

# Colorado State Forest Service

## Emergency Supplemental

### 2010 Grant Application

#### DISTRICT'S: Please Complete

District Submitting Project:	<b>Boulder</b>
Forester Submitting Project:	<b>Bryan Baer</b>
District Priority Number:	
Date Submitted:	<b>4/21/2011</b>
<b>FOR REVIEWER'S USE ONLY:</b>	
Rating:	

Applicant Information	
<b>Applicant:</b>	Rich and Linda Vahrenkamp
<b>Contact Person:</b>	Same
<b>Address:</b>	3694 Colard Ln.
<b>City/Zip Code:</b>	Lyons, CO 80540
<b>Phone (Work/Cell):</b>	303-823-5558
<b>Email:</b>	<a href="mailto:rlvahren@msn.com">rlvahren@msn.com</a>
<b>Fax:</b>	

Community At Risk Information	
<b>Name of Project:</b>	Vahrenkamp Property
<b>Community Name(s):</b>	Spring Gulch
<b>County:</b>	Boulder
<b>Latitude (decimal degrees):</b>	40.26 N
<b>Longitude (decimal degrees):</b>	105.329 W
<b>Congressional District:</b>	T3N, R71W, Sec#3
Threat Description (check all that apply)	
<b>Homes:</b> <input checked="" type="checkbox"/>	Number of: 1
<b>Businesses:</b> <input type="checkbox"/>	Number of:
<b>Watersheds:</b> <input type="checkbox"/>	Number of:
<b>Other (Describe):</b>	
<b>Infrastructure:</b> <input type="checkbox"/>	Estimated value of:
<b>Economic Viability:</b> <input type="checkbox"/>	Estimated value of:
<b>Historic Structures:</b> <input type="checkbox"/>	Number of:

Requested Grant Amount / Project Description	
All information for the project must fit into the space provided below. The review committee will not consider attachments.	
<b>Dollar Amount Requested May Not Exceed \$470 x Number of Acres Proposed For Treatment</b>	
<b>Dollar Amount Requested</b>	\$2,820.00
<b>Will this Project be conducted as a Pass-Through Grant?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Provide a brief overview of the project and the project area. (If applying for a fuels reduction project, identify vegetation types)</b>	
<p>The project area is located in the Spring Gulch community, just west of the Town of Lyons. Access to the project area is through the main drive, off of Colard Lane. Slope in the project area is generally moderate, with very few areas exceeding 30%. Vegetation types consist of predominately ponderosa pine, with a mix of douglas fir. Understory composition is primarily random clumps of juniper, with a variety of native grasses shrubs throughout. There is one home on the property.</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.

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

4

Project funding will be used to execute fuels reduction throughout the project area, with a strong emphasis on improving forest health. Overstory tree density will be reduced to increase the overall crown spacing of the residual trees. Removal of suppressed, ladder fuels/vegetation will also be of a high priority throughout the project area. Bole-wood material will limbed and cut to manageable lengths, whether hauled off site or stacked appropriately for future firewood consumption. Slash will either be piled appropriately for burning, chipped (with new chip depth not to exceed 4"), lopped and scattered (new slash depth not to exceed 18"), or some combination of the three, granted that all slash gets dealt with. All remaining, uncut trees will be limbed to a minimum of six feet from the ground, or up to 25%, whichever is of the lesser. All stumps heights will be below 4" at the uphill side on average.

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

Landowner will continually monitor project area for undesirable encroaching vegetation, and remove upon detection. Also, landowner will monitor for desirable vegetation re-growth, and limb accordingly, as to reduce potential ladder fuels.

**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 project layout/setup is complete, and will continue through completion, which is targeted for Spring of 2012.

