Form 828

169.25AC TOTAL

COPY

Colorado State University

# 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) | |
| SB 071 Colorado Forest Restoration Grant | ✓ |
| 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) | |

☑ Checked for Federal suspension and debarment (State Office) http://www.epls.gov/ 10-22-10 kc

Name: Boulder Mountain Fire Protection District

Address: 1905 Linden Dr.

Boulder, CO 80304

Approved for Payment
C.S.F.S.
1021076
10-22-10
kc

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

Grant Number: 536703-B0-03 ~ Cooperator Match: $109,115 total

Approved Funding: $50,000 ~ Total Project: $159,115

CSFS Account Number: 5367030-6693 ~ Amount of Payment: $16,110.75 ~

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

Approved by _____ (Program manager signature) Date: 10/21/2010

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

EXHIBIT B

GRANT REPORT/REIMBURSEMENT REQUEST

COLORADO FOREST RESTORATION GRANT SB071

Project Number: 536703

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. **Matching Funds are expenses for goods, services and labor necessary for project implementation and incurred by the applicant.**

1. Project #: 536703

2. Project Funding Amount: 50,000.00

3. Community Protected: Meadow Glen Forest, Valley Ln

4. Make Payment To:
Name: Boulder Mountain Fire PD
Address: 1905 Linden Drive
Boulder, Co 80302

5. Period of Performance:
From: 5/1/10
To: 6/30/10

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.) For this portion of the project 45 acres were mitigated at 1577 West Coach Road (Figure 1), 13 acres were mitigated along Reed Ranch Road (Figure 2), 30.7 acres were mitigated along Rembrandt Road (Figure 3), and 13 acres were mitigated along Valley Lane (Figure 4) with funds from Senate Bill 71 creating shaded fuel breaks. This project was completed to CSFS recommend standards for shaded fuel breaks. All slash was chipped. All logs were cut to fire wood and hauled away or contoured.

7. Reimbursement Request: $16,110.75

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 | | Total Costs | Reimbursement Amount Requested For Out of Pocket Expenses | Matching Funds | | Total Costs |
| | | Cash (hard match) | Donated (Inkind match) | | | Cash (hard match) | Donated (Inkind match) | |
| Labor* | 16,110.75 | 16,110.75 | 60,500.00 | | 50,000.00 | 48,615.00 | 60,500.00 | 159,115.00 |
| Material** | | | | | | | | |
| Total | 16,110.75 | 16,110.75 | 60,500.00 | | 50,000.00 | 48,615.00 | 60,500.00 | 159,115.00 |

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

* Use actual costs or $19.51/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 : $

9. I request reimbursement in the amount of $ 16,110.75 for the work completed and documented above. I certify that to the best of my knowledge and belief this report is correct and complete an that all outlays reported are for the purposes set forth in the project documents.

Signature: [signature] Date: 10/22/10

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: [signature] Date: 11-1-10

THIS FORM SHOWS "IN-KIND" MATCH, WHICH WAS NOT INCLUDED ON THE ORIGINAL EX. B "CLOSE OUT" REQUEST.

**BOULDER MOUNTAIN FIRE PROTECTION DISTRICT**
1905 LINDEN DRIVE • BOULDER, CO 80304 • (303) 440-0235 • FAX (303) 440-5247

October 11, 2010

Allen Owen
Boulder District
Colorado State Forest Service
5625 Ute Highway
Longmont, Colorado 80503-9130

RE: Final Report for Colorado Senate Bill 08-071 Grant project number 536703.

Dear Mr. Allen Owen,

Per the requirement of Colorado Senate Bill 08-071 Boulder Mountain Fire Protection District (BMFPD) is submitting the items stipulated in the notification letter BMPFD received from Joseph Duda Forest Management Division Supervisor of the Colorado State Forest Service (CSFS) in a letter dated January 9, 2009. The items requested by the CSFS include:

1. Complete Exhibit B (Grant Report/Reimbursement Request: Colorado Forest Restoration Grant SB071).
2. CSFS District Forester must certify Exhibit B with signature.
3. Accomplishments—for example: acres treated, trees planted, miles of fuelbreak created, quantity of defensible space projects and associated acres treated, quantity of presentations with quantity of attendees and type of audience, etc.
4. Summary of Youth Corps participation, if applicable.
5. Summary of actual costs—how much and for what.
6. Summary of matching contributions—how much and from who.
7. Before and after photos (digital preferred and provided electronically).

To address the items requested by the CSFS above:

1. The final completed Exhibit B is attached.
2. BMFPD is not in possession of a copy of the Exhibit B with the District Forester's signature so the CSFS will have to aatach that to this letter.
3. BMFPD treated 138.5 acres of forest. Nearly 3 ½ miles of shaded fuel break was installed along evacuation routes. BMPFD held approximately one dozen community meeting with homeowners associations and groups proposing installation of the fuel breaks with follow up meetings outlining the projects details and eventually the accomplishments.
4. There was no Youth corps participation.
5. $159,115.00 was spent to treat 138.5 acres of forest to CSFS standard for shaded fuel breaks. Three and a half miles of fuel break was installed along evacuation routes.

# Boulder Mountain Fire Authority

6. Homeowners Associations and citizen groups participated $48,615.00 dollars in matching. Boulder County provided $500 in matching funds through the land use department's chipping program. Two federal grants: Front Range Fuels treatment Partnership Grant Number 08CPG- SFA-NFP CG2 BO Project Number GT-530831 and State Fire Assistance Grant Number GT-530831 provided $50,000.00 in matching funds between the two grants. BMPFD subsidized the mitigation program with $10,000 in funding for this project.
7. Included is a compact disk with 17 before and after photos.

If you have any questions or require any more details please do not hesitate to call me at (303) 440-0235.

Sincerely,

Steve Lynn
Mitigation Coordinator
Boulder Mountain Fire Protection District
1905 Linden Drive
Boulder Colorado 80304
(303) 440-0235
mitigation@bouldermountainfire.org

EXHIBIT B

GRANT REPORT/REIMBURSEMENT REQUEST

Colorado Forest Restoration Grant

Project Number: 536703

SB 71 60/40 match

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. Grant Award #: 536703 | 2. Total Award Amount: $50,000 | 3. Community Protected: BMFPD |
|---|---|---|

| 4. Make Payment To: | | 5. Period of Performance: | |
|---|---|---|---|
| Name: | Boulder Mountain Fire Protection District | From: | 5/1/2010 |
| Address: | 1905 Linden Drive | To: | 7/31/2010 |
| | Boulder, Colorado 80304 | | |

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.)

For this portion of the project 45 acres were mitigated at 1577 West Coach Road (Figure 1), 13 acres where mitigated along Reed Ranch Road (Figure 2), 30.7 acres where mitigated along Rembrandt Road (Figure 3), and 13 Acres were mitigated along Valley Lane with the funds from Senate Bill 71 creating a shaded fuel break along this evacuation route. All work was completed to Colorado State Forrest Service recommended standards for shaded fuel breaks. This includes cutting down all trees marked to Colorado State Forest Services standards. Stacking or contouring all logs greater than 6 inches in diameter. All slash less than 6 inches was chipped and chips were distributed on the property.

7. Reimbursement Request: $16,110.75

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

| | Current Period | | | Project to Date | | |
|---|---|---|---|---|---|---|
| | Reimbursement Request Amount | Matching Funds | Total Costs | Reimbursement Request Amount | Matching Funds | Total Costs |
| Labor* | $16,110.75 | $16,110.75 | $32,221.50 | $50,000.00 | $48,615.00 | $98,615.00 |
| Material** | | | | | | |
| Total | $16,110.75 | $16,110.75 | $32,221.50 | $50,000.00 | $48,615.00 | $98,615.00 |

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

* Use actual costs or $17.55/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 : $

9. I request reimbursement in the amount of $_____16,110.75__ for the work completed and documented above. I certify that to the best of my knowledge and belief this report is correct and complete an that all outlays reported are for the purposes set forth in the grant award documents.

Signature: Date: 8/2/10

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

Work meets minimum standards as set forth by CSFS.

Signature: Allen Olver Date: 9/1/10

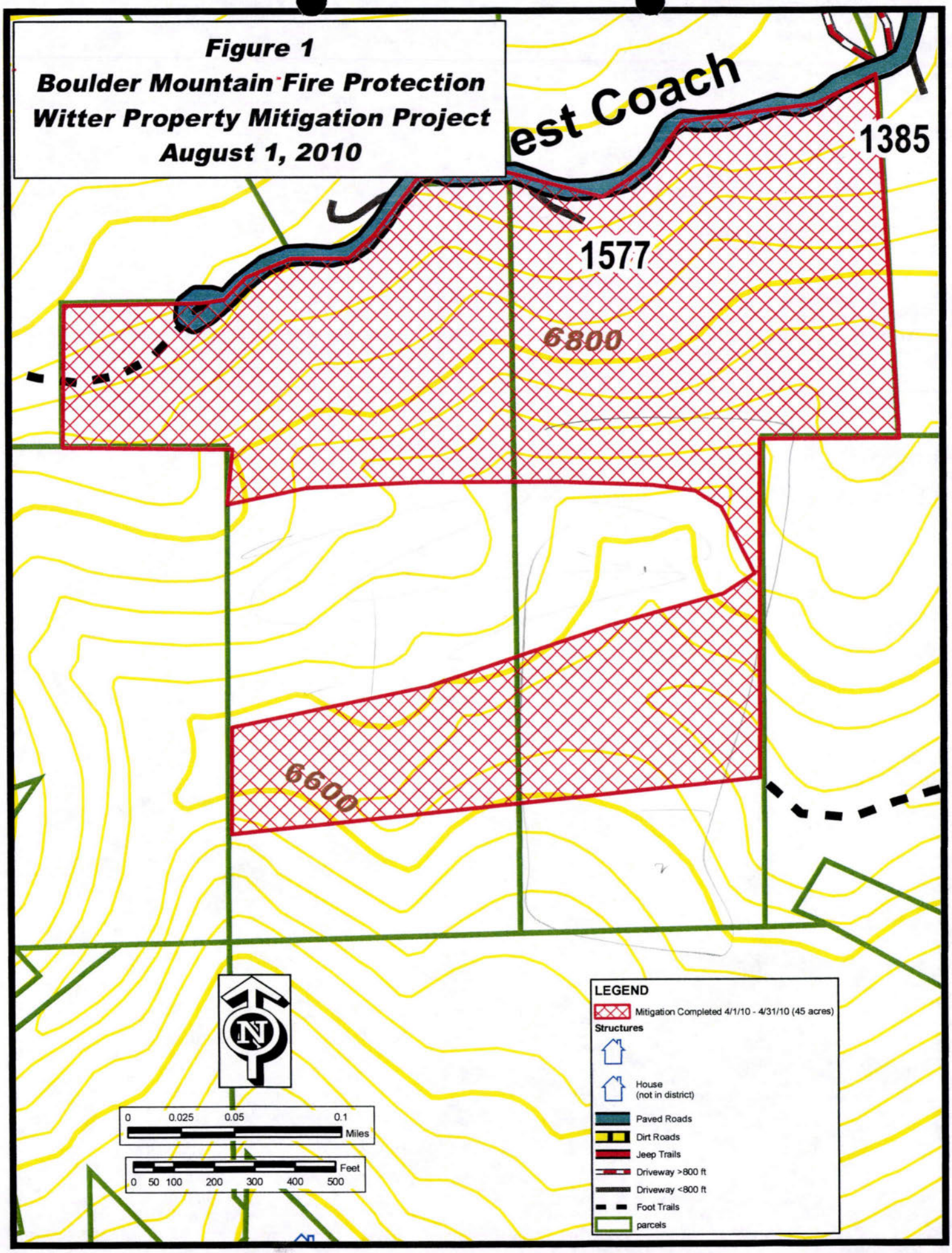
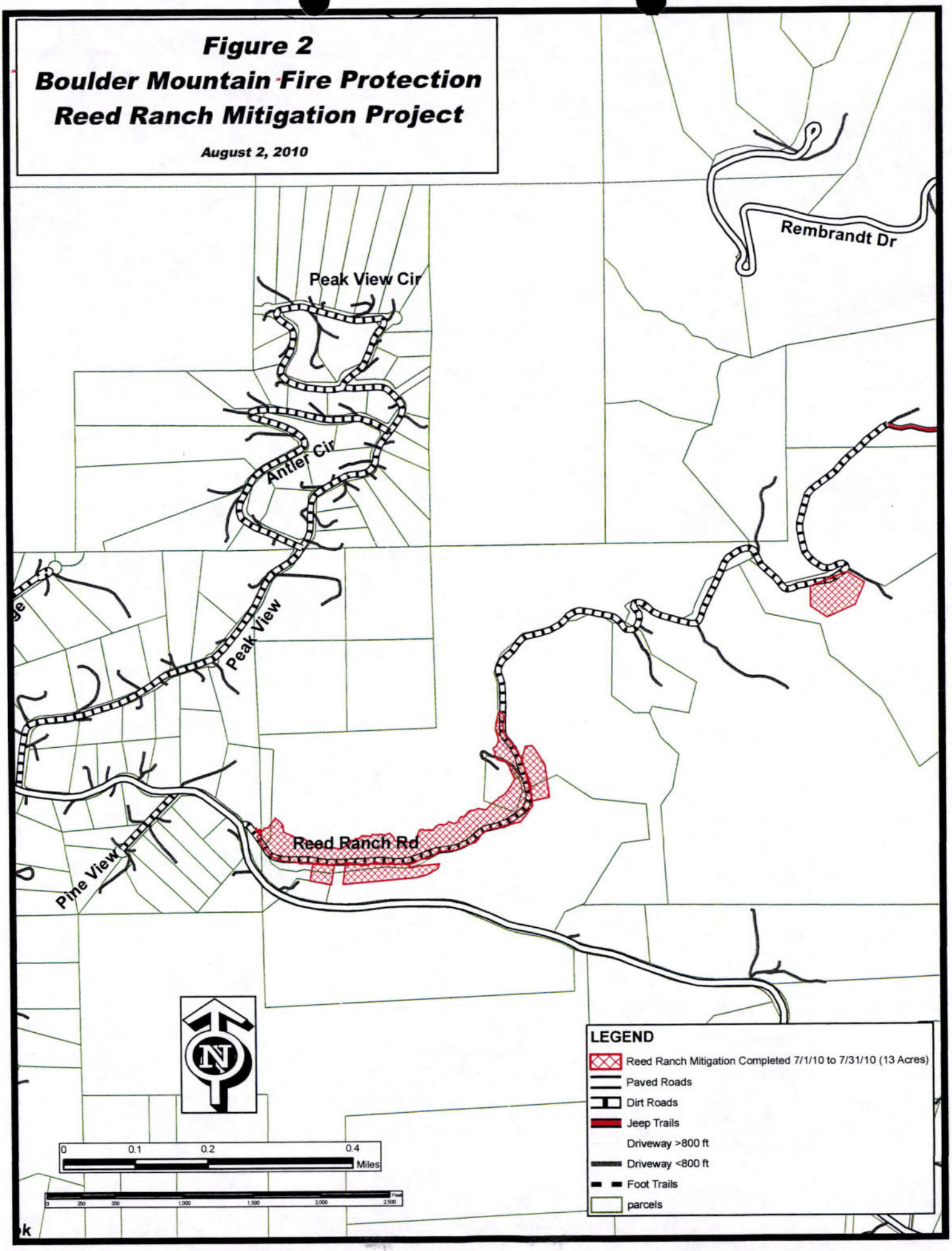


Figure 1
Boulder Mountain Fire Protection
Witter Property Mitigation Project
August 1, 2010
est Coach
1385
1577
6800
6600
N
0 0.025 0.05 0.1
Miles
Feet
0 50 100 200 300 400 500
LEGEND
Mitigation Completed 4/1/10 - 4/31/10 (45 acres)
Structures
House
(not in district)
Paved Roads
Dirt Roads
Jeep Trails
Driveway >800 ft
Driveway <800 ft
Foot Trails
parcels

# Figure 2
# Boulder Mountain Fire Protection
# Reed Ranch Mitigation Project

*August 2, 2010*



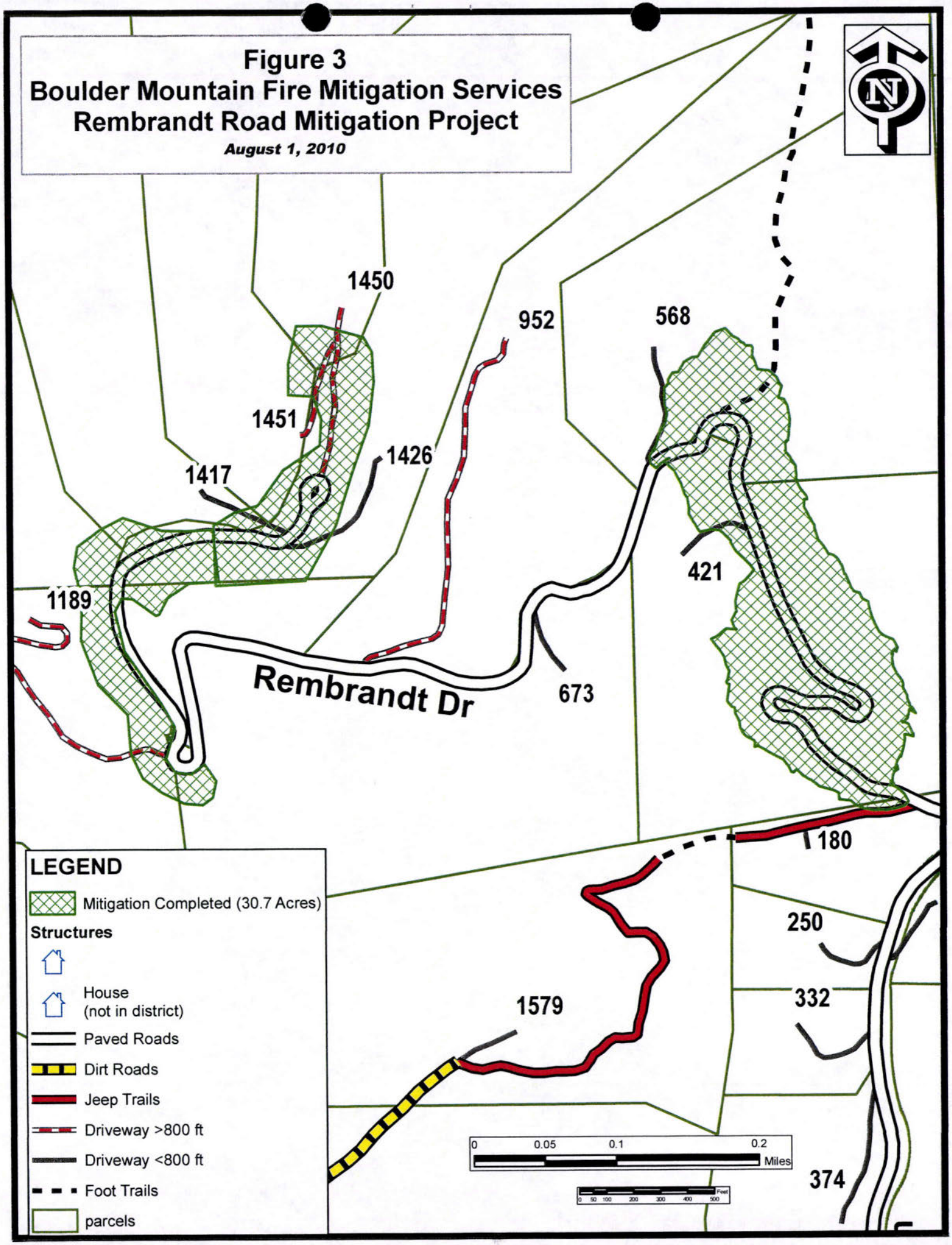


Figure 3
Boulder Mountain Fire Mitigation Services
Rembrandt Road Mitigation Project
August 1, 2010
N
1450
952
568
1451
1426
1417
421
1189
Rembrandt Dr
673
180
250
1579
332
374
LEGEND
Mitigation Completed (30.7 Acres)
Structures
House
(not in district)
Paved Roads
Dirt Roads
Jeep Trails
Driveway >800 ft
Driveway <800 ft
Foot Trails
parcels
0
0.05
0.1
0.2
Miles
Feet

