

Colorado State Forest Service

Emergency Supplemental

2010 Grant Application

DISTRICT'S: Please Complete	
District Submitting Project:	Boulder
Forester Submitting Project:	Bryan Baer
District Priority Number:	
Date Submitted:	7/5/2011
FOR REVIEWER'S USE ONLY:	
Rating:	

Applicant Information	
Applicant:	Paul and Jean Lange
Contact Person:	Paul Lange
Address:	4588 Sunshine Canyon Dr.
City/Zip Code:	Boulder, CO 80302
Phone (Work/Cell):	303-939-9222 (H) 720-771-7008 (C)
Email:	paul@langemail.com
Fax:	303-443-1701

Community At Risk Information			
Name of Project:	Lange Property		
Community Name(s):	Sunshine Canyon		
County:	Boulder	Congressional District:	2nd
Latitude (decimal degrees):	40.054 N	Longitude (decimal degrees):	105.345 W
Threat Description (check all that apply)			
Homes:	<input checked="" type="checkbox"/>	Number of:	1
Businesses:	<input type="checkbox"/>	Number of:	
Watersheds:	<input type="checkbox"/>	Number of:	
Other (Describe):			

Requested Grant Amount / Project Description	
All information for the project must fit into the space provided below. The review committee will not consider attachments.	
Dollar Amount Requested May Not Exceed \$470 x Number of Acres Proposed For Treatment	
Dollar Amount Requested	\$1,880.00
Will this Project be conducted as a Pass-Through Grant?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Provide a brief overview of the project and the project area. (If applying for a fuels reduction project, identify vegetation types)	
<p>The property has had recent fire activity through the Four Mile Canyon Fire. Burn intensity ranges from moderate in some areas to severe in others. Vegetation consists of predominately ponderosa pine and douglas fir in the overstory, and rocky mountain juniper and random native grasses throughout the understory. Slopes throughout the project area range from mild to steep.</p>	

Scope of Work / Project Timeline

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

4

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

Project funding will be used to conduct hazardous fuels reduction throughout the intended project area. In areas of moderate burn intensity, trees will be thinned from below to increase the residual crown spacing. Bole-wood material will be cut into manageable lengths and stacked for firewood consumption at a later time. Slash will be chipped, with no new depth to exceed 4 inches. In areas of severe burn intensity, trees will be thinned heavily, leaving many wildlife habitat trees (7-10/acre). Bole-wood will either be contour felled and used for erosion control purposes, or cut into manageable lengths and stacked for firewood consumption at a later time. Slash will be chipped where it can be reasonably reached or lopped and scattered (no new depth to exceed 18 inches) elsewhere. All remaining trees throughout the project area will be limbed, and all stumps cut as low as possible. All completed work will reflect CSFS standards of approvable forest management.

Describe all planned long-term maintenance (grant funded or other).

Landowner will continually monitor property for any new undesirable re-growth of trees, and remove upon detection. Landowner will also monitor maturing, growing vegetation, and continually remove limbs and other ladder fuels as they become present.

What is the duration of this project? (check one) 1 Year 2 Years 3 Years 4 Years

Is this a continuing project from previous year/s? (check one) Yes No

Provide a timeline for the project

Project work will begin as soon as funding is in place, and will continue through completion, which is targeted for Summer 2012

Interagency Collaboration

5

Specify the private, local, tribal, county, state, federal and/or non-governmental (501c3) organizations that will contribute to or participate in the completion of this project. Describe briefly the contributions each partner will make (i.e. – donating time/equipment, funding, etc.).

None

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

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

6	Project Category (check all that apply and answer related questions)			
	Hazard Fuels Reduction <input checked="" type="checkbox"/> Other Forest Management Treatment <input type="checkbox"/>			
	Number of acres to be treated:	4.0	Estimated cost per acre:	\$2,000.00
	Project Type (check all that apply)			
	Defensible Space	<input type="checkbox"/>	Thinning w/o Product	<input checked="" type="checkbox"/>
Fuelbreak	<input type="checkbox"/>	Mastication	<input type="checkbox"/>	
Thinning w/ Product	<input type="checkbox"/>	Other	<input type="checkbox"/>	

Total Project Expense (Pass Through)		
<i>Please fill all fields</i>	Grant Share (\$ Amount Requested)	TOTAL
7	Contractual Services:	\$ 1,880.00
	TOTAL:	\$ 1,880.00