### Interagency Collaboration

**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.).**

5

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

CWPP is not completed to date, but recognizes this area as a priority area



6	<b>Project Category</b> (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:	6.0	Estimated cost per acre:	\$1,500.00
	<b>Project Type</b> (check all that apply)			
	Defensible Space	<input checked="" 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"/>

7	<b>Total Project Expense (Pass Through)</b>		
	<i>Please fill all fields</i>	<b>Grant Share</b> (\$ Amount Requested)	<b>TOTAL</b>
	<b>Contractual Services:</b>		<b>\$ 2,820.00</b>
	<b>TOTAL:</b>	<b>\$2,820.00</b>	<b>\$ 2,820.00</b>

Grant funding may only be used for Contractual Service.

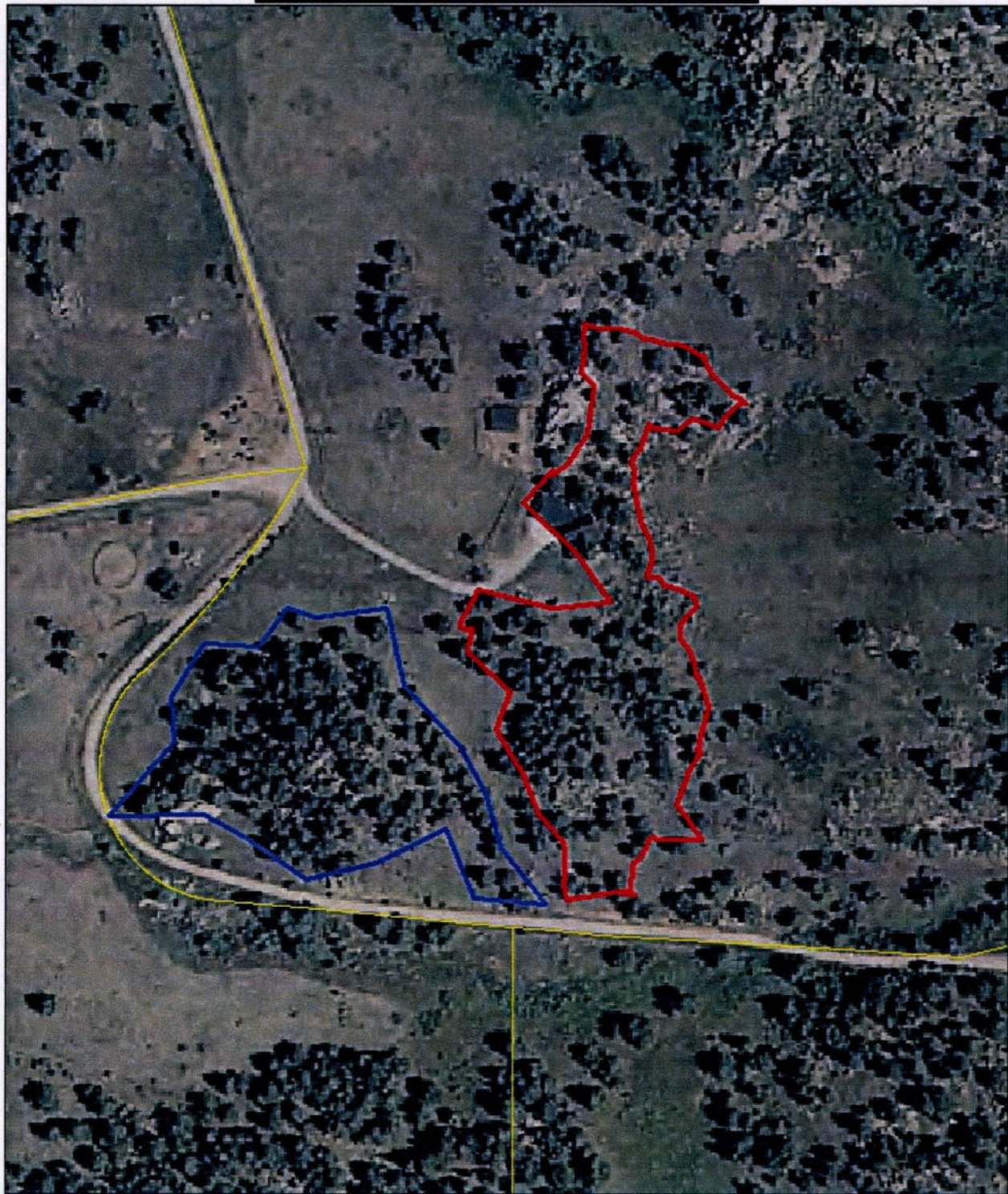
8	<b>Total Project Expense (Non-Pass Through)</b>		
	<i>Please fill all fields</i>	<b>Grant Share</b> (\$ Amount Requested)	<b>TOTAL</b>
	<b>Contractual Services:</b>		<b>\$ 0</b>
	<b>Indirect Costs:</b>		<b>\$ 0</b>
	<b>TOTAL:</b>	<b>\$0</b>	<b>\$ 0</b>