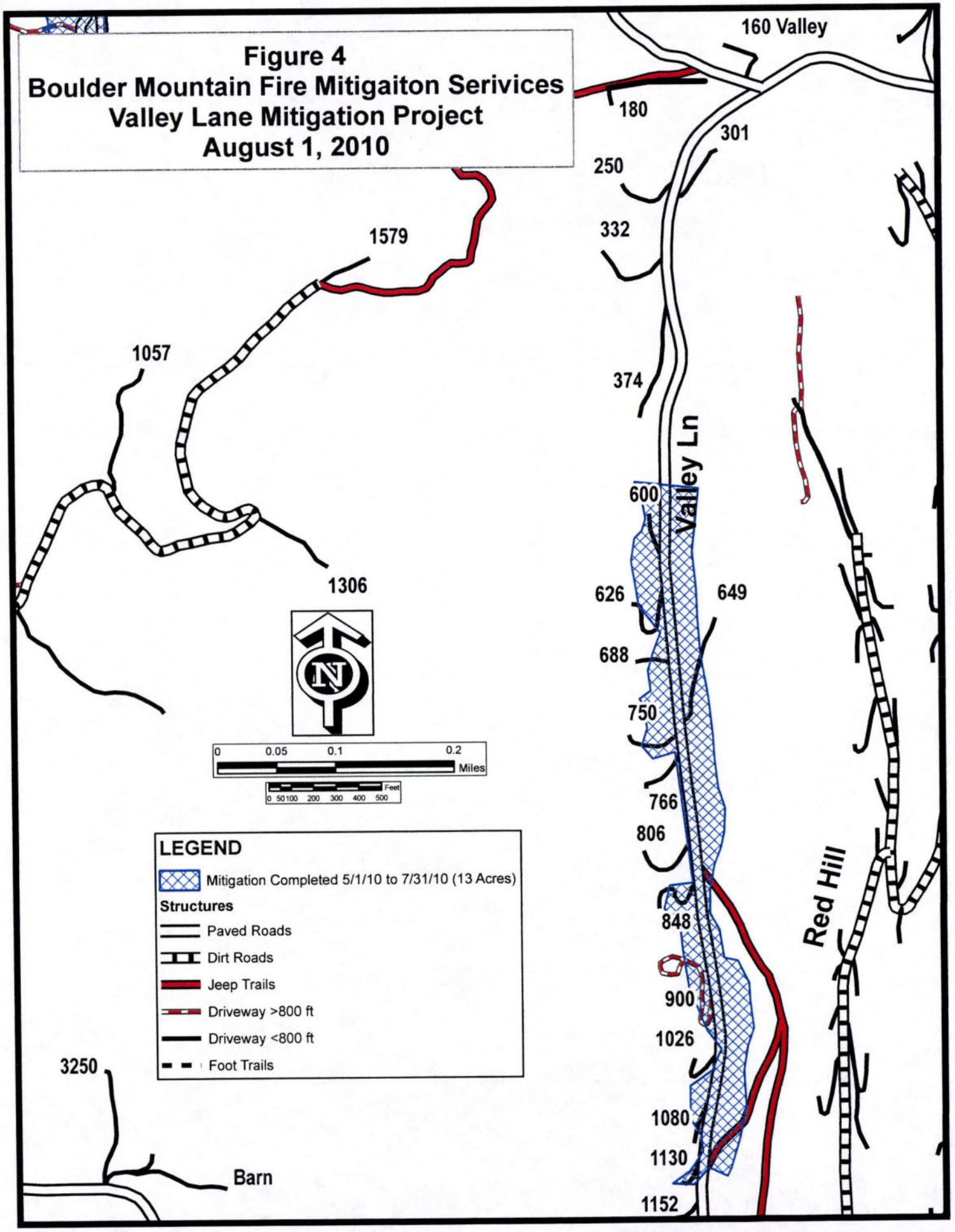


Figure 4
Boulder Mountain Fire Mitigaiton Serivices
Valley Lane Mitigation Project
August 1, 2010
160 Valley
180
301
250
332
1579
1057
374
Valley Ln
600
1306
626
649
688
750
766
806
848
900
1026
1080
1130
1152
Red Hill
3250
Barn
N
0
0.05
0.1
0.2
Miles
Feet
0 50 100 200 300 400 500
LEGEND
Mitigation Completed 5/1/10 to 7/31/10 (13 Acres)
Structures
Paved Roads
Dirt Roads
Jeep Trails
Driveway >800 ft
Driveway <800 ft
Foot Trails

# 2009 BMFPD Chipping Form

Client Information

Date: ~~6~~ 5-27-10

Name: Reed Ranch Fuel Break

Address:

Phone:

Broadcast ☒ Pile ☐ Downhill ☒ Uphill ☒

Special Instructions:

Onsite Chipping

| | Shift 1 ~~X~~ | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | ~~6~~ 5-27-10 | | | |
| Start Time: | 0900 | | | |
| Stop Time: | 1400 | | | |
| Total Time: | ~~X~~ 5 hours | | | 5 hrs. |

# 2009 BMFPD Chipping Form

Client Information

Date: 6-16-10

Name:

Address: Reed Ranch fuel break

Phone:

Broadcast ☒ Pile ☐ Downhill ☒ Uphill ☒

Special Instructions:

Onsite Chipping

| | Shift 1 x 3 | Shift 2 x 2 | Shift 3 x 4 | Grand Total |
|---|---|---|---|---|
| Date: | 6-16-10 | 6-18-10 | 6-23-10 | |
| Start Time: | 0900 | 0800 | 10:00 | |
| Stop Time: | 1330 | 1300 | 12:30 | |
| Total Time: | 4.5 | 5 | 2.5 | 12 hours |

# CREW TIME REPORT

(2) CREW NAME: BMFPD Mit Crew

(3) CREW NUMBER: 1

(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD

(4) FIRE NAME: Reed Ranch Fuel Break

(5) FIRE NUMBER:

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIFICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara | 06/15/10 | 12:00 | 18:00 | | |
| | McGrew | | ↓ | ↓ | | |
| | Tate | | | | | |
| | Boersma | | | | | |
| | Total | | 16 hrs. | | | |
| | | 6-28-10 | | | | |
| | Palamara | 0500 | 16 00 | | 7 hrs | |
| | Miller | | | | | |
| | Spahn | | | | | |
| | Kabel | | | | | |
| | Boersma | | | | | |
| | 6-28-10 Total | | 35 hours | | | |
| | Palamara | 06/30/10 | 9:00 | 15:45 | 7.75 | |
| | Boersma | | | | | |
| | Bozeman | | | | | |
| | Spahn | | | | | |
| | McGrew | | | 12:00 | 3.0 | |
| | Total | | 30 hrs. | | | |

(11) REMARKS

6/15/10 – 6/30/10

GRAND TOTAL = 81 hrs.

(12) OFFICER-IN-CHARGE (Signature): Stephen Lynn

(13) TITLE (Officer-in-Charge): Mit Coordinator

(14) NAME (Person Posting in Emergency Time Report): [illegible]

(15) DATE: 7/1/10

Ch1-101

STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# CREW TIME REPORT

(1) CREW NAME: BmFPD Mit Crew
(2) CREW NUMBER:
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Reed Ranch
(5) FIRE NUMBER:

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE 6-14-10 Military Time ON | (9) OFF | (10) DATE Military Time ON | (10) OFF |
|---|---|---|---|---|---|---|
| | Miller | | 0900-1045 | | 1.75 | |
| | Kabal | | \| | \| | \| | |
| | Spahr | | \| | \| | \| | |
| | Boersma | | \| | \| | \| | |
| | | | 7 hours | | | |
| | Miller | | 1300-1600 | | 3 hour | |
| | Kabal | | \| | \| | | |
| | Boersma | | \| | \| | | |
| | | | 9 hours | | | |
| | ~~Total 16 hours~~ | | | | | |
| | ~~Spahr~~ | | ~~0900-1000~~ | | ~~1 hour~~ | |
| | ~~Grand Total 17 hours~~ | | | | | |
| | Grand Total 16 hours 6/14/10 | | | | | |

(11) REMARKS

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 7/1/10

261-101 PRINTED ON RECYCLED PAPER
STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# CREW TIME REPORT

(1) CREW NAME: BmFPD Mit Crew
(2) CREW NUMBER:
(3) OFFICE RESPONSIBLE FOR FIRE: BmFPD
(4) FIRE NAME: Reed Ranch
(5) FIRE NUMBER: Fuel Brk

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE 6-23-10 Military Time ON | (9) OFF | (10) DATE Military Time ON | (10) OFF |
|---|---|---|---|---|---|---|
| | Miller | | 10:00 | 1230 | 2.5 | |
| | Tate | | ↓ | ↓ | ↓ | ↓ |
| | 6-23-10 Total | 5 | hours | | | |

(11) REMARKS

Grand Total 6/23/10 = 5 hours

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 7/1/10

261-101 PRINTED ON RECYCLED PAPER
STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

(1) CREW NAME: BMFPD Mt Crew
(2) CREW NUMBER:
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: ~~[illegible]~~ 1577 West Creek
(5) FIRE NUMBER:

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIFICATION | (9) DATE 6-10-10 Military Time ON | (9) OFF | (10) DATE Military Time ON | (10) OFF |
|---|---|---|---|---|---|---|
| | Miller | | 0900 | 1530 | 6.5 | |
| | Spahn | | | | | |
| | Tate | | | | | |
| | | | Total | 19.5 | | |

(11) REMARKS
Grand total = 19.5 hours on 6/10/10

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mt Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 7/1/10

1-101 PRINTED ON RECYCLED PAPER
STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

(1) CREW NAME: BMFPD Mt Crew
(2) CREW NUMBER:
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Witter
(5) FIRE NUMBER: 1517 West Creek

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIFICATION | (9) DATE Military Time ON | (9) OFF | (10) DATE Military Time ON | (10) OFF |
|---|---|---|---|---|---|---|
| | Palamara | 06/06/10 | 9:00 | 16:15 | 7.25 | |
| | Spahn | | ↓ | ↓ | ↓ | |
| | McGrew | | ↓ | ↓ | ↓ | |
| | Boersma | | ↓ | ↓ | ↓ | |
| | Tate | | ↓ | 14:15 | 5.25 | |
| | Total | | 34.25 hrs. | | | |
| | Palamara | 06/07/10 | 9:00 | 16:30 | 7.5 | |
| | McGrew | | ↓ | ↓ | ↓ | |
| | Miller | | ↓ | ↓ | ↓ | |
| | Tate | | ↓ | ↓ | ↓ | |
| | Boersma | | ↓ | ↓ | ↓ | |
| | Total | | 37.5 hrs. | | | |

(11) REMARKS
Grand Total 6/3/10 - 6/07/10 = 71.75 hrs

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mt Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 7/1/10

261-101 PRINTED ON RECYCLED PAPER
STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Witter
(5) FIRE NUMBER: 1577 West Coast

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara | 05/21/10 | 8:45 | 16:15 | 7.5 | |
| | Blue | | | | | |
| | Kabal | | | | | |
| | Boersma | | | | | |
| | McGrew | | | | | |
| | Total | | 37.5 hrs. | | | |

(11) REMARKS
GRAND TOTAL = 37.5 hrs. 5/21/10

(12) OFFICER-IN-CHARGE (Signature): Stephen M. Lynn
(13) TITLE (Officer-in-Charge): Mit Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 5/31/10

261-101 STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Witters
(5) FIRE NUMBER: 1577 West Coast

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara | 05/15/10 | 9:30 | 16:30 | 7.0 | |
| | Northrup | | | | | |
| | Miller | | | | | |
| | Shier | | | | | |
| | Kabal | | 12:30 | | 4 | |
| | Total | | 32 hrs. | | | |
| | ~~Palamara~~ | | | | | |

(11) REMARKS
GRAND TOTAL = 32 hrs. 5/16/10

(12) OFFICER-IN-CHARGE (Signature): Stephen M. Lynn
(13) TITLE (Officer-in-Charge): Mit Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 7/1/10

261-101 PRINTED ON RECYCLED PAPER STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# CREW TIME REPORT

(1) CREW NAME: BMFFD Mit Crew

(2) CREW NUMBER:

(3) OFFICE RESPONSIBLE FOR FIRE: BMFFD

(4) FIRE NAME: 1577 west

(5) FIRE NUMBER: Coach

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIFICATION | (9) DATE 6-24-10 Military Time ON | (9) OFF | (10) DATE Military Time ON | (10) OFF |
|---|---|---|---|---|---|---|
| | Spaka | 0900 | 1600 | | 7 hrs | |
| | Boosman | | | | | |
| | McGrew | | | | | |
| | Tate | 0900 | 1400 | | 5 hrs | |
| | Miller | 1100 | 1600 | | 5 hrs | |
| | 6-24 Total | 31 hours | | | | |

(11) REMARKS

Grand Total 6/24/10 = 31 hours

(12) OFFICER-IN-CHARGE (Signature): [signature]

(13) TITLE (Officer-in-Charge): Mit Coordinator

(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn

(15) DATE: 7/1/10

261-101 PRINTED ON RECYCLED PAPER

STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# 2009 BMFPD Chipping Form

Client Information

Date: 06/01/10

Name:

Address: Valley Lane Fuel Break

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

Onsite Chipping

| | Shift 1 +2 | Shift 2 | Shift 3 +2 | Grand Total |
|---|---|---|---|---|
| Date: | 06/01/10 | 05/31/10 | 06/02/10 | |
| Start Time: | 14:00 | 8:30 | 9:00 | |
| Stop Time: | 16:15 | 16:00 | 16:15 | |
| Total Time: | 4.5 hrs. | 7.5 hrs. | 14.5 hrs. | 26.5 hrs. |

# 2009 BMFPD Chipping Form

**Client Information**

Date: 06/05/10

Name: Valley Lane Fuel Break

Address:

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 +1 | Shift 2 x4 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 06/05/10 | 6-23-10 | | |
| Start Time: | 9:00 | 13:45 | | |
| Stop Time: | 16:00 | 16:45 | | |
| Total Time: | 10.5 hrs. | ~~3 hrs x 4~~ 6 hrs. | | 16.5 hrs. |

# 2009 BMFPD Chipping Form

**Client Information**

Date: 6-9-10

Name: Valley Lane Fuel Break

Address:

Phone:

Broadcast ☒ Pile ☐ Downhill ☒ Uphill ☒

Special Instructions:

**Onsite Chipping**

| | Shift 1 x3 | Shift 2 x5 | Shift 3 x2 | Grand Total |
|---|---|---|---|---|
| Date: | 6-9-10 | 6-17-10 | 6-22-10 | |
| Start Time: | 0900 | 1100 | 1100 | |
| Stop Time: | 1430 | 1200 | 1500 | |
| Total Time: | 5.5 | 1 $\boxed{2.5}$ x 5 | 4 x $\boxed{8 \text{ hrs}}$ 2 | 16 hrs. |

CREW TIME REPORT

(1) CREW NAME: BMFPD M.t Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Valley Lane
(5) FIRE NUMBER: Fuel Break

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE 6/1/10 Military Time ON | (9) OFF | (10) DATE Military Time ON | (10) OFF |
|---|---|---|---|---|---|---|
| | Spahn | 6/1/10 | 1400 | 1615 | -2.25 | |
| | Boersma | 6/1/10 | 1400 | 1615 | 2.25 | |
| | Total 6/1/10 = 4.5 hrs | | | | | |
| | Palamara | 6/8/10 | 0900 | 1600 | - 7.0 hrs | |
| | Spahn | ↓ | ↓ | ↓ | = | ↓ |
| | McGrew | ↓ | ↓ | ↓ | = | ↓ |
| | Boersma | ↓ | ↓ | ↓ | - | ↓ |
| | Miller | ↓ | ↓ | 1230 | - 3.5 hrs | |
| | Tate | ↓ | ↓ | 1230 | - 3.5 hrs | |
| | Total 6/8/10 = 35.0 hrs | | | | | |

(11) REMARKS: Grand Total 6/1 to 6/8/10 = 39.5 hours

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): M.t Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 7/1/10

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CREW TIME REPORT

(1) CREW NAME: BMFPD M.t Crew
(2) CREW NUMBER:
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Valley Lane
(5) FIRE NUMBER:

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE 6-9-10 Military Time ON | (9) OFF | (10) DATE Military Time ON | (10) OFF |
|---|---|---|---|---|---|---|
| | Palamara | 0900 | 1330 | | 4.5 | |
| | McGrew | 0900 | 1330 | | 4.5 | |
| | 6/9/10 Total 9 hours | | | | | |
| | 6-21-10 | | | | | |
| | Miller | 1100- | 1600- | | 5 hrs | |
| | Spahn | 1100- | 1600 | | 5 hours | |
| | Tate | ↓ | ↓ | | 2 | 1 |
| | 6-21-10 Total | 15.0 | hours | | | |
| | 6-22-10 | | | | | |
| | Miller | 1100- | 1500 | | 4 hours | |
| | Tate | ↓ | ↓ | | 4 hours | |
| | 6-22-10 Total | 8 | hours | | | |
| | 6-29-10 | | | | | |
| | Miller | 0900- | 1600 | | 7 hrs | |
| | McGrew | ↓ | ↓ | | ↓ | |
| | Boersma | ↓ | ↓ | | ↓ | |
| | 6-29-10 Total | 21 | hours | | 6/22/10 | |

(11) REMARKS: Grand Total 53 hours 6/9/10 – 6/29/10

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): M.t Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen Lynn
(15) DATE: 7/1/10

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# CREW TIME REPORT

(1) CREW NAME: SMFPD Mit Crew

(2) CREW NUMBER: 1

(3) OFFICE RESPONSIBLE FOR FIRE: SMFPD

(4) FIRE NAME: Reed Ranch Fuel Break

(5) FIRE NUMBER:

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIFICATION | (9) DATE | Military Time ON | Military Time OFF | (10) DATE | Military Time ON | Military Time OFF |
|---|---|---|---|---|---|---|---|---|
| | Spahn | | 07/02/10 | 10:00 | 16:00 | | 6.0 | |
| | Boersma | | | ↓ | ↓ | | ↓ | |
| | Total | | 7/2/10 | 12 hrs. | | | | |
| | Patamara | | 07/06/10 | 9:00 | 16:00 | | 7.0 | |
| | Total | | 7/6/10 | 7 hrs. | | | | |
| | Spahn | | 07/12/10 | 9:00 | 16:00 | | 7.0 | |
| | Bozeman | | | ↓ | ↓ | | 7.0 | |
| | Kabal | | | ↓ | ↓ | | 7.0 | |
| | Total | | 7/12/10 | 21 hrs. | | | | |
| | Miller | | 07/15/10 | 9:30 | 15:00 | | 5.5 | |
| | Tate | | | ↓ | ↓ | | 5.5 | |
| | Spahn | | | ↓ | ↓ | | | |
| | Total | | 7/15/10 | 16.5 hrs. | | | | |

(11) REMARKS

GRAND TOTAL = 56.5 hrs.

(12) OFFICER-IN-CHARGE (Signature): Stephen M. Lo

(13) TITLE (Officer-in-Charge): Mit Coordinator

(14) NAME (Person Posting to Emergency Time Report): Stephen Lynn

(15) DATE: 8/2/10

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STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# 2009 BMFPD Chipping Form

**Client Information**

It will only take a moment

Date: 07/02/10

Name: Reed Ranch Fuel Break

Address:

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 + 1 Crew Entry | Grand Total |
|---|---|---|---|---|
| Date: | 07/02/10 | 07/06/10 | 07/09/10 | |
| Start Time: | 12:00 | 9:00 | 9:00 | |
| Stop Time: | 13:30 | 16:00 | 13:00 | |
| Total Time: | 1.5hr. | 7 hrs. | 6 hrs. | 14.5 hrs. |

8/2/10

# 2009 BMFPD Chipping Form

Client Information

Date: 07/12/10

Name: Reed Ranch Fuel Break

Address:

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

Onsite Chipping

| | Shift 1 + 1 Crew Extra | Shift 2 +1 Crew Extra | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 07/12/10 | 07/15/10 | | |
| Start Time: | 10:00 | 9:30 | | |
| Stop Time: | 16:00 | 16:00 | | |
| Total Time: | 9 hrs. | 9.75 hrs. | | 18.75 hrs. |

SL 8/2/10

EXHIBIT B

GRANT REPORT/REIMBURSEMENT REQUEST

Colorado Forest Restoration Grant

5th Payment

Project Number: 536703

SB 71 60/40 match

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. Grant Award #: 536703 ~~G-530831~~ | 2. Total Award Amount: $50,000 | 3. Community Protected: Meadow Glen Forest |

| | |
|---|---|
| 4. Make Payment To:<br>Name: Bouder Mountain Fire Protection District<br>Address: 1905 Linden Drive<br>Boulder, Colorado 80304 | 5. Period of Performance:<br>From: 4/1/2010<br>To: 4/30/2010 |

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.)

For this portion of the project 10 acres were mitigated at 1577 West Coach Road (Figure 1), 9 acres where mitigated along Valley Lane (Figure 2), 3 acres were mitigated along Pine Brook Road (Figure 3), and 3 acres where mitigated along Pine View Lane (Figure 4) with the funds from Senete Bill 71 creating a shadded fuel break along this evacuation route. All work was completed to Colorado State Forrest Service recommended standards for shaded fuel breaks. This includes cutting down all trees marked by Colorado State Forrest Services personel. Stacking or contouring all logs greater than 6 inches in diameter. All slash less than 6 inches was chipped and chips were distributed on the property. Twenty six cubic yards of chips were generated.

