



COPY ✓

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 (VFA/RFA)	<input type="checkbox"/>
Colorado Forest Restoration Grant	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (SFA)	<input checked="" type="checkbox"/>
Front Range Fuels Treatment Partnership (FRFTP)	<input type="checkbox"/>
Stevens Fuels Treatment Funds (CAFA)	<input type="checkbox"/>
Emergency Supplemental Funds (ESF)	<input type="checkbox"/>

☒ Checked for Federal suspension and debarment (State Office) <https://www.sam.gov/portal/public/SAM/>

Name: Glacier View FPD

Address: 1414 Green Mountain Drive

Livermore, CO 80536

~ Attn: Bob Isaacson

11-24-14
(K)

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

Doc. # 4852431

11-24-14
(K)

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

Grant Number: 5366950-4-FC ~

Non-Federal Match: \$1,282.00

Approved Funding: \$54,820.00 ~

Total Project: \$3474.00 ~

CSFS Account Number: 5366950-6643 -

Amount of Payment: \$2,192.00 ~

'12CPG SFA CG3 Projects Under Northern LA

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

4th payment

Program Manager Signature [Signature]

Date: 11/21/14

Program Manager Name Scott M. Woods

Colorado State Forest Service

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

EXHIBIT B
CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

In order to receive reimbursement, you must provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by receipts for actual costs (out of pocket expenses) incurred by the recipient. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and have corresponding match.

1. Project/Account #: 536695-4 - <u>FC</u>	2. Total Award Amount: \$54,822.00
3. Project Name: Glacier View FPD	4. Reimbursement Amount to Date: \$40,148.02
5. Make Payment To: Glacier View FPD Name: Attn: Robert Isaacson Address: 1414 Green Mountain Drive, Livermore, CO 80536	6. Period of Performance (Project Period): From: 01 Apr 2014 To: 01 November 2014

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. 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, etc., for which the award was granted. Attach additional sheets as necessary.

✓ Crews have completed 84.66 acres (4.0 acres this reimbursement period) on private land, all defensible space
(See attached spreadsheets)

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Award Amount	B. Recipient Contribution	C. Non-recipient Contribution	D. Total Contributions	E. Reimbursement Requested Amount	F. Total Match Ratio %
			B + C		E / D
54,822.00	\$3,474.00	\$0.00	\$3,474.00	\$2,192.00	63.10%

* Use results from Exhibit B, Financial Assistance Cost-Share Program Reimbursement Calculation Worksheet to complete table above. Include Exhibit B, and Form D, CSFS Financial Assistance Cost-Share Program Cost Documentation, or other approved documentation with Exhibit B to request reimbursement.

Reimbursement Request: I request reimbursement in the amount of \$ 2,192.00 for the work completed and documented above.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature:

Robert Isaacson Chief ✓

Date: 11/14/2014

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature:

Boyd O Lebeda ~

Date: 11/14/14

11. Funding is available and request is approved for reimbursement.

Program Manager Signature:

Scott Woods ~

Date: 11/21/14

COPY



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 (VFA/RFA)	<input type="checkbox"/>
Colorado Forest Restoration Grant	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (SFA)	<input checked="" type="checkbox"/>
Front Range Fuels Treatment Partnership (FRFTP)	<input type="checkbox"/>
Stevens Fuels Treatment Funds (CAFA)	<input type="checkbox"/>
Emergency Supplemental Funds (ESF)	<input type="checkbox"/>

☐ Checked for Federal suspension and debarment (State Office) <https://www.sam.gov/portal/public/SAM/>

Name: Glacier View FPD

Address: 1414 Green Mountain Drive
Livermore, CO 80536
Attn: Bob Isaacson

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

Grant Number: 5366950-4-FC Non-Federal Match: \$1,282.00

Approved Funding: \$54,820.00 Total Project: \$3474.00

CSFS Account Number: 5366950-6693 Amount of Payment: \$2,192.00

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

4th payment

Program Manager Signature _____ Date: _____

Program Manager Name _____

EXHIBIT B
CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

In order to receive reimbursement, you must provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by receipts for actual costs (out of pocket expenses) incurred by the recipient. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and have corresponding match.

1. Project/Account #:536695-4	2. Total Award Amount:\$54,822.00
3. Project Name: Glacier View FPD	4. Reimbursement Amount to Date:\$40,148.02
5. Make Payment To: Glacier View FPD Name: Attn: Robert Isaacson Address:1414 Green Mountain Drive, Livermore, CO 80536	6. Period of Performance (Project Period): From:01 Apr 2014 To:01 November 2014

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. 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, etc., for which the award was granted. Attach additional sheets as necessary.