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

*Attach Project Map Showing Specific Treatment Areas*






# Vahrenkamp Proposal



0 100 200 400 600 800 Feet

## **Vahrenkamp Proposal: 6.0 acres**

-  Vahrenkamp\_Unit1
-  Vahrenkamp\_Unit2
-  BOCO\_PARCELS1209



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







EMERGENCY SUPPLEMENTAL FUNDS  
LANDOWNER ASSISTANCE PROGRAMS  
APPLICATION

Form A-ES

PROJECT NUMBER: 5308400-80-32

(For Official Use Only)

NAME: RICH & LINDA VAHRENKAMP

MAILING ADDRESS: 3694 COLARD LN

City: LYONS

State: CO

Zip code: 80540

TELEPHONE NO: 303-823-5558

PROJECT ADDRESS/LEGAL DESCRIPTION: T3N, R71W, section # 3

PRACTICES TO BE COMPLETED BY: SPRING 2012  
Date

Landowner and CSFS forester:

CSFS forester:

Practice No. & Component Title	Quantity Requested	Quantity Approved
		Total:

Request for financial assistance under the Emergency Supplemental LOA program is to meet the objective stated in the management plan. I will not receive more than the actual cost up to \$470 per acre. **I understand that I will not be reimbursed for any expenses incurred prior to approval of my application.** Work must be completed according to approved plan and application, and must meet the standard set for each component. Practices must be maintained for a minimum of 10 years. Requests for partial payments will be approved on a case by case basis.

LANDOWNER SIGNATURE: [Signature]

DATE: 4/14/11

To be completed by CSFS forester:

CSFS FIELD REVIEW SIGNATURE: [Signature]

(Additional USFWS guidelines addressed)

DATE: 5/25/2012

PROGRAM:

ESF: X

Funding Allocated: [Signature]

CSFS District Forester

AMOUNT: \$2,820.00 DATE: 4/22/11

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



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/>
06-15-12  
KCName: RICHARD VAHRENKAMPAddress: 3694 COLLARD LN.LYONS, CO 80540Approved for Payment  
C.S.F.S.

1907608

06-18-12  
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: 5308400-80-32 ~Approved Funding: \$ 2,820.00 ~Total Project: \$ 2,835.30 ~CSFS Account Number: 5308400-6693 ~Amount of Payment: \$ 2,820.00 ~

'09 SUP HAZ FUELS FR 80

Circle one: 1<sup>st</sup> Payment 2<sup>nd</sup> Payment 3<sup>rd</sup> Payment Final Payment ~Approved by [Signature]  
(Program Manager signature)Date: 6/12/12



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

Project No. 5308400-80-32  
(For Official Use Only-  
No. from original application)