10
9
3
3

7. Reimbursement Request: $6,570.18

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

| | Current Period | | | Project to Date | | |
|---|---|---|---|---|---|---|
| | Reimbursement Request Amount | Matching Funds | Total Costs | Reimbursement Request Amount | Matching Funds | Total Costs |
| Labor* | $6,570.18 | $6,570.18 | $13,140.36 | $33,889.25 | $32,504.25 | $66,393.50 |
| Material** | | | | | | |
| Total | $6,570.18 | $6,570.18 | $13,140.36 | $33,889.25 | $32,504.25 | $66,393.50 |

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

* Use actual costs or $17.55/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 : $

9. I request reimbursement in the amount of $____6,570.18__ for the work completed and documented above. I certify that to the best of my knowledge and belief this report is correct and complete an that all outlays reported are for the purposes set forth in the grant award documents.

Signature: Date: 4/30/10

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

Work meets minimum standards as set forth by CSFS.

Signature: Date: 5/17/10

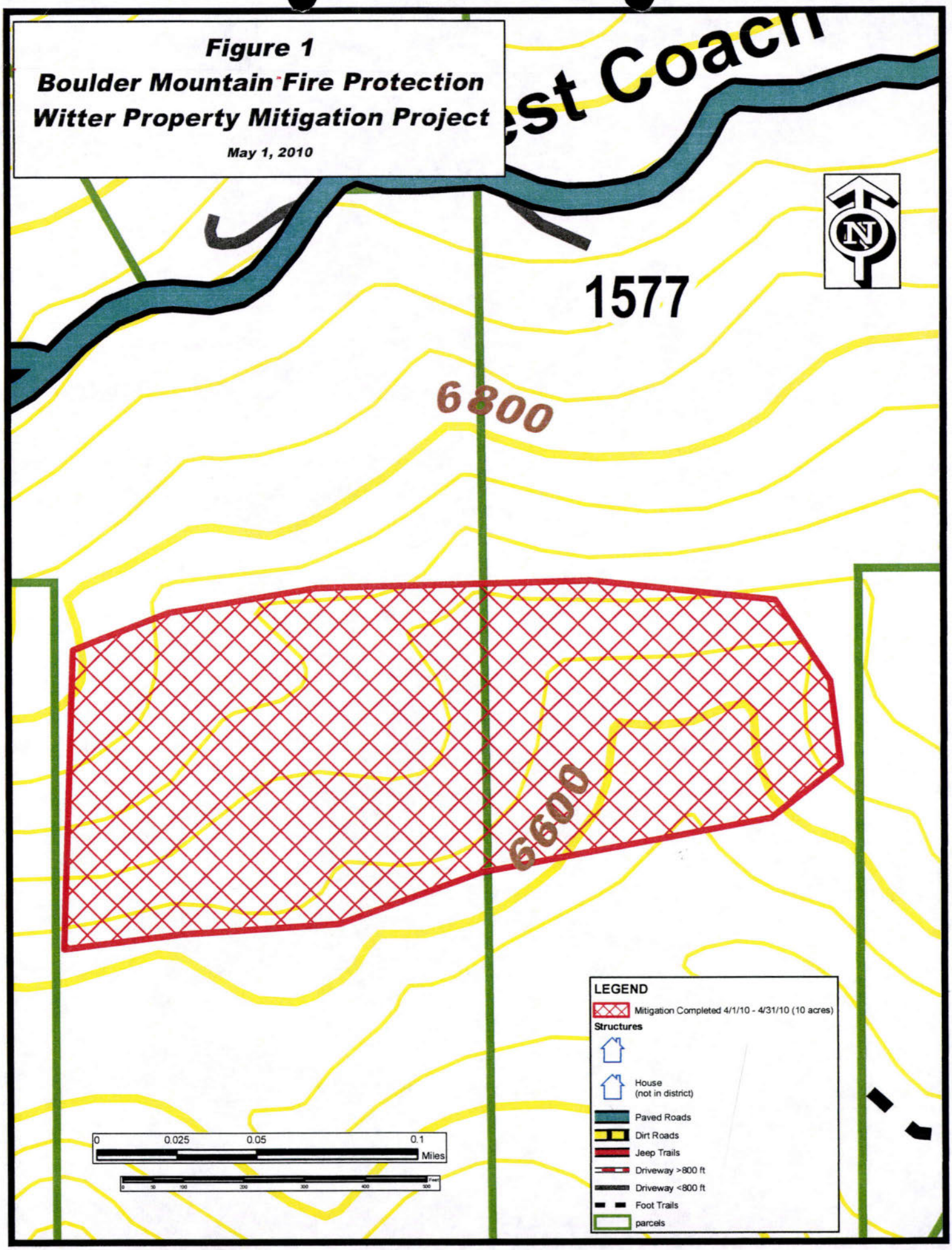


Figure 1
Boulder Mountain Fire Protection
Witter Property Mitigation Project
May 1, 2010
est Coach
1577
6800
6600
N
LEGEND
Mitigation Completed 4/1/10 - 4/31/10 (10 acres)
Structures
House
(not in district)
Paved Roads
Dirt Roads
Jeep Trails
Driveway >800 ft
Driveway <800 ft
Foot Trails
parcels
0
0.025
0.05
0.1
Miles
Feet

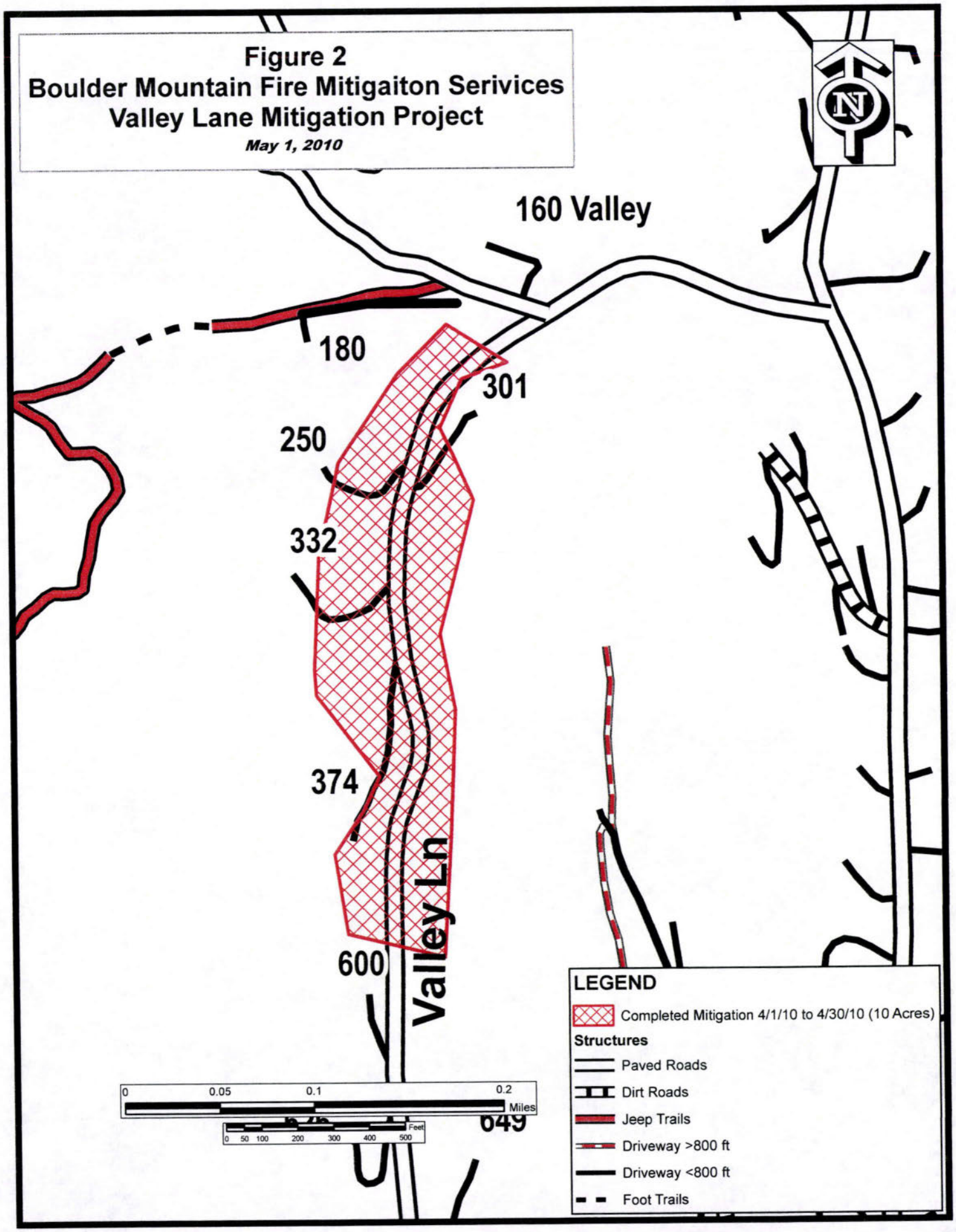
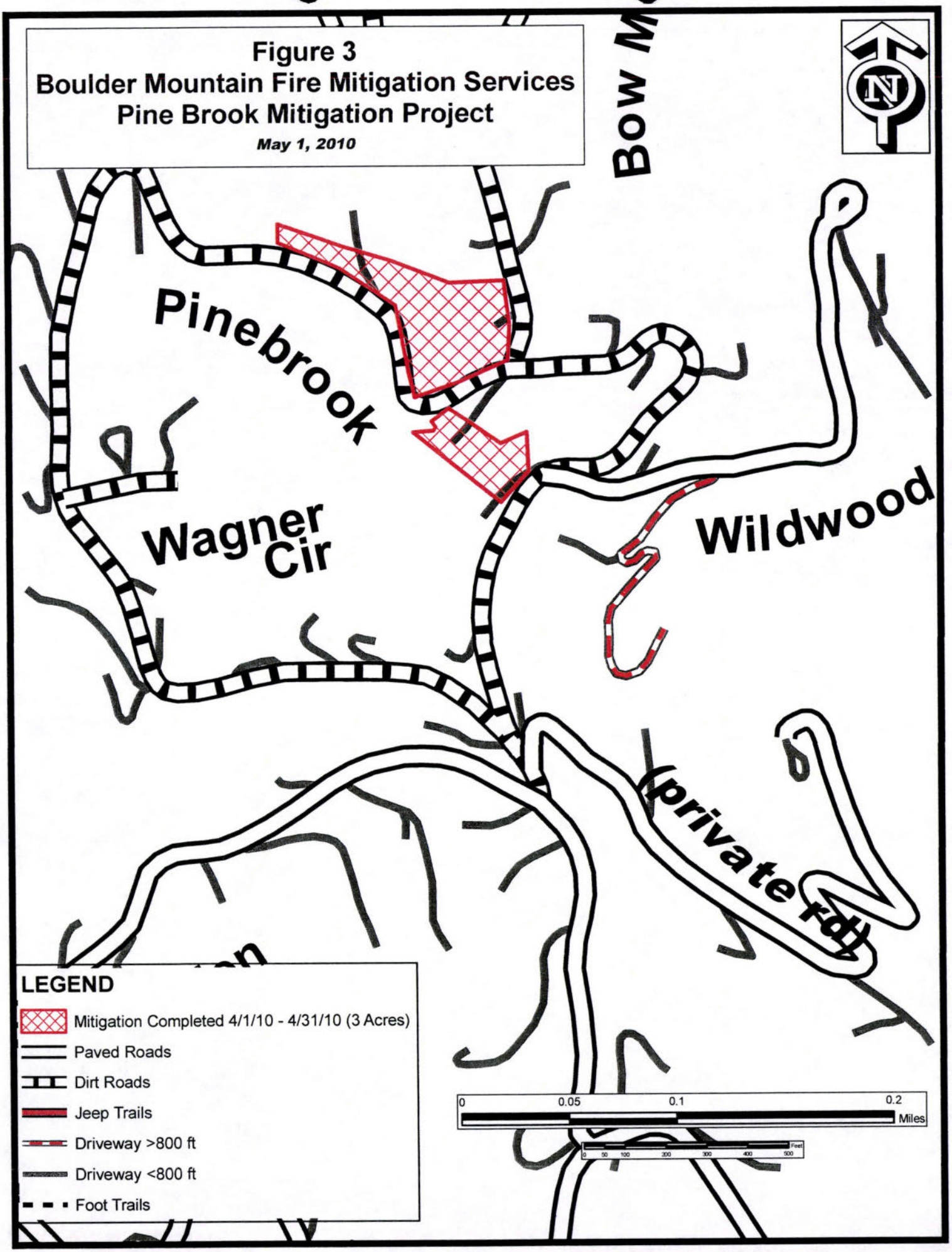


Figure 2
Boulder Mountain Fire Mitigaiton Serivices
Valley Lane Mitigation Project
May 1, 2010
N
160 Valley
180
301
250
332
374
Valley Ln
600
049
0
0.05
0.1
0.2
Miles
Feet
0 50 100 200 300 400 500
LEGEND
Completed Mitigation 4/1/10 to 4/30/10 (10 Acres)
Structures
Paved Roads
Dirt Roads
Jeep Trails
Driveway >800 ft
Driveway <800 ft
Foot Trails

# Figure 3
## Boulder Mountain Fire Mitigation Services
## Pine Brook Mitigation Project

***May 1, 2010***



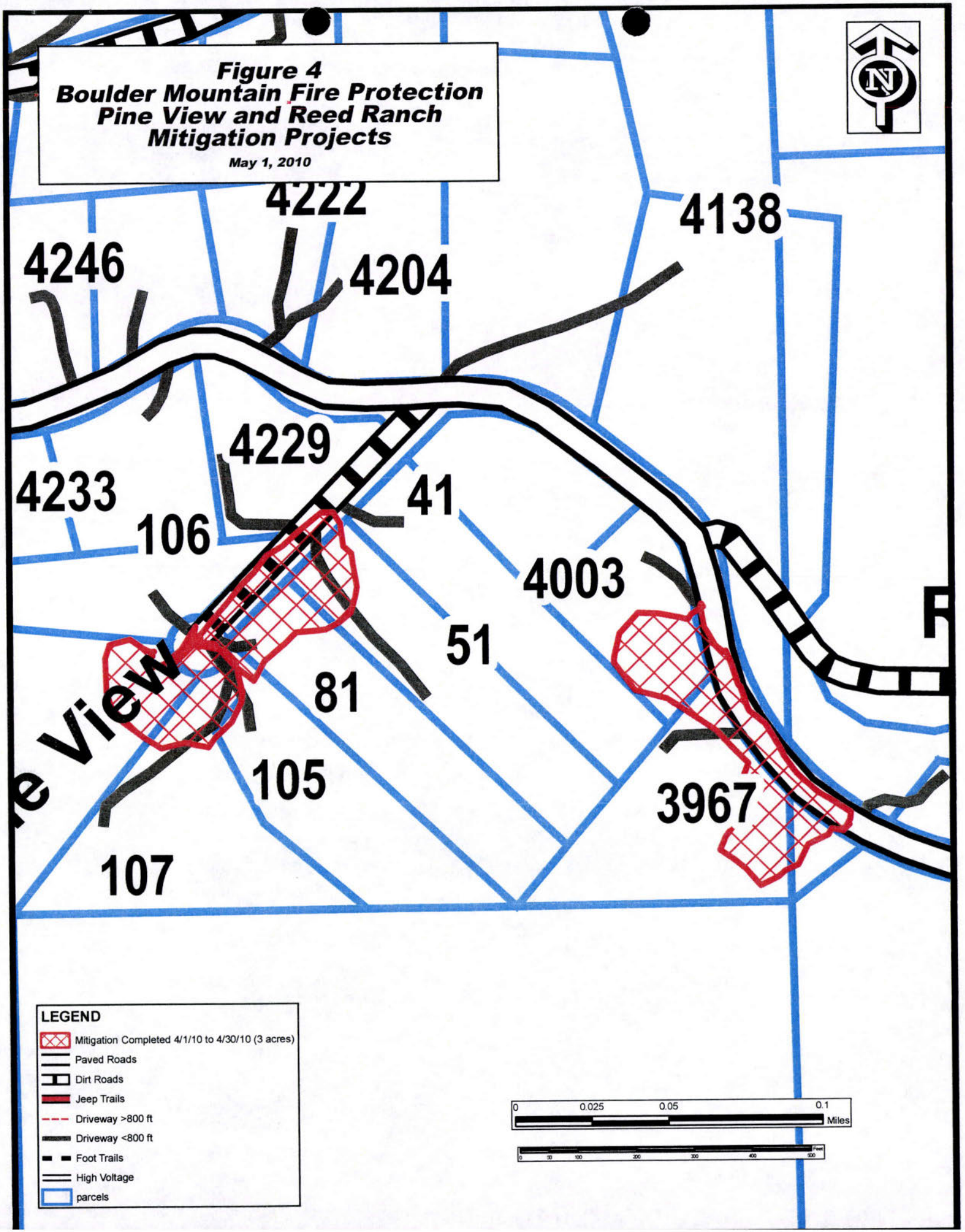


Figure 4
Boulder Mountain Fire Protection
Pine View and Reed Ranch
Mitigation Projects
May 1, 2010
4222
4138
4246
4204
4229
4233
41
106
4003
51
81
105
3967
107
LEGEND
Mitigation Completed 4/1/10 to 4/30/10 (3 acres)
Paved Roads
Dirt Roads
Jeep Trails
Driveway >800 ft
Driveway <800 ft
Foot Trails
High Voltage
parcels
0
0.025
0.05
0.1
Miles

# CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew

(2) CREW NUMBER: 1

(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD

(4) FIRE NAME: Witter

(5) FIRE NUMBER: 1577 West Coach

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Miller | 04/08/10 | 8:30 | 16:30 | | |
| | Blue | | ↓ | ↓ | | |
| | Northrup | | | | | |
| | Palamara | | 10:30 | | | |
| | Spahn | | ↓ | ↓ | | |
| | Kabal | | | | | |
| | Total | | 42 | hrs. | | |
| | Palamara | 04/09/10 | 7:30 | 13:00 | | |
| | Spahn | | ↓ | ↓ | | |
| | Kabal | | | | | |
| | Total | | 16.5 | hrs. | | |

(11) REMARKS

GRAND TOTAL = 58.5 hrs.

(12) OFFICER IN CHARGE (Signature): [signature]

(13) TITLE (Officer-in-Charge): Mit Coordinator

(14) NAME (Person Posting to Emergency Time Report): Stephen Lynn

(15) DATE: 4/30/10

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STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# CREW TIME REPORT

| (1) NAME | (2) CREW NUMBER |
|---|---|
| PD Mit Crew | 1 |

| (3) RESPONSIBLE FOR FIRE | (4) FIRE NAME | (5) FIRE NUMBER |
|---|---|---|
| PD | Valley Lane | Fuel Break |

| RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIFICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara 04/05/10 | | 8:45 | 15:45 | | |
| | Miller | | 8:45 | 15:45 | | |
| | Spahn | | 8:45 | 13:45 | | |
| | Total | | 19 hrs. | | | |
| | | | | | | |
| | Palamara 04/06/10 | | 10:00 | 15:30 | | |
| | Miller | | 10:00 | 13:30 | | |
| | Spahn | | 10:00 | 13:30 | | |
| | Kabal | | 10:00 | 15:30 | | |
| | Total | | 18 hrs. | | | |
| | | | | | | |
| | Palamara 04/15/10 | | 12:30 | 16:00 | | |
| | Miller | | ↓ | ↓ | | |
| | Kabal | | | | | |
| | Total | | 10.5 hrs. | | | |

(11) REMARKS

GRAND TOTAL = 47.5 hrs.