Crews have completed 84.66 acres (4.0 acres this reimbursement period) on private land, all defensible space
(See attached spreadsheets)

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Award Amount	B. Recipient Contribution	C. Non-recipient Contribution	D. Total Contributions	E. Reimbursement Requested Amount	F. Total Match Ratio %
			B + C		E / D
54,822.00	\$3,474.00	\$0.00	\$3,474.00	\$2,192.00	63.10%

* Use results from Exhibit B: Financial Assistance Cost-Share Program Reimbursement Calculation Worksheet to complete table above. Include Exhibit B, and Form D, CSFS Financial Assistance Cost-Share Program Cost Documentation, or other approved documentation with Exhibit B to request reimbursement.

Reimbursement Request: I request reimbursement in the amount of \$ 2,192.00 for the work completed and documented above.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature:

Robert Isaacson Chief

Date:

11/14/2014

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature:

Boyd O Lebeda

Date:

11/14/14

11. Funding is available and request is approved for reimbursement.

Program Manager Signature:

Date:

GLACIER VIEW FIRE

Non-Paid Contributions - Personnel

Date	Name	Hours	Rate	Cost
07/11/14	Robert Isaacson	1	\$22.00	\$22.00
07/15/14	Robert Isaacson	1	\$22.00	\$22.00
07/23/14	Robert Isaacson	1	\$22.00	\$22.00
07/26/14	Robert Isaacson	1	\$22.00	\$22.00
07/29/14	Robert Isaacson	2	\$22.00	\$44.00
08/09/14	Robert Isaacson	1	\$22.00	\$22.00
10/14/14	Robert Isaacson	3.5	\$22.00	\$77.00
10/15/14	Robert Isaacson	6	\$22.00	\$132.00
10/16/14	Robert Isaacson	5.5	\$22.00	\$121.00
10/17/14	Robert Isaacson	2.5	\$22.00	\$55.00
10/21/14	Robert Isaacson	4	\$22.00	\$88.00
10/22/14	Robert Isaacson	1	\$22.00	\$22.00
10/22/14	Robert Isaacson	5	\$22.00	\$110.00
10/28/14	Robert Isaacson	4	\$22.00	\$88.00
10/29/14	Robert Isaacson	<u>3.5</u>	\$22.00	<u>\$77.00</u>
	Total	42		<u><u>\$924.00</u></u>

GLACIER VIEW FIRE

Non Paid Contributions - Equipment

Date	Name	Hours	Rate/Hr	Cost
07/11/14	Squad 1	1	\$55.00	\$55.00
07/15/14	Squad 1	1	\$55.00	\$55.00
07/23/14	Squad 1	1	\$55.00	\$55.00
07/26/14	Squad 1	1	\$55.00	\$55.00
07/29/14	Squad 1	2	\$55.00	\$110.00
08/09/14	Squad 1	1	\$55.00	\$55.00
10/14/14	Squad 1	3.5	\$55.00	\$192.50
10/15/14	Squad 1	6	\$55.00	\$330.00
10/16/14	Squad 1	5.5	\$55.00	\$302.50
10/17/14	Squad 1	2.5	\$55.00	\$137.50
10/21/14	Squad 1	4	\$55.00	\$220.00
10/21/14	Dozer	4	\$60.00	\$240.00
10/22/14	Squad 1	1	\$55.00	\$55.00
10/22/14	Squad 1	5	\$55.00	\$275.00
10/28/14	Squad 1	4	\$55.00	\$220.00
10/29/14	Squad 1	<u>3.5</u>	\$55.00	<u>\$192.50</u>
Total		46		<u><u>\$2,550.00</u></u>

Rates per CSPS letter 2011-2014 CRRF Dated 11/22/2010

GLACIER VIEW FIRE
WUI Expenditures -TOTALS

Non-Paid Contributions

Personnel	\$924.00
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Equipment	<u>\$2,550.00</u>
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Total Cost	<u><u>\$3,474.00</u></u>
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spreadsheet
of landings

Fuel log

Crew Timesheet

Cost Summary

Invoices Eagle's Nest
Ferry

51,820

100 Ac

1st 11831.82 26.56

2nd 17849.40 32.56

3rd 10466.80 19.10

40,148.02 80.66



COPY

Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input checked="" 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 type="checkbox"/>

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

Name: Glacier View FPD ✓

Address: 1414 Green Mountain Drive ✓

Livermore, CO 80536 ✓

~

Attn: Greg Niswender

Approved for Payment

C.S.F.S.