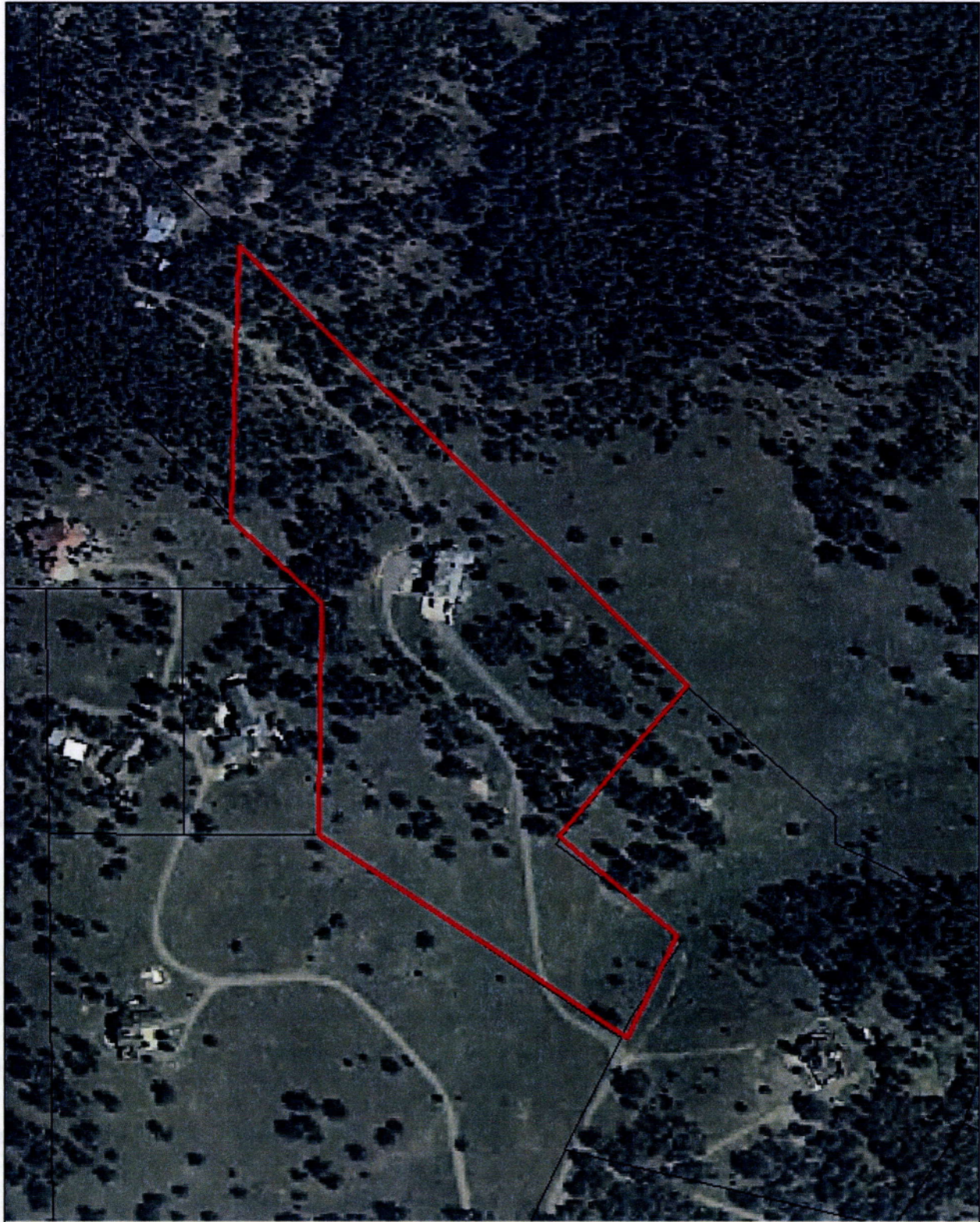
Grant funding may only be used for Contractual Service.

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

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



Attach Project Map Showing Specific Treatment Areas

Lange Proposal



0 100 200 400 600 Feet

Lange Property: 4.0 Acres

-  Lange
-  BOCO_PARCELS1209



Created By: Bryan Baer
CSFS-Boulder District
August, 2011





COPY

**Colorado State Forest Service
Program Payment Request**

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

Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/> 08-23-11

Name: PAUL LANGE

Address: 4588 SUNSHINE CANYON DR.

BOULDER, CO 80302

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

1469494
08-23-11
KC

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

Grant Number: 5308400-80-46 ~

Approved Funding: \$ 1,880.00 ~

Total Project: \$ 3,600.00 -

CSFS Account Number: 5308400-6693 ~
'09 Sup Haz Fuels Fr 80

Amount of Payment: \$ 1,880.00 ~

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

Approved by [Signature]
(Program manager signature)

Date: 8/22/11

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

Project No. 5308400-30-46
(For Official Use Only-
No. from original application)

Applicant name (please print): PAUL LANGE

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	\$ 3,600.00		A Labor Cost= \$ 3,600.00
Operating Exp ^{3,*} (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = \$ 3,600.00
			Amount Originally Approved = \$ 1,880.00 ~
			Amount to be Reimbursed not to exceed \$470 Per Acre \$ 1,880.00 ~

¹ Any contracted services where payment was made for services.