(12) OFFICER-IN-CHARGE (Signature) [signature]

(13) TITLE (Officer-in-Charge) Mit Coordinator

(14) NAME (Person Posting to Emergency Time Report) Stephen Lynn

(15) DATE 4/30/10

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STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# 2009 BMFPD Chipping Form

**Client Information**

Date: 04/22/10

Name:

Address: Valley Lane Fuel Break

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 04/22/10 | 04/26/10 | 04/28/10 | |
| Start Time: | 14:00 | 12:00 | 13:45 | |
| Stop Time: | 15:30 | 15:30 | 15:00 | |
| Total Time: | 1.5 hrs. | 3.5 hrs. | 1.25 hrs. | 6.25 hrs. |

# 2009 BMFPD Chipping Form

**Client Information**

Date: 04/05/10

Name: Valley Lane Fuel Break

Address:

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 04/05/10 | 04/06/10 | 04/15/10 | |
| Start Time: | 8:45 | 10:00 | 12:30 | |
| Stop Time: | 15:45 | 15:30 | 16:00 | |
| Total Time: | 7 hrs. | 5.5 hrs. | 3.5 hrs. | 16 hrs. |

# CREW TIME REPORT

| (1) CREW NAME | (2) CREW NUMBER |
|---|---|
| BMFPD Mit Crew | 1 |

| (3) OFFICE RESPONSIBLE FOR FIRE | (4) FIRE NAME | (5) FIRE NUMBER |
|---|---|---|
| BMFPD | Pinebrook Loop | Fuel Break |

| (6) REMARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIFICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara 04/14/10 | | 13:00 | 16:00 | | |
| | Total | | 3 hrs. | | | |
| | | | | | | |
| | Palamara 04/15/10 | | 10:00 | 12:30 | | |
| | Kabal | | ↓ | ↓ | | |
| | Northrop | | | | | |
| | Total | | 7.5 hrs. | | | |

(11) REMARKS

GRAND TOTAL = 10.5 hrs.

| (12) OFFICER-IN-CHARGE (Signature) | (13) TITLE (Officer-in-Charge) |
|---|---|
| Stephen M. Lynn | Mit Coordinator |
| (14) NAME (Person Posting to Emergency Time Report) | (15) DATE |
| Stephen Lynn | 4/30/10 |

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STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# 2009 BMFPD Chipping Form

**Client Information**

Date: 04/14/10

Name: Pinebrook Loop Fuel Break

Address:

Phone:

Broadcast ☑ Pile ☐ Downhill ☑ Uphill ☑

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 + 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 04/14/10 | 04/15/10 | | |
| Start Time: | 13:00 | 10:00 | | |
| Stop Time: | 16:00 | 12:30 | | |
| Total Time: | 3 hrs. | 5 hrs. | | 8 0 hrs |

# CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Pine View Fuel Break
(5) FIRE NUMBER: 1

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Spahn 04/20/10 | | 8:45 | 13:30 | | |
| | Tate | | 8:45 | 13:30 | | |
| | Total | | 9.5 hrs. | | | |
| | Bozeman 04/14/10 | | 8:45 | 9:45 | 13:45 | 16:00 |
| | ~~Miller~~ | | | | | |
| | ~~Palamara~~ | | | | | |
| | Total | | | 3.75 hrs. | | |
| | Palamara 04/22/10 | | 9:00 | 10:00 | | |
| | Miller | | ↓ | ↓ | | |
| | Spahn | | | | | |
| | Northrup | | | | | |
| | Total | | 2 | hrs. | | |
| | ~~Palamara~~ 04/27/10 | | | | | |
| | Miller | | 9:30 | 15:15 | | |
| | Northrup | | 9:30 | 15:15 | | |
| | Total | | 11.5 | hrs. | | |

(11) REMARKS

GRAND TOTAL = 28.75 hrs.

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen Lynn
(15) DATE: 4/30/10

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# CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Pine View Fuel
(5) FIRE NUMBER: Break

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara 04/01/10 | | 8:30 | 13:30 | | |
| | Miller | | 8:30 | 13:30 | | |
| | Total | | 10 | hrs. | | |
| | ~~Palamara~~ 04/05/10 | | | | | |
| | ~~Miller~~ | | | | | |
| | ~~Spahn~~ | | | | | |
| | ~~Total~~ | | | | | |
| | Palamara 04/14/10 | | 8:45 | 12:00 | | |
| | Miller | | ↓ | ↓ | | |
| | Total | | 6.5 | hrs. | | |

(11) REMARKS

GRAND TOTAL = 16.5 hrs.

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen Lynn
(15) DATE: 4/30/10

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Prescribed by USDA-USDI (NWCG Handbook No. 2)

# 2009 BMFPD Chipping Form

**Client Information**

Date: 04/20/10

Name: Pine View Fuel Break

Address:

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 +1 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 04/20/10 | 04/30/10 | 04/30/10 | |
| Start Time: | 13:15 | 11:30 | 13:30 | |
| Stop Time: | 16:00 | 15:30 | 16:00 | |
| Total Time: | 2.75 hrs. | 3 hrs. | 2.5 hrs. | 8.25 hrs. |

# 2009 BMFPD Chipping Form

**Client Information**

Date: 04/01/10

Name:

Address: PineView Fuel Break

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 04/01/10 | 04/02/10 | 04/14/10 | |
| Start Time: | 8:30 | 11:00 | 8:45 | |
| Stop Time: | 13:30 | 15:00 | 12:00 | |
| Total Time: | 5 hrs. | 4 hrs. | 3.25 hrs. | 12.25 hrs. |

COPY
To S.O. 2/5/10

EXHIBIT B

GRANT REPORT/REIMBURSEMENT REQUEST

Colorado Forest Restoration Grant

4th pmt 2/5/10

Project Number: 536703

SB 71 60/40 match

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. Grant Award #: G-~~530831~~ 536703 | 2. Total Award Amount: $50,000 | 3. Community Protected: Meadow Glen Forest |

4. Make Payment To:

Name: Bouder Mountain Fire Protection District

Address: 1905 Linden Drive

Boulder, Colorado 80304

5. Period of Performance:

From: 9/1/2009

To: 12/31/2009

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.)

One and a half acres of mitigatioin was completed along Rembradnt Road (Figure 1), 2 acres where mitigated along Valley Lane (Figure 2), and 1.75 acres wher mitigated along Pine Brook Road (Figure 3) with the funds from Senete Bill 71 creating a shadded fuel break along this evacuation route. All work was completed to Colorado State Forrest Service recommended standards for shaded fuel breaks. This includes cutting down all trees marked by Colorado State Forrest Services personel. Stacking or contouring all logs greater than 6 inches in diameter. All slash less than 6 inches was chipped and chips were distributed on the property. Twenty six cubic yards of chips were generated.

1.5
2.0
1.75
5.25

7. Reimbursement Request: $4,705.32

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

| | Current Period | | | Project to Date | | |
|---|---|---|---|---|---|---|
| | Reimbursement Request Amount | Matching Funds | Total Costs | Reimbursement Request Amount | Matching Funds | Total Costs |
| Labor* | $4,705.32 | $4,705.32 | $9,410.64 | $27,319.07 | $25,934.07 | $53,253.14 |
| Material** | | | | | | |
| Total | $4,705.32 | $4,705.32 | $9,410.64 | $27,319.07 | $25,934.07 | $53,253.14 |

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

* Use actual costs or $17.55/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 : $

9. I request reimbursement in the amount of $_____4,705.32__ for the work completed and documented above. I certify that to the best of my knowledge and belief this report is correct and complete an that all outlays reported are for the purposes set forth in the grant award documents.

Signature: [signature] Date: 1/29/10

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

Work meets minimum standards as set forth by CSFS.

Signature: [signature] Date: 2/3/10

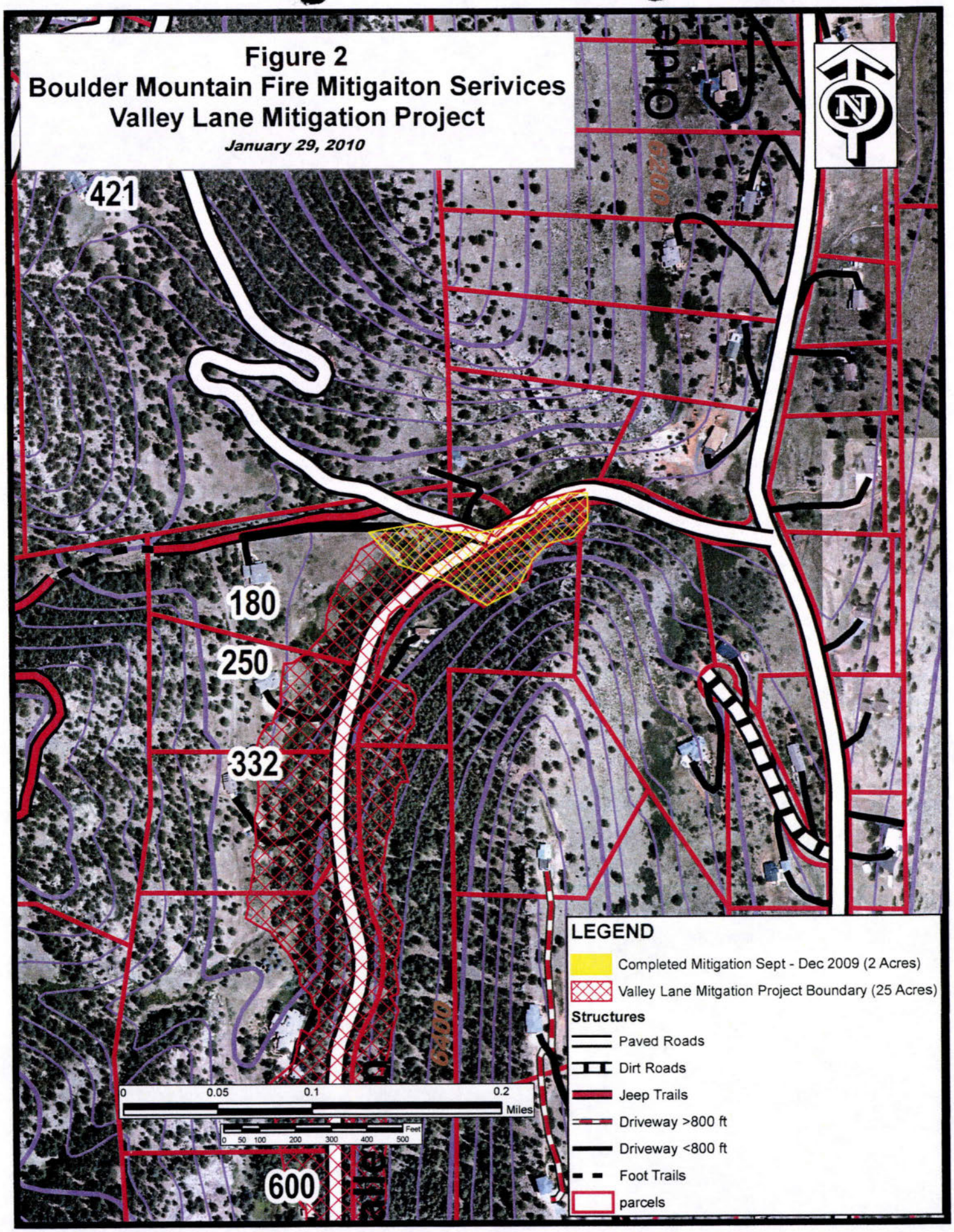
Figure 2
Boulder Mountain Fire Mitigaiton Serivices
Valley Lane Mitigation Project
January 29, 2010
421
180
250
332
600
6200
6400
N
0
0.05
0.1
0.2
Miles
Feet
0 50 100 200 300 400 500
LEGEND
Completed Mitigation Sept - Dec 2009 (2 Acres)
Valley Lane Mitgation Project Boundary (25 Acres)
Structures
Paved Roads
Dirt Roads
Jeep Trails
Driveway >800 ft
Driveway <800 ft
Foot Trails
parcels

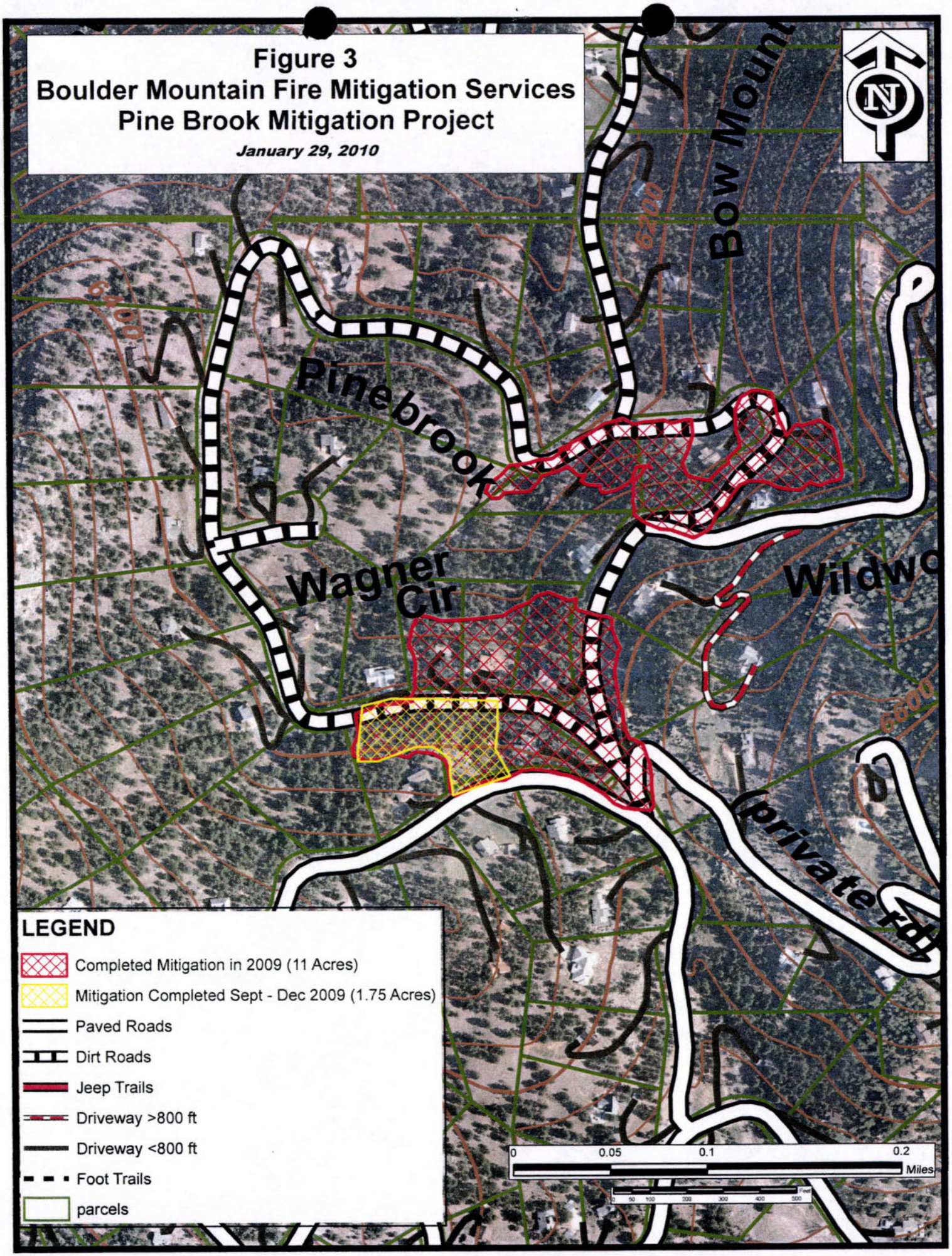
Figure 3
Boulder Mountain Fire Mitigation Services
Pine Brook Mitigation Project
January 29, 2010
N
Bow Mount
6200
6400
Pinebrook
Wagner Cir
Wildwo
6600
(private rd)
LEGEND
Completed Mitigation in 2009 (11 Acres)
Mitigation Completed Sept - Dec 2009 (1.75 Acres)
Paved Roads
Dirt Roads
Jeep Trails
Driveway >800 ft
Driveway <800 ft
Foot Trails
parcels
0
0.05
0.1
0.2
Miles
Feet

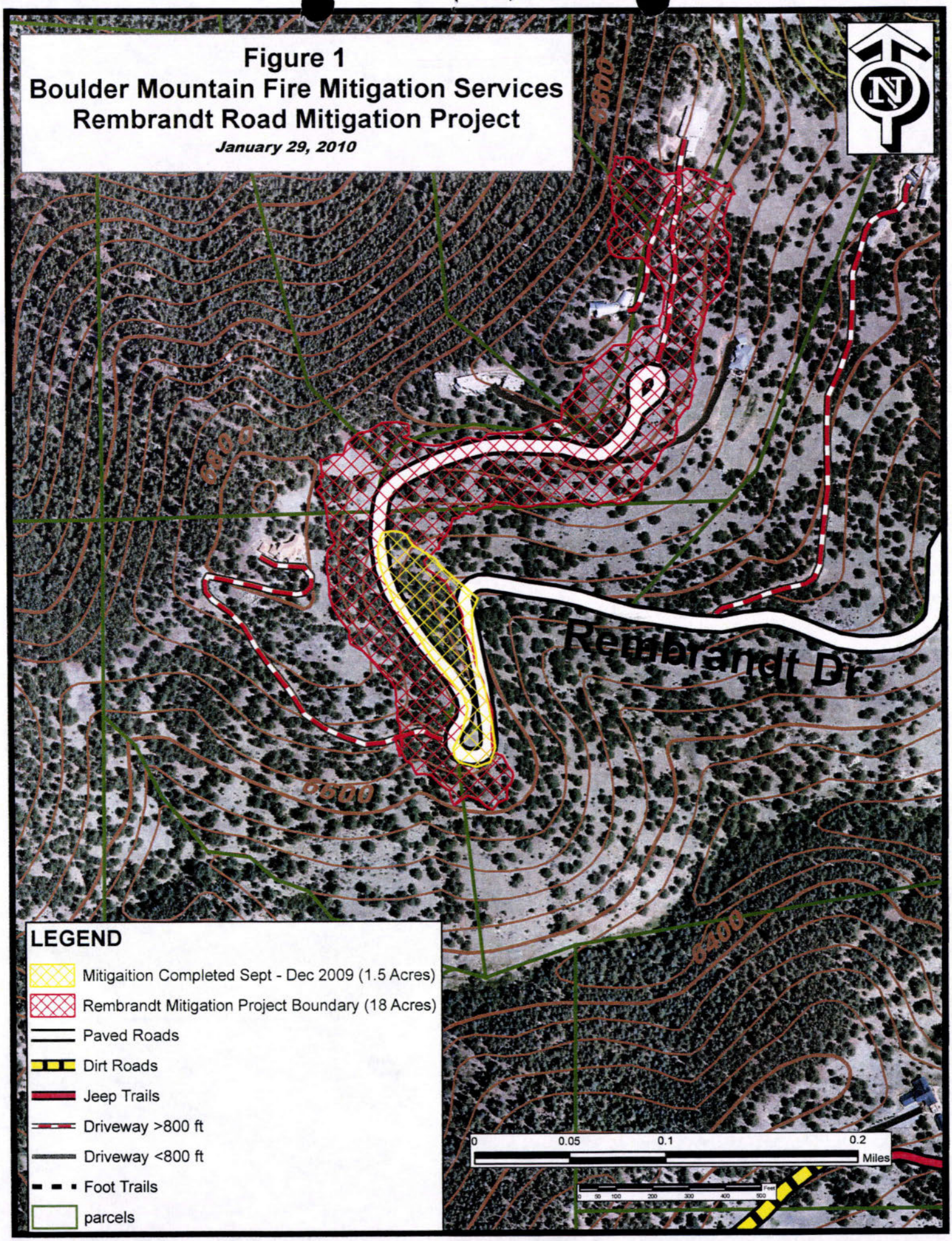
Figure 1
Boulder Mountain Fire Mitigation Services
Rembrandt Road Mitigation Project
January 29, 2010
N
6600
6800
6500
6400
Rembrandt Dr.
LEGEND
Mitigaition Completed Sept - Dec 2009 (1.5 Acres)
Rembrandt Mitigation Project Boundary (18 Acres)
Paved Roads
Dirt Roads
Jeep Trails
Driveway >800 ft
Driveway <800 ft
Foot Trails
parcels
0
0.05
0.1
0.2
Miles
Feet

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Pinebrook
(5) FIRE NUMBER: Fuel Break

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara | 11/03/09 | 9:00 | 15:30 | | |
| | Total | | 6.5 hrs. | | | |
| | Palamara | 11/04/09 | 9:00 | 16:00 | | |
| | Total | | 7 hrs. | | | |

(11) REMARKS

GRAND TOTAL = 13.5 hrs.

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit. Coord.
(14) NAME (Person Posting to Emergency Time Report): Stephen Lym
(15) DATE: 12/31/09

261-101 PRINTED ON RECYCLED PAPER
STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Pinebrook Loop
(5) FIRE NUMBER: Fuel Break

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara | 12/01/09 | 10:30 | 12:30 | | |
| | Miller | | 10:30 | 12:30 | | |
| | Total | | 4 hrs. | | | |

(11) REMARKS

GRAND TOTAL = 4 hrs.