Applicant name (please print): RICHARD VAHRENKAMP

	Total Contracted Services <sup>1</sup>	Total Landowner Services <sup>2</sup>	Totals
Labor Cost (Actual)	\$ 1,339.50	\$ 1,495.80	A Labor Cost= \$ 2,835.30
Operating Exp <sup>3</sup> (Actual)			B Oper. Exp.= N/A
Project Cost			C Total Project (A+B)= \$ 2,835.30
			Amount Originally Approved = \$ 2,820.00
			Amount to be Reimbursed not to exceed \$470 Per Acre \$ 2,820.00

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

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

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

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

<sup>5</sup> 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: Richard V. Vahrenkamp

Date: 5/25/12

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

Mailing Address: 3694 COLARD LN

City: LYONS

County: BOULDER State: CO Zip: 80540

Phone: 303-823-5558

Practice certified by: BRYAN BAER  
CSFS forester

Payment Approval: [Signature]  
-CSFS program manager

Amount: \$2,820.00 Date: 6/12/12

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. 5308400-80-32

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): \_\_\_\_\_

6.0 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

01/19/10





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LYONS, CO 80540

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

Approved by \_\_\_\_\_  
(Program manager signature)

Date: \_\_\_\_\_



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Landowner Signature: Richard V. VahrenkampDate: 5/25/12

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Mailing Address: 3694 COLARO LNCity: LYONSCounty: BOULDER State: CO Zip: 80540Phone: 303-823-5558Practice certified by: BRYAN BAER  
CSFS foresterPayment Approval: \_\_\_\_\_ Amount: \_\_\_\_\_ Date: \_\_\_\_\_  
CSFS program manager

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01/19/10



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LANDOWNER ASSISTANCE PROGRAMS  
ACCOMPLISHMENT REPORT (page 2)

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Acres treated = _____	#7 Acres treated = _____	#11 Acres = _____
#3 Acres treated = _____	#8 Acres treated = _____	
#4 Acres planted/ renovated = _____		



**EMERGENCY SUPPLEMENTAL FUNDS  
LANDOWNER ASSISTANCE PROGRAMS  
COST DOCUMENTATION**

I have incurred the following expenses for completion of the LOA Program practice for which I have been funded. These expenses are itemized below. Labor rate to be used if landowner is doing the work is \$20.25/hr. Separate expenses by component (activity). Attach receipts.

Rubén D. Valdez

**Landowner Signature**

[illegible]



# Wildfire Mitigation Grant for Rich and Linda Vahrenkamp

Date	By Whom	Activity/Expense:	Hours	Mileage	Expenses
Rates			20.25	0.25	
5/5/11	Rich Vahrenkamp	Cut trees and lower branches	1		20.25
5/7/11	Rich Vahrenkamp	Cut trees and lower branches	2		40.50
10/20/11	Rich Vahrenkamp	Cut trees and lower branches	6		121.50
10/22/11		Mileage to Lefthand Fire Station and return		45	11.25
10/22/11	Rich Vahrenkamp	Drive to Lefthand Fire Station, unload	2		40.50
10/22/11	Linda Vahrenkamp	Drive to Lefthand Fire Station. Unload	2		40.50
10/22/11		Mileage to Lefthand Fire Station and return, trip 2		45	11.25
10/22/11	Rich Vahrenkamp	Drive to Lefthand Fire Station, unload, trip	1.8		36.45
10/22/11	Linda Vahrenkamp	Drive to Lefthand Fire Station. Unload, trip	1.8		36.45
10/23/11		Mileage to Lefthand Fire Station and return		45	11.25
10/23/11	Rich Vahrenkamp	Drive to Lefthand Fire Station, unload	1.8		36.45
10/23/11	Linda Vahrenkamp	Drive to Lefthand Fire Station. Unload	1.8		36.45
2/22/12	Rich Vahrenkamp	Cut	4		81.00
2/24/12	Rich Vahrenkamp	Cut	4		81.00
2/26/12	Rich Vahrenkamp	Cut	3		60.75
2/29/12	Rich Vahrenkamp	Cut	2		40.50
3/2/12	Drew Hirschfeld	Cutting and hauling			645.00
3/3/12	Rich Vahrenkamp	Cut	3		60.75
3/9/12	Rich Vahrenkamp	Cut	3		60.75
3/12/12	Rich Vahrenkamp	Cut and stack	3		60.75
3/14/12	Bob Alm	Loading and hauling (pd on 4/6/12)			516.50
3/14/12	Rich Vahrenkamp	Cut and load	3		60.75
3/15/12	Rich Vahrenkamp	Cut and stack	2		40.50
3/16/12	Rich Vahrenkamp	Cut and stack	2		40.50
4/2/12	Rich Vahrenkamp	Cut and stack	4		81.00
4/6/12	Rich Vahrenkamp	Cut and load	2		40.50
4/19/12	Rich Vahrenkamp	Cut	4		81.00
4/20/12	Rich Vahrenkamp	Cut	3		60.75
4/23/12	Rich Vahrenkamp	Cut and load	2		40.50
4/23/12	Bob Alm	Loading and hauling			178.00
5/14/12	Rich Vahrenkamp	Cut and load	4		81.00
5/20/12	Rich Vahrenkamp	Cut and load	4		81.00
Total					2835.30



