Official Use Only)

NAME: Edwin Lucia
 MAILING ADDRESS: PO Box 934
 City: Laporte State: CO
 Zipcode: 80535
 TELEPHONE NO: 970 482 5462

PROJECT ADDRESS/LEGAL DESCRIPTION: 100 Canyon Gulch Ct. Lot #3
Saddle Ridge
 PRACTICES TO BE COMPLETED BY: 9/15/07

Practice No. & Component Title	Quantity Requested	Quantity Approved	Maximum C/S Amount	C/S Amount Requested	C/S Amount Approved
<u>9-6660-1</u>	<u>5 ac</u>			<u>2500</u>	
<u>9 6660-2</u>	<u>5 ac</u>			<u>500</u>	

Total: 3000

Request for cost-share assistance under this program is to meet the objective stated in the management plan. 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. Practices must be maintained for a minimum of 10 years. There are no partial payments.

LANDOWNER SIGNATURE: [Signature] DATE: 5/10/07

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

C/S APPROVED: [Signature] AMOUNT: \$ 1000⁰⁰ DATE: 6/12/07

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.

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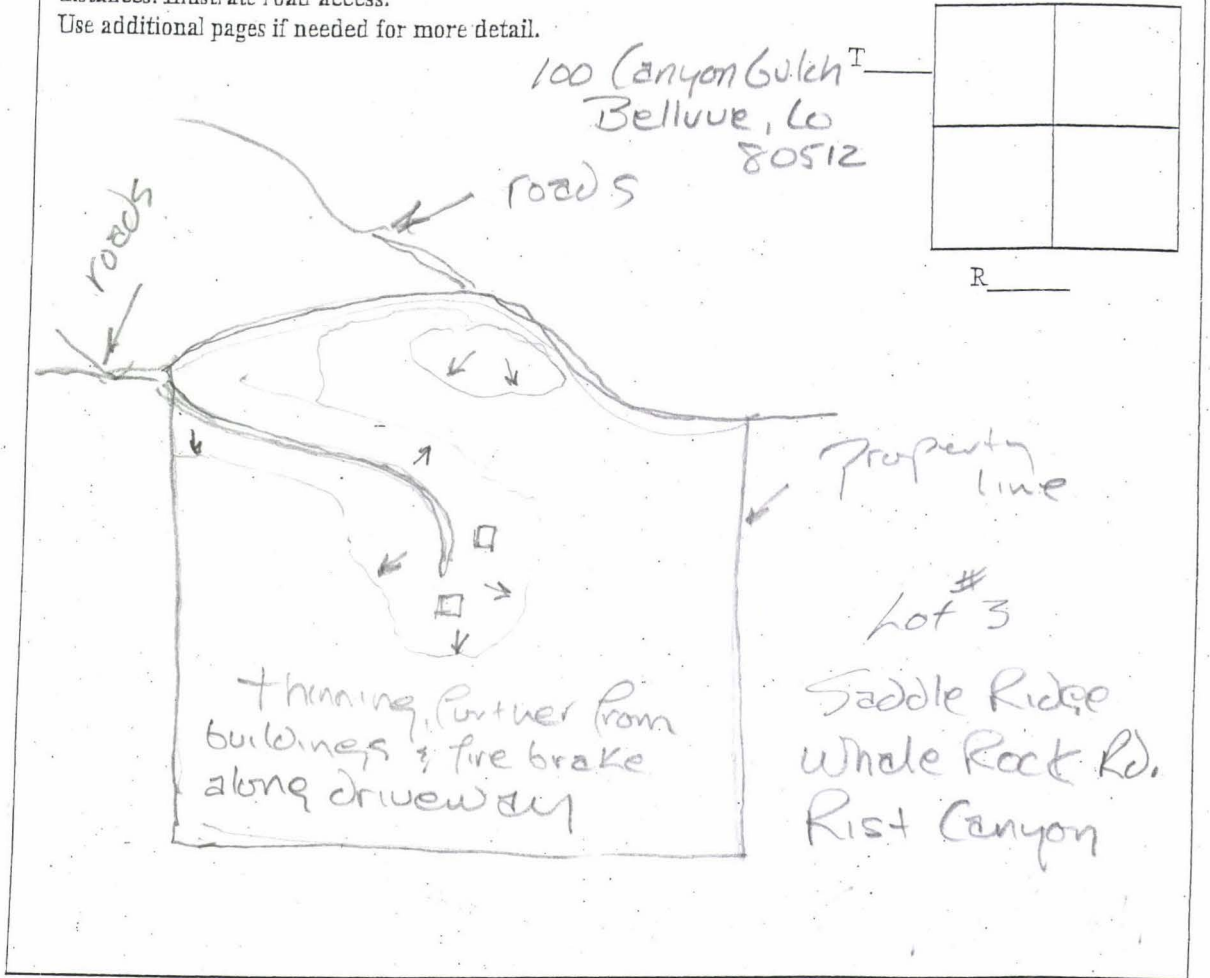
Stamp: MAY 15 2007
CSFS-SO

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FOREST LAND ENHANCEMENT PROGRAM
PLAN DESIGN

Sketch project area and design. Include numbers, volumes, rows, lengths, species, etc., as appropriate. Include structures and landmarks. Indicate, by location, the practices to be implemented. Show distances. Illustrate road access. Use additional pages if needed for more detail.



LIST PRACTICE AND COMPONENTS WITH IMPLEMENTATION SCHEDULE:

PRACTICE/COMPONENT/OTHER SPECIFICATIONS	COMPLETION DATE
we are thinning further away	9/15/07
slash piles for burning	thru winter 08