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit. Coord.
(14) NAME (Person Posting to Emergency Time Report): Stephen Lynn
(15) DATE: 12/31/09

261-101 PRINTED ON RECYCLED PAPER
STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# 2009 BMFPD Chipping Form

**Client Information**

Date: 11/03/09

Name: Pinebrook Loop Fuel Break

Address:

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 11/03/09 | 11/04/09 | 11/05/09 | |
| Start Time: | 9:00 | 9:00 | 9:30 | |
| Stop Time: | 15:30 | 16:00 | 12:30 | |
| Total Time: | 6.5 hrs. | 7 hrs. | 3 hrs. | 16.5 hrs. |

✓ SL 12/31/09

# 2009 BMFPD Chipping Form

**Client Information**

Date: 12/01/09

Name:

Address: Pinebrook Loop Fuel Break

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 12/01/09 | | | |
| Start Time: | 12:30 | | | |
| Stop Time: | 17:15 | | | |
| Total Time: | 4.75 hrs. | | | 4.75 hrs. |

SL
12/31/09

# CREW TIME REPORT

(1) CREW NAME: BMFPD - Steve Lynn
(2) CREW NUMBER: 3
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Rembrandt
(5) FIRE NUMBER: 1189-1451

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| 1189 | Lynn, Steve | 10/21/09 | 1500 | 1700 | = 2.0 hrs | |
| 1426 | Lynn, Steve | 11/2/09 | 1600 | 1800 | = 2.0 hrs | |
| 1189 | Lynn, Steve | 11/9/09 | 1300 | 1700 | = 4.0 hrs | |
| 1450 | Lynn, Steve | 11/10/09 | 1300 | 1500 | = 2.0 hrs | |
| 1451 | Lynn, Steve | 11/11/09 | 0900 | 1100 | = 2.0 hrs | |
| 1417 | Lynn, Steve | 11/12/09 | 1100 | 1200 | 1.0 hrs | |

(11) REMARKS: Grand Total = 13 hrs

Marking boundaries with orange tape
GPS Logging of boundary +
Marking trees to remove with blue paint

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 12/22/09

261-101 PRINTED ON RECYCLED PAPER
STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Rembrandt Fuel
(5) FIRE NUMBER: Break

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara | 12/14/09 | 9:00 | 10:00 | | |
| | Miller | | | | | |
| | Bozeman | | | | | |
| | Tate | | | | | |
| | Total | | 4 | hrs. | | |
| | Palamara | 12/16/09 | 9:00 | 16:00 | | |
| | Total | | 7 hrs. | | | |

(11) REMARKS: Grand Total = 11 hrs

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit Coord.
(14) NAME (Person Posting to Emergency Time Report): Stephen Lynn
(15) DATE: 12/31/09

261-101 PRINTED ON RECYCLED PAPER
STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# 2009 BMFPD Chipping Form

**Client Information**

Date: 12/16/09

Name:

Address: Rembrandt Road Fuel Break

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 12/16/09 | 12/17/09 | | |
| Start Time: | 9:00 | 11:00 | | |
| Stop Time: | 16:00 | 12:30 | | |
| Total Time: | 7 hrs. | 1.5 hrs. | | 8.5 hrs |

SL
12/31/09

# 2009 BMFPD Chipping Form

**Client Information**

Date: 11/23/09

Name: Rembrandt Road

Address:

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 11/23/09 | | | |
| Start Time: | 9:30 | | | |
| Stop Time: | 16:00 | | | |
| Total Time: | 6.5 hrs. | | | 6.5 hrs. |

12/31/09

# CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Rembrandt Road
(5) FIRE NUMBER:

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) OFF | (10) DATE Military Time ON | (10) OFF |
|---|---|---|---|---|---|---|
| | Palamara | 11/23/09 | 9:30 | 16:00 | | |
| | Bozeman | | 9:30 | 16:00 | | |
| | Total | | 13 hrs. | | | |

(11) REMARKS

GRAND TOTAL = 13 hrs.

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit Coord.
(14) NAME (Person Posting to Emergency Time Report): Stephen Lynn
(15) DATE: 12/31/09

61-101 PRINTED ON RECYCLED PAPER

STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# CREW TIME REPORT

(1) CREW NAME: BMFPD M[redacted] Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE [redacted]RE: BMFPD
(4) FIRE NAME:
(5) FIRE NUMBER: Rembrandt Fuel Break

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) OFF | (10) DATE Military Time ON | (10) OFF |
|---|---|---|---|---|---|---|
| | J. Miller | 09/01/09 | 9:00 | 11:00 | | |
| | Total | | 2 hrs. | | | |

(11) REMARKS

Grand total = 2.0 hrs

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit Coord
(14) NAME (Person Posting to Emergency Time Report): Stephen Lynn
(15) DATE: 12/31/09

261-101 PRINTED ON RECYCLED PAPER

STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# CREW TIME REPORT

(1) CREW NAME: BMFPD Mi[illegible] Crew

(2) CREW NUMBER: 1

(3) OFFICE RESPONSIBLE FO[illegible]RE: BMFPD

(4) FIRE NAME: Rembrandt Road

(5) FIRE NUMBER: Fuel Break

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara | 11/30/09 | 11:00 | 13:30 | | |
| | Total | | 2.5 hrs. | | | |

(11) REMARKS

Grand Total = 2.5 hrs

(12) OFFICER-IN-CHARGE (Signature): [illegible]

(13) TITLE (Officer-in-Charge): Mit Coord

(14) NAME (Person Posting to Emergency Time Report): Stephen Lynn

(15) DATE: 12/31/09

261-101

PRINTED ON RECYCLED PAPER

STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# 2009 BMFPD Chipping Form

**Client Information**

Date: 09/01/09

Name: Rembrandt Fuel Break

Address:

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 +1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 09/01/09 | | | |
| Start Time: | 9:00 | | | |
| Stop Time: | 13:00 | | | |
| Total Time: | 6 hrs. | | | 6.0 hrs |

SH
12/31/K

# 2009 BMFPD Chipping Form

**Client Information**

Date: 11/30/09

Name:

Address: Rembrandt Fuel Break

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 11/30/09 | 12/01/09 | | |
| Start Time: | 11:00 | 8:45 | | |
| Stop Time: | 13:30 | 10:30 | | |
| Total Time: | 2.5 hrs. | 1.75 hrs. | | 4.25 hrs. |

SL 12/31/09

# CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Valley Lane Fuel Break
(5) FIRE NUMBER:

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara | 11/17/09 | 12:00 | 16:00 | | |
| | Total | | 4 hrs. | | | |
| | Palamara | 11/25/09 | 10:00 | 12:30 | | |
| | Total | | 2.5 hrs. | | | |

(11) REMARKS

Grand Total = 6.5 hrs.

(12) OFFICER-IN-CHARGE (Signature): Stephen Lynn
(13) TITLE (Officer-in-Charge): Mit Coord
(14) NAME (Person Posting to Emergency Time Report): Stephen Lynn
(15) DATE: 12/31/09

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STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME:
(5) FIRE NUMBER: Valley Lane Proje

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara | 10/08/09 | 13:00 | 14:30 | | |
| | J. Miller | | ↓ | ↓ | | |
| | Bozeman | | | | | |
| | C. Miller | | | | | |
| | Total | | 6 hrs. | | | |

(11) REMARKS

Grand Total = 6 hrs

(12) OFFICER-IN-CHARGE (Signature): Stephen Lynn
(13) TITLE (Officer-in-Charge): Mit Coord
(14) NAME (Person Posting to Emergency Time Report): Stephen Lynn
(15) DATE: 12/31/09

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STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# CREW TIME REPORT

(1) CREW NAME: BMFPD - Steve Lyn[redacted]
(2) CREW NUMBER: 3
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Valley Lane
(5) FIRE NUMBER: 180-1130

| (6) ~~REMARKS~~ NO. | (7) NAME OF EMPLOYEE (# on Valley Lane) | (8) CLASSIFICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| 649 | Lynn, Steve | 11/2/09 | 0540 | 1200 | = 4.0 hrs | |
| 1127 | Lynn, Steve | 11/3/09 | 0800 | 1600 | = 4.0 hrs | |
| 1127 | Lynn, Steve | 11/4/09 | 1300 | 1700 | = 4.0 hrs | |
| 1130 | Lynn, Steve | 11/5/09 | 0800 | 1700 | = 9.0 hrs | |
| | Total = 21.0 hrs | | | | | |

(11) REMARKS: Grand Total = 21.0 hrs

Marking boundaries in orange tape, GPS logging boundaries, + Painting trees blue to remove.

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): M.T Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen Lynn
(15) DATE: 11/5/09

261-101 PRINTED ON RECYCLED PAPER
STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# CREW TIME REPORT

(1) CREW NAME: BMFPD [redacted] Steve Lynn
(2) CREW NUMBER: 3
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Valley Lane
(5) FIRE NUMBER: 180-1130

| (6) ~~REMARKS~~ NO. | (7) NAME OF EMPLOYEE (Address # on Valley) | (8) CLASSIFICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| 250 | Lynn, Steve | 9/28/09 | 1230 | 1400 | = 1.5 hrs | |
| | | | Total 9/28/09 = 1.5 hrs | | | |
| 314 | Lynn, Steve | 10/5/09 | 1600 | 1730 | = 1.5 hrs | |
| | | | Total 10/5/09 = 1.5 hr. | | | |
| 688 | Lynn, Steve | 10/13/09 | 1000 | 1100 | = 1.0 hrs | |
| 900 | Lynn, Steve | 10/13/09 | 1100 | 1230 | = 1.5 hrs | |
| 1130 | Lynn, Steve | 10/13/09 | 1600 | 1700 | = 1.0 hrs | |
| 980 | Lynn, Steve | 10/13/09 | 1700 | 1730 | 0.5 hrs | |
| | | | Total 10/13/09 = 4.0 hrs | | | |
| 848 | Lynn, Steve | 10/14/09 | 1700 | 1900 | = 2.0 hrs | |
| | | | Total 10/14/09 = 2.0 hr. | | | |
| 848 | Lynn, Steve | 10/15/09 | 1300 | 1400 | = 1.0 hrs | |
| 68 | | | ~~Total 10/14/09 = 1.0 hrs~~ | | | |
| 688 | Lynn, Steve | 10/15/09 | 1500 | 1630 | = 2.5 | |
| | | | Total 10/15/09 = 2.5 | | | |
| 1026 | Lynn, Steve | 10/18/09 | 1000 | 1100 | = 1.0 hr | |
| | | | Total 10/18/09 = 1.0 | | | |

(11) REMARKS: Grand Total 9/28/09 - 10/30/09 = 12.5 hrs

Marking Boundaries, Painting Trees, + GPSing Boundaries.

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): M.T Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 10/30/09

261-101 PRINTED ON RECYCLED PAPER
STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# 2009 BMFPD Chipping Form

**Client Information**

Date: 11/17/09

Name:

Address: Valley Lane Fuel Break

Phone:

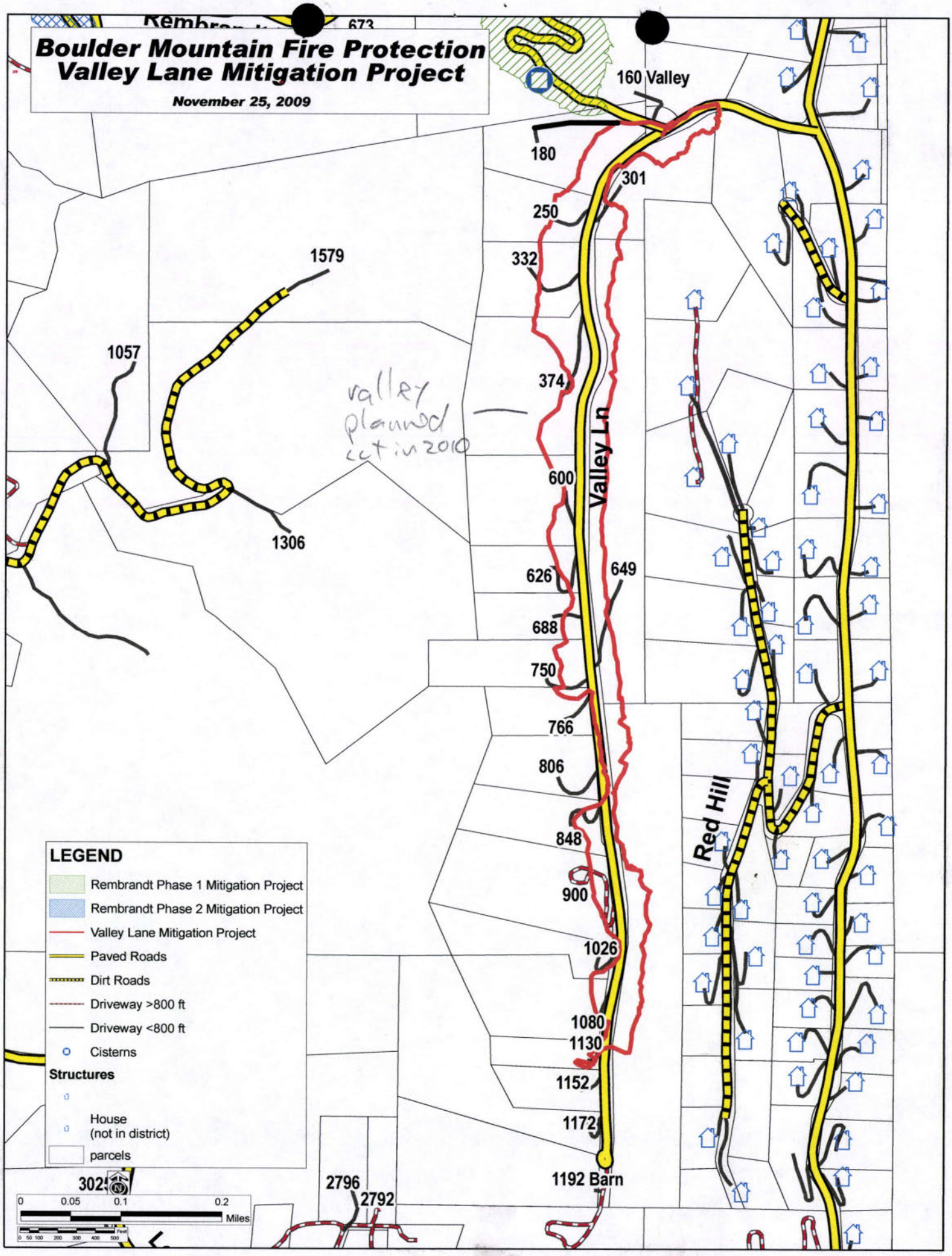
Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 11/17/09 | 11/19/09 | 11/25/09 | |
| Start Time: | 12:00 | 13:00 | 10:00 | |
| Stop Time: | 16:00 | 16:00 | 12:30 | |
| Total Time: | 4 hrs. | 3 hrs. | 2.5 hrs. | 9.5 hrs. |

SV
12/31/09


Boulder Mountain Fire Protection
Valley Lane Mitigation Project
November 25, 2009
160 Valley
180
301
250
332
1579
1057
374
valley planned cut in 2010
Valley Ln
600
1306
626
649
688
750
766
806
Red Hill
848
900
1026
1080
1130
1152
1172
1192 Barn
2796
2792
LEGEND
Rembrandt Phase 1 Mitigation Project
Rembrandt Phase 2 Mitigation Project
Valley Lane Mitigation Project
Paved Roads
Dirt Roads
Driveway >800 ft
Driveway <800 ft
Cisterns
Structures
House
(not in district)
parcels
0 0.05 0.1 0.2
Miles

4th payment given

3rd payment

EXHIBIT B

GRANT REPORT/REIMBURSEMENT REQUEST

Colorado Forest Restoration Grant

Project Number: 536703

SB 71 60/40 match

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. Grant Award #: ~~G-530831~~ 536703 | 2. Total Award Amount: $50,000 | 3. Community Protected: Meadow Glen Forest |

| | |
|---|---|
| 4. Make Payment To: | 5. Period of Performance: |
| Name: Bouder Mountain Fire Protection District | From: 8/1/2009 |
| Address: 1905 Linden Drive | To: 8/31/2009 |
| Boulder, Colorado 80304 | |

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.)

Mitigatioin was completed along Rembradnt Road with the funds from Senate Bill 71 creating a shadded fuel break along this evacuation route. All work was completed to Colorado State Forest Service recommended standards for shaded fuel breaks. This includes cutting down all trees marked by Colorado State Forrest Services personel. Stacking or contouring all logs greater than 6 inches in diameter. All slash less than 6 inches was chipped and chips were distributed on the property. Twenty six cubic yards of chips were generated.

- No map -

7. Reimbursement Request: $13,712.50

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

| | Current Period | | | Project to Date | | |
|---|---|---|---|---|---|---|
| | Reimbursement Request Amount | Matching Funds | Total Costs | Reimbursement Request Amount | Matching Funds | Total Costs |
| Labor* | $13,712.50 | $13,712.50 | $27,425.00 | $22,613.75 | $21,228.75 | $43,842.50 |
| Material** | | | | | | |
| Total | $13,712.50 | $0.00 | $27,425.00 | $22,613.75 | $21,228.75 | $43,842.50 |

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

* Use actual costs or $17.55/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 : $

9. I request reimbursement in the amount of $_____13,713.5_ for the work completed and documented above. I certify that to the best of my knowledge and belief this report is correct and complete an that all outlays reported are for the purposes set forth in the grant award documents.

Signature: [signature] Date: 9/2/09

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

Work meets minimum standards as set forth by CSFS.

Signature: [signature] Date: 10/4/09

# 2009 BMFPD Chipping Form

**Client Information**

Date: 08/10/09

Name:

Address: Rembrandt Fuel Break

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 +1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 08/13/09 | | | |
| Start Time: | 11:00 | | | |
| Stop Time: | 15:00 | | | |
| Total Time: | 6 hrs. | | | |

# 2009 BMFPD Chipping Form

**Client Information**

Date: 08/19/09

Name:

Address: Rembrant

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 19 Aug 09 | | | |
| Start Time: | 1340 | | | |
| Stop Time: | 1510 | | | |
| Total Time: | 1:~~30~~ | | | 1.5 hrs. |

# 2009 BMFPD Chipping Form

**Client Information**

Date: 08/07/09

Name: Rembrandt Road Fuel Break

Address:

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 08/09/09 | 08/10/09 | 08/10/09 | |
| Start Time: | 12:30 | 9:00 | 11:30 | |
| Stop Time: | 15:30 | 11:00 | 16:00 | |
| Total Time: | 3 hrs. | 2 hrs. | 4.5 hrs. | 9.5 hrs |

# 2009 BMFPD Chipping Form

**Client Information**

Date: 08/03/09

Name:

Address: Rembrandt Road Fuel Break

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 +2 | Shift 2 | Shift 3 +1 | Grand Total |
|---|---|---|---|---|
| Date: | 08/03/09 | 08/05/09 | 08/06/09 | |
| Start Time: | 8:30 | 11:30 | 10:00 | |
| Stop Time: | 16:00 | 12:15 | 15:30 | |
| Total Time: | 15 hrs. | .75 hrs. | 8.25 hrs. | 24 hrs. |

8:30-16:30
Rembrandt
8/4
M - 7:15
J - 6:15
G - 7:30
D - 7:15
Rob - 7:00
Ry - 7:15
Lt -

Other - 8:30-16:15
8/5
6:30
4:45
6:15
5:45
2:00
8:30

# 2009 BMFPD Chipping Form

**Client Information**

Date: 08/25/09

Name: Rembrandt Fuel Break

Address:

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 08/25/09 | 08/28/09 | 08/27/09 | |
| Start Time: | 9:00 | 8:45 | 9:00 | |
| Stop Time: | 16:00 | 10:45 | 16:30 | |
| Total Time: | 7 hrs. | 2 hrs. | 7.5 hrs. | 16.5 hrs. |

# CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Rembrandt
(5) FIRE NUMBER:

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Miller | 8/19/09 | 8:00 | 1200 | | |
| | Northrup | | ↓ | ↓ | | |
| | Kabal | | | | | |
| | TOTAL | | | 12 hrs | | |

(11) REMARKS

GRAND TOTAL 12 hrs

(12) OFFICER IN CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 9/2/09

261-101 PRINTED ON RECYCLED PAPER STANDARD FORM 261 (5/78) Prescribed by USDA-USDI (NWCG Handbook No. 2)

# CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Rembrandt
(5) FIRE NUMBER: Fuel Break

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | C. Miller | 08/11/09 | 14:30 | 16:30 | | |
| | Northrup | | 14:30 | 16:30 | | |
| | Total | | 4 | hrs. | | |
| | Kabal | 08/13/09 | 13:00 | 16:00 | | |
| | Tate | | ↓ | ↓ | | |
| | J. Miller | | | | | |
| | Total | | 9 | hrs. | | |
| | ~~J. Miller~~ | ~~08/13/09~~ | ~~13:00~~ | | | |
| | ~~Tate~~ | | ↓ | | | |
| | ~~Kabal~~ | | | | | |
| | Total | | | | | |

(11) REMARKS

GRAND TOTAL = 13 hrs

(12) OFFICER IN CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 9/2/09

261-101 PRINTED ON RECYCLED PAPER STANDARD FORM 261 (5/78) Prescribed by USDA-USDI (NWCG Handbook No. 2)

# CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Rembrandt Fuel Break
(5) FIRE NUMBER:

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | J. Miller 08/25/09 | | 9:00 | 16:00 | | |
| | Kabal | | ↓ | ↓ | | |
| | Tate | | | | | |
| | Total | | 21 hrs. | | | |
| | ~~Palamara 08/27/09~~ | | ~~9:00~~ | ~~16:30~~ | | |
| | ~~Kabal~~ | | ~~↓~~ | ~~↓~~ | | |
| | ~~C. Miller~~ | | | | | |
| | ~~Total~~ | | ~~22.5 hrs.~~ | | | |
| | Palamara 08/29/09 | | 9:00 | 16:30 | | |
| | Kabal | | 9:00 | 16:30 | | |
| | Tate | | 9:00 | 15:30 | | |
| | Total | | 21.5 hrs. | | | |
| | Palamara 08/31/09 | | 9:30 | 16:00 | | |
| | Dave | | ↓ | ↓ | | |
| | C. Miller | | | | | |
| | Total | | 17.5 hrs. | | | |

(11) REMARKS

GRAND TOTAL = 60 hrs.