MON								/ loads
TUES	2/28/ 2012		Truck			Hauled off one load of slash Pile	1 load	
WED	2/29/ 2012		Truck			Hauled off one load of slash Pile	1 load	
THUR								
FRI	3/2/ 2012		Truck			Hauled off six loads of slash Pile	6 loads	
SAT Start Date	2/25/ 2012		Truck			Hauled off four loads of slash Pile	4 loads	
SUN	2/26/ 2012		440 Stihl			cut down and limbed trees	3 hrs	

I WAS NOT INJURED ON THE JOB

  
EMPLOYEE SIGNATURE

SUPERVISOR

TOTAL HOURS

3

Total Truck Loads

12

\$ 645.<sup>00</sup>/<sub>100</sub>



651286

Bob ALM  
145 LAKE DR  
LYONS CO.

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE 3/14/12	
NAME RICH VERBANCAMP					
ADDRESS					
CITY, STATE, ZIP					
SOLD BY		CASH	C.O.D.	CHARGE	ON. ACCT.
		MOSE. RETD.		PAID OUT	
QUANTITY	DESCRIPTION	PRICE	AMOUNT		
1	2 HRS LOAD BRANCHES	@ 30	20		
2	2 HRS HAUL BRANCHES	@ 35	70		
3	1 DUMP FEE		48		
4	2 HRS LOAD BRANCHES	@ 30	60		
5	2 HRS HAUL & DUMP BRANCHES	@ 35	70		
6	1 DUMP FEE		48		
7	2 HRS LOAD BRANCHES	@ 30	60		
8	1.5 HRS HAUL & DUMP BRANCHES	@ 35	52.50		
9	1 DUMP FEE		48		
10			516.50		
11	PAID 4/6/12				
12					
13					
14					
15					
16					
17					
18					
RECEIVED BY					



657291

Bob ALM  
145 LAKE DR.

LYONS CO. 80540

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE 4/23/12	
NAME RICH VAHREKAMP					
ADDRESS					
CITY, STATE, ZIP LYONS CO					
SOLD BY	CASH	C.O.D.	CHARGE	ON. ACCT.	MOSE. RETD. PAID OUT

QUANTITY	DESCRIPTION	PRICE	AMOUNT
1	2 1/2 TON LOADERS	@ 30	60 <sup>00</sup>
2	2 1/2 TON HAULING	@ 35	70 <sup>00</sup>
3	DUMP FEE		48 <sup>00</sup>
4			
5			178 <sup>00</sup>
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			

PAID  
THANK YOU  
JAV

RECEIVED BY

A-5805  
T-46320/46350

KEEP THIS SLIP FOR REFERENCE

01-11