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

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

⁴ Reimbursement amount cannot exceed amount approved. Requests for partial payments will be considered on a case by case basis.

⁵ Reimbursement amount cannot exceed \$470/acres for Emergency Supplemental Funds.

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

Landowner Signature: [Signature]

Date: 8/16/11

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

Mailing Address: 4588 SUNSHINE CANYON

City: BOULDER

County: BOULDER State: CO Zip: 80302

Phone: (303) 939-9222

Practice certified by: Bryan Baer (BB)
CSFS forester

Payment Approval: [Signature]
CSFS program manager

Amount: \$1,880.00 Date: 8/22/11

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

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

Project No. 5308400-Bo-46

To be completed by CSFS forester:

PROGRAM:

WUI Incentives D-space: _____ I & D Prevention and Suppression – Bark Beetle: _____

FRFTP: _____ STEVENS' Fund: _____ SFA: _____ ESF: X Forest
Restoration Grant (SB71 and HB1199): _____

4.0 Acres
Haz. Fuels Red.

WUI D-space Accomplishment:

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

Acres thinned = _____ Acres pruned = _____

I & D Prevention and Suppression Accomplishment:

No. of infested trees treated: _____

Acres inspected and treated: _____

Acres thinned: _____

Accomplishment (Not included above) – LOA Practice Number:

#1 Plan Acres = _____

#5 Acres = _____

#9 Acres treated = _____

#2 Acres tree planting = _____

#6 Acres treated = _____

#10 Acres of restoration = _____

Acres treated = _____

#7 Acres treated = _____

#11 Acres = _____

#3 Acres treated = _____

#8 Acres treated = _____

#4 Acres planted/ renovated = _____



Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Bureau of Land Management Task Order Program	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Forest Land Enhancement Program (a.k.a.: FLEP)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input type="checkbox"/>
Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	<input type="checkbox"/>
Stevens Fuels Treatment Funds	<input type="checkbox"/>
Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	<input type="checkbox"/>
Emergency Supplemental Funds (a.k.a.: ESF)	<input checked="" type="checkbox"/>

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

Name: PAUL LANGE

Address: 4588 SUNSHINE CANYON DR.

BOULDER, CO 80302

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

Grant Number: 5308400-80-46

Approved Funding: \$ 1,880.00

Total Project: \$ 3,600.00

CSFS Account Number: 5308400-6693

Amount of Payment: \$ 1,880.00

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

Approved by _____
(Program manager signature)

Date: _____

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

Project No. 5308400-30-46
(For Official Use Only-
No. from original application)

Applicant name (please print): PAUL LANGE

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)	\$ 3,600.00		A Labor Cost= \$ 3,600.00
Operating Exp ^{3,4} (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = \$ 3,600.00
			Amount Originally Approved = \$ 1,880.00
			Amount to be Reimbursed not to exceed \$470 Per Acre \$ 1,880.00

¹ Any contracted services where payment was made for services.
² Use up to \$ 20.25/hour for Landowner time. This is the maximum allowable.
³ Equipment rental, supplies, etc. needed to complete project. (Tools and Equipment purchases are not reimbursable.)
⁴ Reimbursement amount cannot exceed amount approved. Requests for partial payments will be considered on a case by case basis.
⁵ Reimbursement amount cannot exceed \$470/acres for Emergency Supplemental Funds.

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

Landowner Signature: [Signature] Date: 8/16/11

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

Mailing Address: 4588 SUNSHINE CANYON City: BOULDER

County: BOULDER State: CO Zip: 80302 Phone: (303) 939-9222

Practice certified by: Bryan Baer (BB)
CSFS forester

Payment Approval: _____ Amount: _____ Date: _____
CSFS program manager

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

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

Project No. 5308400-Bo-46

To be completed by CSFS forester:

PROGRAM:

WUI Incentives D-space: _____ I & D Prevention and Suppression – Bark Beetle: _____
FRFTP: _____ STEVENS' Fund: _____ SFA: _____ ESF: X Forest
Restoration Grant (SB71 and HB1199): _____

4.0 Acres
Haz. Fuels Red.

WUI D-space Accomplishment:

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

I & D Prevention and Suppression Accomplishment:

No. of infested trees treated: _____
Acres inspected and treated: _____
Acres thinned: _____

Accomplishment (Not included above) – LOA Practice Number:

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

INVOICE

Wayne's Construction Service, LLC

July 29 2011

DUE UPON
RECEIPT

410 S. Teller Street Suite 3M
Lakewood, CO 80226

720-352-4510
waynewgomez@yahoo.com

BILL TO: Paul Lang
4588 Sunshine Canyon

Description	Supplies / Parts	Amount
Labor		\$ 420.00
Wayne's Const - Tree		\$800.00
Gas		\$60.00
Home Depot		\$78.24
	Subtotal	\$1358.24
	TOTAL	\$1358.24

Description	Time/Hour	Amount