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 9/2/09

261-101 PRINTED ON RECYCLED PAPER STANDARD FORM 261 (5/78) Prescribed by USDA-USDI (NWCG Handbook No. 2)

# CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Rembrandt Road Fuel Break
(5) FIRE NUMBER:

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara 08/03/09 | | 8:30 | 16:00 | | |
| | Blue | | ↓ | ↓ | | |
| | Kabal | | | | | |
| | Total | | 22.5 hrs. | | | |
| | Palamara 08/04/09 | | 8:30 | 16:30 | | |
| | J. Miller | | ↓ | ↓ | | |
| | Northrup | | | | | |
| | Kabal | | | | | |
| | Tate | | | | | |
| | Total | | 40 hrs. | | | |
| | Tate 08/06/09 | | 8:30 | 15:30 | | |
| | C. Miller | | 8:30 | 15:30 | | |
| | Total | | 14 hrs. | | | |
| | Palamara 08/10/09 | | 9:00 | 13:30 | | |
| | Kabal | | 9:00 | 13:30 | | |
| | J. Miller | | 9:00 | 12:30 | | |
| | Northrup | | 9:00 | 11:30 | | |
| | Total | | 15 hrs. | | | |

(11) REMARKS

GRAND TOTAL = 91.5 hrs.

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 9/2/09

261-101 PRINTED ON RECYCLED PAPER STANDARD FORM 261 (5/78) Prescribed by USDA-USDI (NWCG Handbook No. 2)

Form 828 - Rev.03/08/07

Colorado State University

# 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)~~ SB 071 | X |
| 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) | |

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

Name: Boulder Mountain Fire Protection District

Address: 1905 Linden Drive

Boulder, CO 80304

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.

CFR Grant - SB 071

Grant Number: 536703-03-B0

Cooperator Match: $7,516.25

Approved Funding: $50,000

Total Project: $16,417.50

Project to date Note: overmatche 1st payment

CSFS Account Number: 536703-5980

Amount of Payment: $4,818.75

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

Approved by _____ (Program manager signature)

Date: 8/17/09

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

Recvd 8/11/09

# EXHIBIT B

## GRANT REPORT/REIMBURSEMENT REQUEST

Colorado Forest Restoration Grant

Project Number: 536703

SB 71 60/40 match

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.**

536703

| 1. Grant Award #: G-~~530831~~ | 2. Total Award Amount: $50,000 | 3. Community Protected: Meadow Glen Forest |
|---|---|---|

| 4. Make Payment To: | | 5. Period of Performance: | |
|---|---|---|---|
| Name: | Bouder Mountain Fire Protection District | From: | 6/1/2009 |
| Address: | 1905 Linden Drive | To: | 7/31/2009 |
| | Boulder, Colorado 80304 | | |

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.)

For this portion of the project a total 3 acres of forrest was mitigated within 150 feet of Reed Ranch Road and 1.6 acres within 150 of Rembradnt Road with the funds from Senete Bill 71 creating a shadded fuel break along this evacuation route. All work was completed to Colorado State Forrest Service recommended standards for shaded fuel breaks. This includes cutting down all trees marked by Colorado State Forrest Services personel. Stacking or contouring all logs greater than 6 inches in diameter. All slash less than 6 inches was chipped and chips were distributed on the property. Twenty six cubic yards of chips were generated.

7. Reimbursement Request: $4,818.75

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

| | Current Period | | | Project to Date | | |
|---|---|---|---|---|---|---|
| | Reimbursement Request Amount | Matching Funds | Total Costs | Reimbursement Request Amount | Matching Funds | Total Costs |
| Labor* | $4,818.75 | $0.00 | $4,818.75 | $8,901.25 | $7,516.25 | $16,417.50 |
| Material** | | | | | | |
| Total | $4,818.75 | $0.00 | $4,818.75 | $8,901.25 | $7,516.25 | $16,417.50 |

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

* Use actual costs or $17.55/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 : $

9. I request reimbursement in the amount of $_____4,818.75_ for the work completed and documented above. I certify that to the best of my knowledge and belief this report is correct and complete an that all outlays reported are for the purposes set forth in the grant award documents.

Signature: [signature] Date: 8/7/09

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

Work meets minimum standards as set forth by CSFS.

Signature: Robert A. Berg Date: 8/17/09

CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME:
(5) FIRE NUMBER: Rembrandt Fuel Break

| (6) REMARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIFICATION | (9) DATE | Military Time ON | Military Time OFF | (10) DATE | Military Time ON | Military Time OFF |
|---|---|---|---|---|---|---|---|---|
| | Palamara | 07/01/09 | 13:00 | 16:00 | | | | |
| | Bozeman | | | | | | | |
| | Kabal | | | | | | | |
| | Olme | | | | | | | |
| | Northrup | | | | | | | |
| | J. Miller | | | | | | | |
| | Total 7/1/09 18 hrs. | | | | | | | |
| | Palamara | 07/02/09 | 10:00 | 16:00 | | | | |
| | Olme | | | | | | | |
| | Kabal | | | | | | | |
| | Northrup | | | | | | | |
| | Kabal | | | | | | | |
| | Tate | | | | | | | |
| | C. Miller | | | | | | | |
| | Total 7/2/09 12 hrs. | | | | | | | |
| | Palamara | 07/09/09 | 10:00 | 14:00 | | | | |
| | Olme | | | | | | | |
| | Northrup | | | | | | | |
| | Kabal | | | | | | | |
| | Total 7/9/09 16 hrs. | | | | | | | |

(11) REMARKS

GRAND TOTAL = 76 hrs.

OFFICER-IN-CHARGE (Signature): Stephen M. Lynn
(13) TITLE (Officer-in-Charge): Mit Coordinator
NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 7/31/09

261-101 PRINTED ON RECYCLED PAPER
STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

CREW TIME REPORT

(1) CREW NAME: Rembrandt 7-6-09
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME:
(5) FIRE NUMBER: Rembrandt Road

| (6) REMARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIFICATION | (9) DATE | Military Time ON | Military Time OFF | (10) DATE | Military Time ON | Military Time OFF |
|---|---|---|---|---|---|---|---|---|
| | Miller | | 7/6/09 | 0830 | 1630 | 8 hrs | | |
| | Northrup | | | | | | | |
| | Olme | | | | | | | |
| | Bozeman | | | | | | | |
| | Miller-C | | | | | | | |
| | Blue | 48 | | | | | | |
| | Tate | | 0830 | 1400 | 6.5 | | | |
| | 7-6 | | Total | | ~~54.5~~ | | | |
| | Total 53.5 hrs. | | | | | | | |

(11) REMARKS

Grand Total = 53.5 hours

(12) OFFICER-IN-CHARGE (Signature): Stephen M. Lynn
(13) TITLE (Officer-in-Charge): Mit Coordinator
(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn
(15) DATE: 7/31/09

261-101 PRINTED ON RECYCLED PAPER
STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME:
(5) FIRE NUMBER: Reed Ranch Fuel Break

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE | Military Time ON | Military Time OFF | (10) DATE | Military Time ON | Military Time OFF |
|---|---|---|---|---|---|---|---|---|
| | Palamara | 06/23/09 | | 14:45 | 16:00 | | | |
| | J. Miller | ↓ | | 14:45 | 16:00 | | | |
| | C. Miller | ↓ | | 14:45 | 16:00 | | | |
| | Total | 6/23/09 | | 3.75 hrs. | | | | |

) REMARKS

Grand Total = 3.75

OFFICER-IN-CHARGE (Signature)
(13) TITLE (Officer-in-Charge)
NAME (Person Posting to Emergency Time Report)
(15) DATE

101 PRINTED ON RECYCLED PAPER
STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME:
(5) FIRE NUMBER: Reed Ranch Fuel Break

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE | Military Time ON | Military Time OFF | (10) DATE | Military Time ON | Military Time OFF |
|---|---|---|---|---|---|---|---|---|
| | Palamara | 07/16/09 | | 12:30 | 16:30 | | | |
| | Northrup | | | ↓ | ↓ | | | |
| | Olme | | | | | | | |
| | C. Miller | | | | | | | |
| | Total | | | 16 hrs. | | | | |
| | Lynn, S | 7/23/09 | | 0830 | 1430 | | | |
| | Miller, C | ↓ | | 0830 | 1230 | | | |
| | Olme, K | ↓ | | 0830 | 1430 | | | |
| | ~~Northrup, G~~ | | | | | | | |
| | ~~Kabell~~ | | | | | | | |
| | Total 7/23/09 = 16 hrs | | | | | | | |

(11) REMARKS

GRAND TOTAL = 32 hrs.

(12) OFFICER-IN-CHARGE (Signature)
(13) TITLE (Officer-in-Charge)
(14) NAME (Person Posting to Emergency Time Report)
(15) DATE

261-101 PRINTED ON RECYCLED PAPER
STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# 2009 BMFPD Chipping Form

**Client Information**

Date: 06/10/09

Name: Reed Ranch Break

Address:

Phone:

Broadcast ☒ Pile ☐ Downhill ☐ Uphill ☒

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 06/10/09 | 7/23/09 | | |
| Start Time: | 11:00 | 0830 | | |
| Stop Time: | 12:00 | 1430 | | |
| Total Time: | 1 hr. | 6.0 | | 7 hr. |

# 2009 BMFPD Chipping Form

**Client Information**

Date: 07/07/09

Name:

Address: Rembrandt Fuel Break

Phone:

Broadcast ☒ Pile ☐ Downhill ☒ Uphill ☒

Special Instructions:

**Onsite Chipping**

| | Shift 1 +1 | Shift 2 +2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 07/07/09 | 07/17/09 | 07/17/09 | |
| Start Time: | 9:15 | 9:30 | 12:00 | |
| Stop Time: | 16:15 | 12:00 | 12:30 | |
| Total Time: | 10.5 hrs. | 5 hrs. | .5 hrs. | 16 hrs. |

# 2009 BMFPD Chipping Form

**Client Information**

Date: 07/27/09

Name:

Address: Rembrandt Fuel Break

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 +2 | Shift 2 +1 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 07/27/09 | 07/28/09 | | |
| Start Time: | 10:45 | 11:30 | | |
| Stop Time: | 14:00 | 16:30 | | |
| Total Time: | 6.5 hrs. | 7.5 hrs. | | 14.0 hours |

Form 828 - Rev.03/08/07

COPY

Please Note: This is the 1st reimbursement request against AFE # 415811. Please ensure that $45,917.50 remains as an "OPEN COMMITTMENT"/ENCUM on this AFE and ACCT # 536703-5980 follow your processing this payment. Thanks, Karen Carli CSFS 06-12-09 (970) 491-30

Colorado State University

# 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)~~ SB071 | ✓ |
| 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) | |

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

Name: Boulder Mountain Fire Protection District

Address: 1905 Linden Drive
Boulder, Colorado 80304

**Approved for Payment**
**C.S.F.S.**
A 415811
06-10-09
kc

COPY

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.

CFR Grant - SB071

Grant Number: 536703-03-BO

Cooperator Match: $5,080.00 55%

Approved Funding: $50,000

Total Project: $9,162.50

CSFS Account Number: 536703-5980

Amount of Payment: $4,082.50 44%

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

Approved by _____ (Program manager signature) Date: 6/8/09

Approved by _____ (SB071 Program Manager Signature) Date: 6-12-09

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

EXHIBIT B

GRANT REPORT/REIMBURSEMENT REQUEST

Colorado Forest Restoration Grant

Project Number: 53 C 703-03-BO

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.**

536703-03-BO

| 1. Grant Award #: ~~G-530081~~ | 2. Total Award Amount: $50,000 | 3. Community Protected: Meadow Glen Forest |
|---|---|---|

| 4. Make Payment To: | | 5. Period of Performance: | |
|---|---|---|---|
| Name: | Bouder Mountain Fire Protection District | From: | 1/1/2009 |
| Address: | 1905 Linden Drive | To: | 5/31/2009 |
| | Boulder, Colorado 80304 | | |

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.)

For this portion of the project a total 2 acres of forrest was mitigated within 150 feet of Reed Ranch Road with the funds from Senete Bill 71 creating a shadded fuel break along this evacuation route. All work was completed to Colorado State Forrest Service recommended standards for shaded fuel breaks. This includes cutting down all trees marked by Colorado State Forrest Services personel. Stacking or contouring all logs greater than 6 inches in diameter. All slash less than 6 inches was chipped and chips were distributed on the property. Twenty six cubic yards of chips were generated.

7. Reimbursement Request: $4,082.50

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

| | Current Period | | | Project to Date | | |
|---|---|---|---|---|---|---|
| | Reimbursement Request Amount | Matching Funds | Total Costs | Reimbursement Request Amount | Matching Funds | Total Costs |
| Labor* | $4,082.50 | $5,080.00 | $9,162.50 | $4,082.50 | $5,080.00 | $9,162.50 |
| Material** | | | | | | |
| Total | $4,082.50 | $5,080.00 | $9,162.50 | $4,082.50 | $5,080.00 | $9,162.50 |

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

* Use actual costs or $17.55/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 : $

9. I request reimbursement in the amount of $_____4,082.5_ 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 grant award documents.

Signature: Stephen M Lin Date: 6/1/09

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

Work meets minimum standards as set forth by CSFS.

Signature: Rick Ory Date: 6/8/09

6/2/2009

# 2009 BMFPD Chipping Form

**Client Information**

Date: 2/24/09

Name: Meadow Glen Forest Hoit

Address: Read Ranch road

Phone:

Broadcast ☐ Pile ☐ Downhill ☐ Uphill ☐

Special Instructions:

**Onsite Chipping**

| | Shift 1 +/ | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 3/5/09 | 3/9/09 | | |
| Start Time: | 8:45 | 11:45 | | |
| Stop Time: | 10:45 | 14:30 | | |
| Total Time: | 2.25 | 2.75 | | 5 hrs |

# 2009 BMFPD Chipping Form

**Client Information**

Date: 03/05/09

Name:

Address: Reed Ranch Road

Phone:

Broadcast ☒ Pile ☐ Downhill ☐ Uphill ☒

Special Instructions:

**Onsite Chipping**

| | Shift 1 + 1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 03/05/09 | 03/23/09 | | |
| Start Time: | 14:30 | 11:00 | | |
| Stop Time: | 16:00 | 12:30 | | |
| Total Time: | 2.25 hrs. | 1.5 hrs. | | 4.75 hrs |

# CREW TIME REPORT

| (1) NAME | (2) CREW NUMBER |
|---|---|
| MFPD Mitigation Crew | 1 |

| (3) OFFICE RESPONSIBLE FOR FIRE | (4) FIRE NAME | (5) FIRE NUMBER |
|---|---|---|
| BMFPD | Lot 3 | Reed Ranch |

| (6) REMARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIFICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara | 2/2/09 | 0830 | 1230 | | |
| | Miller | ↓ | 0830 | 1230 | | |
| | Bozeman | ↓ | 0830 | 1600 | | |
| | Davis | ↓ | 0830 | 1600 | | |
| | Lynn | ↓ | 1030 | 1600 | | |
| | Total = 25.5 hrs. | | | | | |
| | Palamara | 02/10/09 | 8:30 | 12:00 | | |
| | Miller | | 8:30 | 12:00 | | |
| | Davis | | 8:30 | 12:00 | | |
| | Lynn | | 9:00 | 13:00 | | |
| | Total | | 14.5 hrs. | | | |
| | Palamara | 02/12/09 | 8:30 | 15:00 | | |
| | Davis | | 8:30 | 15:00 | | |
| | Miller | | 8:30 | 15:00 | | |
| | Total | | 19.5 hrs. | | | |

(11) REMARKS

Grand Total = 62.5 hours

(12) OFFICER-IN-CHARGE (Signature)

(13) TITLE (Officer-in-Charge) Mitigation Coordinator

(14) NAME (Person Posting to Emergency Time Report) Stephen M. Lynn

(15) DATE 2/27/09

261-101

PRINTED ON RECYCLED PAPER

STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# 2009 BMFPD Chipping Form

**Client Information**

Date: 02/02/09

Name:

Address: Reed Ranch

Phone:

Broadcast ☒ Pile ☐ Downhill ☐ Uphill ☒

Special Instructions:

**Onsite Chipping**

| | Shift 1 | Shift 2 | Shift 3 +1 | Grand Total |
|---|---|---|---|---|
| Date: | 02/02/09 | 02/03/09 | 02/10/09 | |
| Start Time: | 12:30 | 8:30 | 12:00 | |
| Stop Time: | 16:00 | 14:30 | 16:00 | |
| Total Time: | 3.5 hrs. | 6 hrs. | 6 hrs. | 15.5 |
| +1 | 02/16/09 | 02/17/09 +1 | | |
| | 11:30 | 14:00 | | |
| | 15:30 | 15:00 | | |
| | 6 hrs. | 1.5 hrs. | | 7.5 |

Grand total = 23.0

# 2009 BMFPD Chipping Form

**Client Information**

Date: 04/14/09

Name:

Address: Reed Ranch Road

Phone:

Broadcast ☒ Pile ☐ Downhill ☐ Uphill ☒

Special Instructions:

**Onsite Chipping**

| | Shift 1 +1 | Shift 2 | Shift 3 | Grand Total |
|---|---|---|---|---|
| Date: | 04/14/09 | | | |
| Start Time: | 10:00 ~~9:45~~ | | | |
| Stop Time: | 13:00 | | | |
| Total Time: | 4.5 hrs. | | | |

## CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME: Reed Ranch Road
(5) FIRE NUMBER: —

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara | 04/02/09 | 8:30 | 16:00 | | |
| | Davis | | 8:30 | 16:00 | | |
| | Miller | | 8:30 | 12:30 | | |
| | Asmuth | | 8:30 | 12:30 | | |
| | Total | | 23 hrs. | | | |

(11) REMARKS: Grand Total = 23 hours

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit Coord
(14) NAME (Person Posting to Emergency Time Report): Stephen Lynn
(15) DATE: 5/1/09

261-101 PRINTED ON RECYCLED PAPER STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

## CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew
(2) CREW NUMBER: 1
(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD
(4) FIRE NAME:
(5) FIRE NUMBER: Reed Ranch Road

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Palamara | 03/03/09 | 13:00 | 16:00 | | |
| | Miller | | 13:00 | 16:00 | | |
| | Bozeman | | 13:00 | 16:00 | | |
| | Total | | 9 hrs. | | | |
| | Miller | 03/16/09 | 8:30 | 15:00 | | |
| | Bozeman | | 8:30 | 15:00 | | |
| | Total | | 13 hrs. | | | |

(11) REMARKS: Grand Total = 22 hours

(12) OFFICER-IN-CHARGE (Signature): [signature]
(13) TITLE (Officer-in-Charge): Mit Coord
(14) NAME (Person Posting to Emergency Time Report): Stephen M Lynn
(15) DATE: 4/1/09

261-101 PRINTED ON RECYCLED PAPER STANDARD FORM 261 (5/78)
Prescribed by USDA-USDI (NWCG Handbook No. 2)

# CREW TIME REPORT

(1) CREW NAME: BMFPD Mit Crew

(2) CREW NUMBER: 1

(3) OFFICE RESPONSIBLE FOR FIRE: BMFPD

(4) FIRE NAME: Beal Ranch Break

(5) FIRE NUMBER: Beal Ranch

| (6) RE-MARKS NO. | (7) NAME OF EMPLOYEE | (8) CLASSIF-ICATION | (9) DATE Military Time ON | (9) DATE Military Time OFF | (10) DATE Military Time ON | (10) DATE Military Time OFF |
|---|---|---|---|---|---|---|
| | Bozeman | 05/13/09 | 1:00 | 16:00 | | |
| | Asmuth | | 9:00 | 16:00 | | |
| | Northrup | | 9:00 | 16:00 | | |
| | Total | | 21 | hrs. | | |
| | | | | | | |
| | Bozeman | 05/16/09 | 13:45 | 15:45 | | |
| | Asmuth | | 13:45 | 15:45 | | |
| | Blue | | 13:45 | 15:45 | | |
| | C. Miller | | 13:45 | 15:45 | | |
| | Total | | 8 | hrs. | | |

(11) REMARKS

Grand Total = 29 hours

(12) OFFICER IN CHARGE (Signature): [signature]

(13) TITLE (Officer-in-Charge): Mit Coord

(14) NAME (Person Posting to Emergency Time Report): Stephen M. Lynn

(15) DATE: 6/1/09

261-101

PRINTED ON RECYCLED PAPER

STANDARD FORM 261 (5/78)

Prescribed by USDA-USDI (NWCG Handbook No. 2)

415811

# FILE COPY

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

Date Requested: 02/06/09

COPY

V E N D O R
BOULDER MTN FIRE PROTECT DIST
1905 LINDEN DR
BOULDER CO 80304

S H I P
COLORADO STATE UNIVERSITY
CENTRAL RECEIVING
REFERENCE DOCUMENT NUMBER: AFE 415811
FORT COLLINS CO 80523-6011

Contact: JOE DUDA
Phone: (970)491-3006
Department: CO State Frst Svc

TO:

Financial Assistance Program
Multiple Payments

ENCUMBERED

| Item # | Description | Qty | UOM | Unit Price | Extension | Acct # | Sub | User |
|---|---|---|---|---|---|---|---|---|
| 1) | FINANCIAL ASSISTANCE PROGRAM COOPERATIVE MATCH PROJECT; SB071 Project # 536703-03-BO; Colorado Forest RestorationGrant - Boulder Mountain Fire Mitigation | 1 | LOT | 50000.0000 | 50000.00 | 536703 | 5980 | |

TOTAL: $50,000.00

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

SIGNATURE _____ DATE _____

A 415811

**CSFS REQUEST FOR SUPPLIES OR SERVICES** (other than GSA) **CSFS #805** (Rev. 4/93)

| Date: Feb 6, 2009 | Requested by: Allen Owen | Resale to: | CSFS Invoice #: |
|---|---|---|---|

Vendor: Boulder Mountain Fire Protection Dist.
Attn: Steve Lynn
1905 Linden Drive
Boulder, CO 80304
(PLEASE PROVIDE COMPLETE ADDRESS.)

Ship To: Boulder District
5625 Ute Highway
Longmont, CO
80503-9130
(PLEASE PROVIDE COMPLETE ADDRESS.)

Reason for Vendor Selection: ____ Sole Source (attach completed Sole Source Justification form)
____ Previous Supplier
____ Other

Terms: ENCUMBERED

Shipping Instructions:
_____ FOB Fort Collins, Colorado
_____ FOB

Delivery Date:

Deliver to:
Initials _____ Bldg _____ Room _____ Phone _____

| # | Account | Subcode | Qty | UOM | Description of Supplies or Services | Unit Price | Item Total |
|---|---|---|---|---|---|---|---|
| 1 | 536703 | 5980 | 1 | LOT | Financial Assistance Program | $50,000 | $50,000.00 |
| 2 | | | | | Cooperative Match Project; SB071; | | |
| 3 | | | | | Project # 536703-03-BO; | | |
| 4 | | | | | Colorado Forest Restoration Grant | | |
| 5 | | | | | Boulder Mountain Fire Mitigation | | |
| 6 | | | | | | | |
| 7 | | | | | AFE # 415811 | | |
| 8 | | | | | | | |
| 9 | | | | | | | |
| 10 | | | | | | | |

SPECIAL INSTRUCTIONS:
Please Encumber

Expenditure Approval:
Authorized Signature: Joseph G. Duda
Date: 2-6-09

Subtotal: $ $50,000.00
Discount: $
TOTAL: $ 50,000.00

# Financial Assistance Program

## Cooperative Match Project

## COLORADO FOREST RESTORATION GRANT

To be conducted by:

***Boulder Mountain Fire Protection District***

COPY

| | |
|---|---|
| **Funding Provided by CSFS:** | **$50,000** |
| **Minimun Recipient Match:** | **$33,334** |
| **Project to be Completed by:** | **September 30, 2010** |

Based on the strength of the application submitted by ***Boulder Mountain 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 cooperator, ***Boulder Mountain Fire Protection District***, will be reimbursed for costs incurred in implementing the project up to the amount listed above once the following requirements are met:

A. Complete work as described in *"Attached Project Proposal EXHIBIT A"(scope of work).*

B. Provide documentation that project funds have been matched at a minimum rate of 40%

Complete and submit through the local CSFS District Office periodic Grant Report(s)/Reimbursement Request(s) using the form provided, as needed, and a Final Report that provides details on expenditures and accomplishments as a result of this project. Submission to:

***Colorado State Forest Service***
***Attn: Allen Owen, District Forester***
***Boulder District***
***5625 Ute Highway***
***Longmont, CO 80503-9130***

This funding will remain available until September 30, 2010

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

**Cooperator Signature:** Stephen M Lynn Date: 1/22/09

***Boulder Mountain Fire Protection District***

| | |
|---|---|
| **Mailing Address:** | **Attn: Steve Lynn**<br>**1905 Linden Drive**<br>**Boulder, CO 80304** |
| **Telephone Number:** | **(303) 440-0235** |
| **Email Address:** | mitigation@bouldermountainfire.org |
| **Fax:** | **(303) 440-5247** |

COPY

Colorado State FOREST SERVICE
Colorado State University
Fort Collins, Colorado 80523-5060
(970) 491-6303
FAX: (970) 491-7736

January 9, 2009

Steve Lynn
Boulder Mountain Fire Protection District
1905 Linden Drive
Boulder, CO 80304

Dear Steve:

I am pleased to inform you that your application for the 2008 Colorado Community Forest Restoration (CFR) Grant Program, established by the General Assembly through Senate Bill 071, has been selected for a financial assistance grant. We would like to offer you **$50,000** in state grant funds to support your project titled **Boulder Mountain Fire Mitigation**.

All projects that involve on-the-ground forest management are asked to ensure that such activities are consistent with Colorado's Forest Stewardship Guidelines which are available on the Colorado State Forest Service (CSFS) website at http://csfs.colostate.edu/pdfs/bmp_screen.pdf. If you have any questions about this, please contact your CSFS District Forester using the information provided below.

The amount being offered to you may be less than you requested in your project proposal. If you cannot complete the project with the reduced amount, please notify me immediately at (970) 491-6303. The grant program requires at least a 40% match of non-state funds. If you cannot match the required amount, the award will be adjusted or rescinded. Again, please contact us immediately if you have a question about your ability to match the offered grant.

If you are able to go forward with your project using the grant funding being offered, please see the three attached pages. Each of these pages will need action from you.

1. Financial Assistance Program Cooperative Match Project notification: After you read the notification, and if you agree with the conditions of participation, please sign and date.
2. Exhibit A, Scope of Work: After you have read Exhibit A, and if you agree with the conditions of participation, please initial and date.
3. Attachment B: Retain this attachment and use it to request reimbursement for qualifying project costs. You may make additional copies if needed.

Please return the original signed Project Notification and the initialed Scope of Work to:

Joseph A. Duda
Forest Management Division Supervisor
Colorado State Forest Service
5060 Campus Delivery, CSU
Fort Collins, CO 80523

Reimbursement will be made for actual costs, up to the amount listed on your project notification, with consideration of the matching requirement. You may not use these funds to purchase capital equipment (individual items costing more than $5000.00). Additionally, we will be requiring strict documentation. Please be advised your payments will be based on achieving the specifics proposed in your grant including treating the full amount of acres as defined in your grant application. This award may be considered as income by the IRS. Please check with your tax advisor if appropriate.

As part of the CFR program, we will require that you provide a Final Closeout Report including the following:

- Accomplishments: examples include (quantified: # acres treated; # miles of fuelbreak; # of defensible spaces implemented; # of presentations with # of participants).
- Summary of Youth Corps participation, if applicable.
- Summary of actual costs.
- Summary of matching funds.
- Before and after photos (digital preferred).

When you are ready to close-out your project and claim reimbursement, please submit an Attachment B to your CSFS District Forester who will certify that the work has been completed and the documentation is adequate. Certification by the District Forester may require a site visit to the project location. The District Forester will then forward Attachment B to the CSFS state office for processing.

For future reference, your CSFS District Forester is **Allen Owen**. You can reach him at (303) 823-5774 or alowen@lamar.colostate.edu.

Thank you for your interest in improving the health and sustainability of Colorado's forests and communities!

Sincerely,

Joseph A. Duda

Joseph A. Duda
Forest Management Division Supervisor

cc: Allen Owen

# Financial Assistance Program

## Cooperative Match Project

## COLORADO FOREST RESTORATION GRANT

To be conducted by:

***Boulder Mountain Fire Protection District***

| | |
|---|---|
| **Funding Provided by CSFS:** | **$50,000** |
| **Minimun Recipient Match:** | **$33,334** |
| **Project to be Completed by:** | **September 30, 2010** |

Based on the strength of the application submitted by ***Boulder Mountain 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 cooperator, ***Boulder Mountain Fire Protection District***, will be reimbursed for costs incurred in implementing the project up to the amount listed above once the following requirements are met:

A. Complete work as described in *"Attached Project Proposal EXHIBIT A"(scope of work).*

B. Provide documentation that project funds have been matched at a minimum rate of 40%

Complete and submit through the local CSFS District Office periodic Grant Report(s)/Reimbursement Request(s) using the form provided, as needed, and a Final Report that provides details on expenditures and accomplishments as a result of this project. Submission to:

***Colorado State Forest Service***
***Attn: Allen Owen, District Forester***
***Boulder District***
***5625 Ute Highway***
***Longmont, CO 80503-9130***

This funding will remain available until September 30, 2010

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

**Cooperator Signature:** Date:

***Boulder Mountain Fire Protection District***

| | |
|---|---|
| **Mailing Address:** | **Attn: Steve Lynn**<br>**1905 Linden Drive**<br>**Boulder, CO 80304** |
| **Telephone Number:** | **(303) 440-0235** |
| **Email Address:** | mitigation@bouldermountainfire.org |
| **Fax:** | **(303) 440-5247** |

**EXHIBIT A**
**COLORADO FOREST RESTORATION GRANT**

SCOPE OF WORK

**Cooperator:** ***Boulder Mountain Fire Protection District***

**Work to be completed:** As described in Applicant's Grant Application

**Standards or Guidelines:** Will meet CSFS guidelines appropriate for treatment. Will comply with standards in Colorado's Best Management Practices for Protecting Water Quality

**Project Period**: January 9, 2009 to September 30, 2010.

**Funded Amount**: $50,000 **Minimum cooperator match**: $33,334

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, Colorado Forest Restoration Grant SB 071" will be the document used to both request reimbursement and to certify that work has been completed to minimum standards.

Initials:

_____

_____

EXHIBIT B

GRANT REPORT/REIMBURSEMENT REQUEST

COLORADO FOREST RESTORATION GRANT SB071

Project Number:

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. **Matching Funds are expenses for goods, services and labor necessary for project implementation and incurred by the applicant.**

| 1. Project #: | 2. Project Funding Amount: | 3. Community Protected: |
|---|---|---|

| 4. Make Payment To: | 5. Period of Performance: |
|---|---|
| Name: | From: |
| Address: | To: |

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.)

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 | | Total Costs | Reimbursement Amount Requested For Out of Pocket Expenses | Matching Funds | | Total Costs |
| | | Cash (hard match) | Donated (Inkind match) | | | Cash (hard match) | Donated (Inkind match) | |
| Labor* | | | | | | | | |
| Material** | | | | | | | | |
| Total | | | | | | | | |

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

* Use actual costs or $19.51/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 : $

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

Signature: Date:

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:

2008 Colorado Community Forest Restoration Grants

| FOR OFFICIAL USE ONLY | |
|---|---|
| Entity Submitting Project: | |
| Applicable CSFS District: | |
| Date: | |
| Dollar Amount Requested: | $ 0 |
| Matching Share: | $ 0 |

## 1 Applicant Information

| | |
|---|---|
| **Name of Project:** | Boulder Mountain Fire Mitigation |
| **Applicant:** | Boulder Mountain Fire Protection District |
| **Contact Person:** | Steve Lynn |
| **Address:** | 1905 Linden Drive |
| **City/Zip Code:** | Boulder, CO 80304 |
| **Phone (Work/Cell):** | (303) 440-0235 |
| **Email:** | mitigation@bouldermountainfire.org |
| **Fax:** | (303) 440-5247 |

## 2 Community At Risk Information

| | |
|---|---|
| **Community Name:** | Forest Glen, Buckingham Hills, Valley Lane, Pine Brook Hills, & Carriage Hills. |
| **County:** | Boulder |
| **Name of CWPP** | BMFPD Wildfire Urban Interface Community Wildfire Protection Plan |
| **Location to obtain/review** | Colorado State Forest Service, Boulder District Office of Forester Allen Owen |

## 3 Grant Contributors (Matching Share)

**(Applications will be disqualified if insufficient match is identified) Please specify each match contributor and the dollar amount of each contribution. Please DO NOT show grant requested funds in this table. This is for matching share only.**

| **Contributors: (Please specify)** | Forest Glen HOA | **Buckingham Hills HOA** | **Valley Lane** | Pine Brook HOA | Carriage Hills HOA | Front Range Fuels Grant | **TOTAL** |
|---|---|---|---|---|---|---|---|
| **Dollars (Hard Match):** | $12,000 | $17,000 Rem Grant | $12,000 Seth P | $17,000 | $17,000 | $75,000 | $ 150,000 |
| **In-Kind (Soft Match):** | $0 | $0 | $0 | $0 | $0 | $0 | **$ 0** |
| **TOTAL:** | **$12,000** | **$ 17,000** | **$ 12,000** | **$ 17,000** | **$ 17,000** | **$ 75,000** | **$ 150,000** |

## 4 Total Project Expense (break down matching share totals from block three)

| | **Grant Share ($ Amount Requested)** | **Match (from block three)** | | **TOTAL** |
|---|---|---|---|---|
| | | **Dollars** | **In-Kind** | |
| **Personnel / Labor:** | $50,000 | $150,000 | $0 | **$ 200,000** |
| **Operating:** | $0 | $0 | $0 | **$ 0** |
| **Travel:** | $0 | $0 | $0 | **$ 0** |
| **Contractual Services:** | $0 | $0 | $0 | **$ 0** |
| **Equipment:** | $0 | $0 | $0 | **$ 0** |
| **Indirect Costs:** | $0 | $0 | $0 | **$ 0** |
| **TOTAL:** | **$ 50,000** | **$ 150,000** | **$ 0** | **$ 200,000** |



50,000 = 60%
33,333 = 40%

120,000 = 60%
80,000 = 40%

| | Project Summary (check all that apply and answer related questions) | | |
|---|---|---|---|
| | Addresses protection of water supplies? ☒Yes ☐ No | | |
| | Project based on ecological assessment of current conditions? ☒Yes ☐ No | | |
| | Project Objectives, check all that apply | | |
| 5 | Reducing threat of large, high-intensity wildfires and the negative effects of excessive competition between trees by restoring ecosystem functions, structures, and species composition, including the reduction of non-native species. | ☒Yes | ☐ No |
| | Preserving old and large trees to the extent consistent with ecological values and science. | ☒Yes | ☐ No |
| | Replanting trees in deforested areas if such areas exist in the project area. | ☒Yes | ☐ No |
| | Improving the use of, or adding value to small-diameter trees. | ☒Yes | ☐ No |
| | Number of acres to be treated: 134 | Estimated cost | $1500/ACRE |
| | Will the implementation of this project involve a contract with the Colorado Youth Corps Association or another accredited Colorado youth corps? | ☐Yes | ☒ No |
| | Number of communities directly affected by this project: | 5 | |

## 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 **Provide a brief overview of the project and the project area. Specify size of project and land ownerships involved (e.g. private, county, state, federal, etc.). Include information on the relevant watershed.** 1500 characters

The communities of Reed Ranch, Rembrandt, and Peakview have only one way in and out. These access routes have dense tree canopies on each side, making a dangerous evacuation during a wildfire event. The priority treatments for this project will install shaded fuel breaks at the critical egress locations in the Reed Ranch and Rembrandt communities. These treatments will also benefit Reed Ranch, Rembrandt, and the neighboring community of Peakview by serving as a shaded fuel breaks. All new fuel breaks will tie into existing meadows and anchored to major roadways. The treatments will extend along the community access roads to the extent that the community's matching funds will cover.

The work will be performed through a BMFPD subaward using their mitigation crew. Shaded fuel breaks will be setup by CSFS personnel using CSFS guidelines (at least 300 feet wide fuel breaks adjusted for slope and topography). In creating the fuel breaks, all ladder fuels will be eliminated, retained trees will have a ten foot or greater crown spacing, and standard tree health/size/species diversity will be taken into account during project marking. The fuel breaks will have a combination of chipping done (near the roadway) and burn piles in less accessible areas. The piles will be burned the following winter. The requested funds for this project will be sufficient to create 47 or more acres of shaded fuel break with an approximate width of 300 feet.

This grant will cover the initial forest treatment priorities for the communities. Forest treatment will need to occur for multiple years after this grant to further mitigate fire hazards. The USFS has idenfied their adjacent land for potential treatment. The communties hope to have this grant's evacuation thinning occur soon, have USFS treatment occur on nearby WUI lands, and create a secondary evacuation routes linking the three communities. The secondary evacuation routes will have to be put in after work has occurred along the existing roads and the USFS land between the communites is treated.

The proposed projects will help protect the Pine Brook Hills, Four Mile Canyon Creek, and Lefthand watersheds by reducing the threat of catosrophic wildfire.

## Scientific Foundation

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

7 **Briefly describe the scientific foundation for the project.** 1000 characters

BMFPD completed many informal scientific analyses of our district prior to contracting a nationally-known fire management consultant to perform a rigorous scientific study and publish the results (August 2004) in a report titled "Wildland Urban Interface (WUI) Community Vulnerability Analysis and Landscape Fuels Modifications". The methodology for this analysis used a Wildfire Hazard Rating (WHR) to rank areas of BMFPD's district based on the results of modeled environmental factors such as fuels and topography, along with the field experience and knowledge of wildland fire experts. The WHR survey and fuel model ground truthing were accomplished by field surveyors with WUI experience. Based on these rankings key egress and ingress routes for resident evacuation and fire equipment emergency access were identified and a list of 12 recommendations for fuel treatments were identified. In April of 2006 BMFPD completed a CWPP which expanded on the results of the 2004 report.

## Protection of Water Supplies

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

| | |
|---|---|
| 8 | **Please describe how the proposed project will contribute to the protection of water supplies, such as water quality, water quantity and / or associated infrastructure.** 700 characters<br>A large scale wildfire within BMFPD Fire District would adversely affect the water quality and quantity in 3 Front Range drainages which include: Two Mile Canyon Creek, Four Mile Canyon Creek, and Left Hand Canyon Creek. The catastrophic effects of wildfire would impact Pine Brook Water District, Left Hand Water District, and farmers' water rights to Four Mile Canyon Creek. The infrastructure of the watershed includes the newly constructed DeHass Dam which holds one milion acre feet of potable water for the Pine Brook Hills subdivision. The Pine Brook Reservoir is located in a heavly forested urban interface setting on steep slopes with multiple aspects. |

| | |
|---|---|
| | **Scope of Work / Project Timeline**<br>All information for the project must fit into the allotted character space provided below.<br>Attachments will not be considered by the review committee. |
| 9 | **Provide a brief scope of work which clearly describes how grant funds will be spent. (This should be more specific than the project description)** 1500 characters<br>The project will install, extend and improve shaded fuel breaks at the most critical locations in the Pine Brook Hills, Boulder Heights, and Carriage Hills communities within our district. The work will be performed by the BMFPD mitigation crew. Shaded Fuel breaks will be constructed using Colorado State Forest Service guidelines including width recommendations (nominally +/- 200 feet adjusted for slope) and horizontal and vertical density recommendations. The proposed locations include steep south facing slopes, chimneys and gullies with heavy forest cover. Wherever practical and feasible these fuel breaks will tie into existing breaks. In creating the fuel breaks, trees exhibiting evidence of dwarf mistletoe, Mountain Pine beetle, Ips beetle and Douglas pine beetle will be removed, helping combat a growing forest health problem. Slash will be chipped onsite using BMFPD equipment.The requested funds for this project will be sufficient to create three quarters of a mile of shaded fuel breaks with an approximate width of 200 to 300 feet . The individual project areas will be those listed as priority projects in the recommendations of BMFPD's CWPP. Emphasis will be given to areas where landowner permisions will allow for construction of continuous portions of shaded fuel breaks along routes identified in the CWPP as priority protects that threaten community assets. Community assets include evacation routes and watersheds. |
| | **Provide a timeline for the project, including significant accomplishment milestones.** 500 characters<br>As soon as funds are available the full-time mitigation coordinator will initiate educational programs and scheduling services with affected homeowners to obtain their approval (as has been done successfully in the past). Once the funding is approved the marking of trees for removal will commence immediately. A 3 to 4 person mitigation crew will be dedicated to the project. The mitigation work will be incorporated into the currently scheduled work and completed before the specified deadline. |
| | **Collaboration** |
| 10 | **Specify the private, local, tribal, county, state, federal and/or non-governmental (501c3) organizations that participated in the design of this project and describe how such partners will contribute to, or participate in, the project's implementation. Specify the role of any Youth Conservation Corps that will participate in implementation.**<br>1000 characters<br>Govermental participants include the BMFPD, private landowners, and Boulder County. The Boulder Mountain Fire Protection District's mitigation crew will perform the work with the help of state foresters who will be asked to mark the trees for removal. The project itself will be on public and private land requiring the landowners and associated agency permission (as noted above); the county has supplied and may continue to supply funding in the form of an annual chipping grant. Funds from the federal front range fuels reduction grant will be used to match any funds obtained from this application. Local non-govenmental participants |

| | |
|---|---|
| | include the Carriage Hills and Pine Brook Hills Home Owners Associations and less formal neigborhood organizations like the "Homeowners Group in Support of the Overlook Fuel Break". Additionally many individual homeowners have donated funds directly to the fire department that were idenified by the donors for wildfire mitigation and fuels reduction. |
| | **Project Longevity / Maintenance** |
| 11 | **Clearly demonstrate the long-term benefits of the project and how the project will remain effective over time.** 500 characters<br>BMFPD employs a full time mitigation coordinator whose responsibility includes maintaining existing fuel breaks with a seasonal mitigation crew. BMFPD remains committed to maintaining the many miles of fuel breaks that have been installed with funds donated by the community, fire district, county, state, and federal agencies. BMFPD's mitigation program has been in place for over 5 years with a full time coordinator and seasonal mitigation crew of 2 to 4. |

## Bob Bundy

**From:** Bob Bundy [Bob.Bundy@colostate.edu]
**Sent:** Tuesday, June 16, 2009 3:07 PM
**To:** Steve Lynn (mitigation@bouldermountainfire.org)
**Subject:** Grant status

Steve,

I have reviewed the three open grants you have. Primarily to help me keep track as our fiscal year ends. Please review and let me know if it seems correct or if there are any concerns with the leftover funds. I put them in order of priority for spending.

530947 SFA Grant (07CPG SFA-NFP CG7) – You have billed me 5 times. Of $30,000, you were reimbursed $8,691.87, and have $21,308.13 left. This grant covers the Witter property work. All funds must be spent by Sept 1, 2009. This grant has already had an extension and cannot go beyond this September.

530831 Front Range Grant (08CPG SFA-NFP CG2 BO) – You have billed me 6 times. Of $46,000, you were reimbursed $15.386.26, and have $30,613.74 left. This grant covers Reed Ranch, Rembrandt Road, and Valley Lane. All funds must be spent by Sept 30, 2009. If necessary, we can discuss extending the grant a year. However, I would prefer to close this out as soon as possible.

536703 CFR State Grant (SB 71 60/40 match) – You have billed me 1 time. Of $50,000, you were reimbursed $4,082.50, and have $45,917.50 left. This grant covers work on Reed Ranch, Rembrandt Road, and Valley Lane. All funds must be spent by Sept 2010.

Please include these grant numbers on the Exhibit B in the two spaces available. It is becoming a challenge to keep track of all the grants.

Bob Bundy
Fuels Treatment Partnership & Wildfire Mitigation Forester
Colorado State Forest Service - Boulder District
5625 Ute Highway Longmont, CO 80503
(303) 823-5774
(303) 823-5768 fax
Bob.Bundy@colostate.edu

# SB 071 Award Recients

Jan-09

| Project | District | Amount | Contact |
|---|---|---|---|
| Upper South Platte Forest Health | WP | $60,000.00 | Carol Ekarius |
| Woodland Park Healthy Forests | WP | $150,000.00 | Carol Ekarius |
| Boulder Mtn. Fire Mitigation | BO | $50,000.00 | Steve Lynn |
| South Platte CWPP | FR | $162,825.00 | Chuck Dennis |
| Summit County | GR | $200,000.00 | Jeff Bernino |
| Horsetooth Mountain | FC | $75,000.00 | Meegan Flenniken |
| Snow Mountain | GR | $52,342.00 | Courtney Hill |
| Carter Lake Forest Restoration | FC | $45,000.00 | Dan Rieves |
| Straight Creek Watershed Protection | GR | $48,750.00 | Howard Hallman |
| Little Vasquez Creek Forest Health | GR | $70,000.00 | Doug Laraby |
| Cook Mountain Fuelbreak | BO | $60,000.00 | Dennis Fisher |
| Santa Fe Trails Ranch | LV | $200,000.00 | Diana Novacek |
| Grand County Hazard Tree Removal | GR | $214,083.00 | Jennifer Murray Scott |
| Total | | **$1,388,000.00** | |

13 Grants
$1,000,000 from account 536073
$388,000 from account 192970
$12,000 from account 192970 for CSFS admin

**Grants pending severance tax funding being available this spring**

| | | |
|---|---|---|
| Swan River - Alan Wickert | GR | $41,500.00 |
| Mill Creek - Steve Phenix | GO | $15,000.00 |
| Homestead East - Karen Berry | GO | $109,400.00 |
| Garden of the Gods Forest Restoration | WP | $52,500.00 |
| Red Cliff - Eric Lovgren | GR | $20,000.00 |
| Gordon Jackson Foundation | WP | $36,000.00 |
| Streamside - Ryan Babcock | GO | $36,000.00 |
| Upper Arkansas - Jerry Andrew | SA | $47,381.00 |
| Garden of the Gods Tag On | WP | $17,586.00 |
| Tripp Gulch - Chris Nesset | DU | $49,600.00 |
| Dalla Park - Kevin Hall | DU | $21,211.00 |
| South Ridge - Michelle Matthews | SS | $22,500.00 |
| Stagecoach - Richard Parker | SS | $48,600.00 |
| Colyer | WP | $25,000.00 |
| West Woodland Park - Jeff Miller | WP | $12,000.00 |
| | | **$554,278.00** |

| E-mail | Phone | |
|---|---|---|
| carol@uppersouthplatte.org | 719-748-0033 | |
| carol@uppersouthplatte.org | 719-748-0033 | |
| mitigation@bouldermountainfire.org | 303-440-0235 | |
| cdennis@lamar.colostate.edu | 303-465-9043 | 303-489-3596 |
| jberino@ldfr.org | 970-513-4104 | |
| mflenniken@larimer.org | 970-679-4562 | |
| chill@ymcarockies.org | 970-586-4444 | 970-498-5303 |
| drieves@larimer.org | 970-679-4555 | |
| Future1946@yahoo.com | 719-491-1807 | |
| doug_laraby@skiwinterpark.com | 970-726-1509 | |
| dennis.fisher@ci.longmont.co.us | 303-823-6060 | |
| ddnovacek@yahoo.com | 719-846-9090 | |
| jmurray@co.grand.co.us | 970-887-0745 | 970-531-2383 |

NOT

2008 Colorado Community Forest Restoration Grants

FUNDED

| FOR OFFICIAL USE ONLY | |
|---|---|
| District Submitting Project: | |
| District Priority Number: | |
| Date: | |
| Dollar Amount Requested: | |
| Matching Share: | |

| 1 | Applicant Information | |
|---|---|---|
| | **Applicant:** | DORY LAKES SUBDIVISION PROPERTY OWNERS ASSOCIATION |
| | **Contact Person:** | BOB OATMAN |
| | **Address:** | P.O. Box 666 |
| | **City/Zip Code:** | Black Hawk, Co 80422 |
| | **Phone (Work/Cell):** | 303.582.3567 |
| | **Email:** | oatiesr@aol.com |
| | **Fax:** | |

| 2 | Community At Risk Information | |
|---|---|---|
| | **Name of Project:** | CWPP and DLPOA'S FIRE MITIGATION PROJECT |
| | **Community Name:** | DORY LAKES SUBDIVISION PROPERTY OWNERS ASSOCIATION |
| | **County:** | GILPIN |
| | **Name of CWPP** | Colorado Fire Protection District (AFG) |
| | **Location to obtain/review** | COLORADO SIERRA FIRE DEPARTMENT |

3

## Grant Contributors (Matching Share)

**(Applications will be disqualified if insufficient match is identified)**
**Please specify each match contributor and the dollar amount of each contribution.**
**Please DO NOT show grant requested funds in this table. This is for matching share only.**

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| **Contributors: (Please specify)** | DLPOA | PROPERTY OWNERS | | | | | **TOTAL** |
| **Dollars (Hard Match):** | $500 | $6,000 | $0 | $0 | $0 | $0 | **$ 6,500** |
| **In-Kind (Soft Match):** | $0 | $29,250 | $0 | $0 | $0 | $0 | **$ 29,250** |
| **TOTAL:** | **$ 500** | **$ 35,250** | **$ 0** | **$ 0** | **$ 0** | **$ 0** | **$ 35,750** |

4

## Total Project Expense (break down matching share totals from block three)

| | Grant Share ($ Amount Requested) | Match (from block three) | | TOTAL |
|---|---|---|---|---|
| | | **Dollars** | **In-Kind** | |
| **Personnel / Labor:** | $29,250 | $4,200 | $29,250 | **$ 62,700** |
| **Operating:** | $500 | $500 | $0 | **$ 1,000** |
| **Travel:** | $1,900 | $1,900 | $0 | **$ 3,800** |
| **Contractual Services:** | $2,000 | $2,000 | $0 | **$ 4,000** |
| **Equipment:** | $0 | $0 | $0 | **$ 0** |
| **Indirect Costs:** | $0 | $0 | $0 | **$ 0** |

| | | | | |
|---|---|---|---|---|
| TOTAL: | $ 33,650 | $8,600 | $ 29,250 | $ 71,500 |

| Project Summary (check all that apply and answer related questions) | | | |
|---|---|---|---|
| What is the duration of this project? (check one) | ☐ One Year | ☒ Two Years | |
| Is this a new project? (check one) | ☐ Yes | ☒ No | |
| Number of acres to be treated: | 35 | Estimated cost per acre: | $2,050 |
| Number of communities directly affected by this project: | ONE | | |

## 5 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.**

**Provide a brief overview of the project and the project area.**
500 characters

The Dory Lakes Subdivision covers some 320 acres, more or less, and as in most mountain areas there are far to many trees and to much ground debris. Our Subdivision primarily consists of lodge pole pine and our fire mitigation and overall plan is to reduce both of these. With the pine beetle onslaught in our future, this becomes an absolute necessity.

Our Subdivision has, over the recent years with the assistance of two (2) grants and 6585 man hours, fire mitigated 70.3 acres by increasing the defensible spacing around structures, thinning and pruning of trees and removing slash.

## 6 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.**

**Provide a brief scope of work which clearly describes how grant funds will be spent. (This should be more specific than the project description)** 1500 characters

Approximately 35 lots with homes will be fire mitigated by increasing the defensible spacing around each home and structures including the thinning of trees to improve crown spacing, removal of slash and ground debris and pruning the remaining trees to a height of not less than eight feet above ground. We will notify all property owners within the Dory Lakes Subdivision, by mail, commencing in January of the continuing fire mitigation project and the possibility of financial assistance through a Forest Restoration Grant. Another mailing will be done in March or April to all those who have indicated, as a result of the January mailing or otherwise, that they would like to participate. A planning session will follow to educate all possible participants on how it works, what's expected and the benefits to be derived. It is our goal/plan to complete fire mitigation in our Subdivision within the ensuing eight (8) years. We realize 100% is not a possibility, however in as much as we are at 20-25% complete to date we believe 70-75% is very possible and realistic.

**Provide a timeline for the project.** 500 characters

DLPOA will commence its fire mitigation project as soon as weather permits and will complete this phase of our fire mitigation project on each and every participating property within 2009 or no later than 2010.

| | |
|---|---|
| | |
| 7 | **Collaboration** |
| | **Specify the private, local, tribal, county, state, federal and/or non-governmental (501c3) organizations that support, 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<br>Gilpin County has and continues to provide an area for the dumping of slash and ground debris and recently provided County residents with a drop off location for logs cut from infected trees for their chipping - both without a fee.<br><br>We're hopeful the Colorado State Forest Service will provide the marking of trees for thinning on each lot and as always provide us with their expert consultation and guidance throughout the project. |
| | **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 |
| | **Where would we obtain a copy of this plan?** Colorado Sierra Fire Department |

| | |
|---|---|
| 8 | **Project Longevity / Maintenance** |
| | **Clearly demonstrate the benefits of the project and how this project will remain effective over time.** 500 characters<br><br>We will continue communicating with all property owners within Dory Lakes Subdivision, both verbally and through the mail, the importance of fire mitigation and stress the need to continue with or without financial assistance.<br><br>The fire mitigation projects have substantially reduced the fire danger, increased the health of the remaining trees, lets more sunlight reach the ground which has increased the growth of other vegetation and enhanced the appearance of the property. |

Bob,
As you are aware, the (above) grant application you submitted to Joe Duda, our Forest Management Division Supervisor, was then forwarded to me for review and comment.
After reviewing your grant request, I would suggest that you do the following and re-submit your application:
Complete Block #2- Name of CWPP (List); I also have a hard copy on file at my district office. Be nice if it was out there electronically somewhere. TOUT the CWPP!
Complete Block #3- Contributors, please specify (left blank). Pretty important piece of information.
Please ensure your numbers add correctly; you do not need to fill in the box in the top right, page 1, of the application (For official use only).
Block 5, (several typos), but use this space to "embellish" if you will, your project area description. Quite of bit of activity has occurred over the years using 2 different grants; your CWPP has a good description of the project area (fuels, fire behavior, WHAT HAS BEEN PREVIOUSLY ACCOMPLISHED, etc,)
Block 7-You should "fill the space" -more detail as to what service Gilpin County provides as "collaboration" (it's one of the best you'll ever find!)
"We're hopeful CSFS..." The price has gone up to $100 for the same excellent service. Hard times. Try not to use our rates (or maybe any rates, for that matter) in a grant application.

Here's my personal, and somewhat "boneheaded" opinion-
Grant review people and committees tend to look, first thing, at match. Hard dollars always carry a lot more weight than "in-kind". Your grant apps have historically relied heavily on in-kind match; more than any others I've reviewed. Think about ways you can raise more hard money to meet the match- a couple of ideas may be to scale back your grant request amount to balance the hard dollars available; instead of requiring the homeowners to do the d space work to meet the in-kind, perhaps homeowners in Dory Lakes need to realize the harsh reality and it's going to cost them some money to get the job done (double the amount if the grant not funded!). We both know how difficult and how painful this has been in the past projects and quite frankly, might not fund this request based solely on this heavy reliance of homeowner in-kind. Your recent SFA app relied heavily on in-kind match and received a lower project priority because most other apps have more hard dollars tied to the project. (Not that it mattered; NONE of my SFA grant applicants were funded this year).
Competition for these grant funds are fierce. Overall funding levels are down. Well written, comprehensive applications carry more weight.
Try to re-work your app and get it to Joe and cc copy to me by due date.
Thanks

Allen Owen, CF
District Forester
CSFS Boulder
5625 Ute Highway
Longmont, CO 80503
303-823-5774
303-823-5768

# 2008 Colorado Community Forest Restoration Grants

| FOR OFFICIAL USE ONLY | |
|---|---|
| District Submitting Project: | |
| District Priority Number: | |
| Date: | |
| Dollar Amount Requested: | $ 37,750 |
| Matching Share: | $ 37,750 |

| 1 | Applicant Information | |
|---|---|---|
| | **Applicant:** | DORY LAKES SUBDIVISION PROPERTY OWNERS ASSOCIATION |
| | **Contact Person:** | BOB OATMAN |
| | **Address:** | P.O. Box 666 |
| | **City/Zip Code:** | Black Hawk, Co 80422 |
| | **Phone (Work/Cell):** | 303.582.3567 |
| | **Email:** | oatiesr@aol.com |
| | **Fax:** | |

| 2 | Community At Risk Information | |
|---|---|---|
| | **Name of Project:** | DLPOA FIRE MITIGATION |
| | **Community Name:** | DORY LAKES SUBDIVISION PROPERTY OWNERS ASSOCIATION |
| | **County:** | GILPIN |
| | **Name of CWPP** | |
| | **Location to obtain/review** | COLORADO SIERRA FIRE DEPARTMENT |

3

## Grant Contributors (Matching Share)

**(Applications will be disqualified if insufficient match is identified)**
**Please specify each match contributor and the dollar amount of each contribution.**
**Please DO NOT show grant requested funds in this table. This is for matching share only.**

| **Contributors:** (Please specify) | | | | | | | **TOTAL** |
|---|---|---|---|---|---|---|---|
| **Dollars** (Hard Match): | $500 | $2,500 | $0 | $0 | $0 | $0 | **$ 3,000** |
| **In-Kind** (Soft Match): | $0 | $32,250 | $0 | $0 | $0 | $0 | **$ 32,750** |
| **TOTAL:** | **$ 500** | **$ 35,250** | **$ 0** | **$ 0** | **$ 0** | **$ 0** | **$ 35,750** |

4

## Total Project Expense (break down matching share totals from block three)

| | **Grant Share** ($ Amount Requested) | **Match (from block three)** | | **TOTAL** |
|---|---|---|---|---|
| | | **Dollars** | **In-Kind** | |
| **Personnel / Labor:** | $31,250 | $2,500 | $28,750 | **$ 62,500** |
| **Operating:** | $500 | $500 | $0 | **$ 1,000** |
| **Travel:** | $2,000 | $0 | $2,000 | **$ 4,000** |
| **Contractual Services:** | $2,000 | $2,000 | $0 | **$ 4,000** |
| **Equipment:** | $0 | $0 | $0 | **$ 0** |
| **Indirect Costs:** | $0 | $0 | $0 | **$ 0** |

| | | | | |
|---|---|---|---|---|
| TOTAL: | $ 35,750 | $ 5,000 | $ 30,750 | $ 71,500 |

| Project Summary (check all that apply and answer related questions) | | | |
|---|---|---|---|
| What is the duration of this project? (check one) | ☐ One Year | ☒ Two Years | |
| Is this a new project? (check one) | ☐ Yes | ☒ No | |
| Number of acres to be treated: | 35 | Estimated cost per acre: | $2,050 |
| Number of communities directly affected by this project: | ONE | | |

## 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.**

5

**Provide a brief overview of the project and the project area.** 500 characters

The Dory Lakes Subdivision covers some 320 acres, more or less, and as in most mountain areas there are far to many trees and to much ground debris. Our Subdivision primarily consists of lodge pole pine and our fire mitigation and overall plan is to reduce both of these. With the pin beetle onslaught in our future, this becomes an absolute necessity.

## 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.**

6

**Provide a brief scope of work which clearly describes how grant funds will be spent. (This should be more specific than the project description)** 1500 characters

Approximately 35 lots with homes will be fire mitigated by increasing the defensible spacing around each home and structures including the thinning of trees to improve crown spacing, removal of slash and ground debris and pruning the remaining trees to a height of not less than eight feet above ground. We will notify all property owners within the Dory Lakes Subdivision, by mail, commencing in January of the continuing fire mitigation project and the possibility of financial assistance through a Forest Restoration Grant. Another mailing will be done in March or April to all those who have indicated , as a result of January mailing or other wise, that they would like to participate. A planning session will follow to educate all possible participants on how it works, what's expected and the benefits to be derived. It is our goal/plan to complete fire mitigation in our Subdivision within the ensuing eight (8) years. We realize 100% is not a possibility, however in as much as we are at 20-25% complete to date we believe 75-80% is very possible and realistic.

**Provide a timeline for the project.** 500 characters

DLPOA will commence its fire mitigation project as soon as weather permits and will complete this phase of our fire mitigation project on each and every participating property within 2009 or no late than 2010.

| | |
|---|---|
| | |
| 7 | **Collaboration** |
| | **Specify the private, local, tribal, county, state, federal and/or non-governmental (501c3) organizations that support, 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<br>Gilpin County has and continues to provide an area for the dumping of slash and ground debris.<br><br>We're hopeful the Colorado State Forest Service will provide the marking of the trees for thinning, which in the past has been $75.00 on each lot and as always provide us with consultation and guidance throughout the project. |
| | **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 |
| | **Where would we obtain a copy of this plan?** Colorado Sierra Fire Department |

| | |
|---|---|
| | **Project Longevity / Maintenance** |
| 8 | **Clearly demonstrate the benefits of the project and how this project will remain effective over time.** 500 characters<br>We will continue communicating with all property owners within Dory Lakes Subdivision, both verbally and through the mail, the importance of fire mitigation and stress the need to continue with or without financial assistance. |