3658992

06-10-14

(K)

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: 5366950-4-FC Cooperator Match: \$13,519.53 ~

Approved Funding: \$54,820.00 Total Project: \$23,980.33 ~

CSFS Account Number: 5366950-6613 Amount of Payment: \$10,460.80 ~ ✓

'12 CPG SFA CG3 PROJECTS UNDER NORTHERN LARIMER

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

Approved by [Signature]
(Program manager signature)

Date: 6/9/14 ✓



mail to Scott Woods
on 5/22/14

Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input checked="" 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 type="checkbox"/>

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

Name: Glacier View FPD

Address: 1414 Green Mountain Drive
Livermore, CO 80536

Attn: Greg Niswender

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: 5366950-4 Cooperator Match: \$13,519.53

Approved Funding: \$54,820.⁰⁰ Total Project: \$23,986.³³

CSFS Account Number: 5366950-6693 Amount of Payment: \$10,466.⁸⁰

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

Approved by _____
(Program manager signature)

Date: _____

EXHIBIT B
CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

In order to receive reimbursement, you **must** provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by receipts for actual costs (out of pocket expenses) incurred by the recipient. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and have corresponding match.

1. Project/Account #: 536695-4	2. Total Award Amount: \$54,822.00
3. Project Name: Glacier View FPD	4. Reimbursement Amount to Date: \$29,681.22
5. Make Payment To: Glacier View FPD Name: Attn: Greg Niswender Address: 1414 Green Mountain Drive, Livermore CO 80536	6. Period of Performance (Project Period): From: 01 Jan 2014 To: 31 March 2014

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. 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, etc., for which the award was granted. Attach additional sheets as necessary.

Crews have completed 80.66 acres (19.10 acres this reimbursement period) on private land, all defensible space.

see attached spreadsheets

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Award Amount	B. Recipient Contribution	C. Non-recipient Contribution	D. Total Contributions	E. Reimbursement Requested Amount	F. Total Match Ratio %
			B + C		E / D
\$54,822.00	\$23,986.33	\$0.00	\$23,986.33	\$10,466.80	43.64%

* Use results from Exhibit B1 Financial Assistance Cost-Share Program Reimbursement Calculation Worksheet to complete table above. Include Exhibit B1 and Form D, CSFS Financial Assistance Cost-Share Program Cost Documentation, or other approved documentation with Exhibit B to request reimbursement.

Reimbursement Request: I request reimbursement in the amount of \$ \$10,466.80 for the work completed and documented above.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: _____

Date: 4/28/2014

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: _____

Date: 5/21/2014

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: _____

Date: _____

GLACIER VIEW FIRE
WUI Expenditures - TOTALS

Crew Wages	\$7,132.09
Contractor Costs	\$0.00
Material Costs	\$327.74

Total Paid Costs	\$7,459.83
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Non-Paid Contributions

Personnel	\$2,311.50
Equipment	\$14,215.00

Total Costs	\$23,986.33
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GLACIER VIEW FIRE
Mitigation Crew Wages WUI I

Date	Name	Hours	Rate	Wages
1/27/2014	Cody T. May	7.00	\$19.46	\$136.22
	Chris Serafin	7.00	\$19.46	\$136.22
2/10/2014	Cody T. May	61.75	\$19.46	\$1,201.66
	Chris Serafin	61.75	\$19.46	\$1,201.66
2/24/2014	Cody T. May	52.00	\$19.46	\$1,011.92
	Chris Serafin	52.00	\$19.46	\$1,011.92
3/10/2014	Cody T. May	30.25	\$19.46	\$588.67
	Chris Serafin	30.25	\$19.46	\$588.67
3/24/2014	Cody T. May	39.25	\$19.46	\$763.81
	Chris Serafin	39.25	\$19.46	\$763.81
Total Manpower Costs		366.50		\$7,132.09

GLACIER VIEW FIRE - WUI Grant
Contractor Costs

Date

Name

Amount

Contractor Cost Total

\$0.00

GLACIER VIEW FIRE - WUI Grant
Material Costs

Date	Material	Amount
2/13/2014	Chainsaw parts	\$15.33
2/24/2014	Fuel from 1/15 to 2/6	\$199.63
3/17/2014	Chainsaw parts	\$41.84
3/17/2014	Chainsaw parts	\$50.95
3/17/2014	Chainsaw parts	\$19.99
Material Costs Total		\$327.74

GLACIER VIEW FIRE
Non Paid Contributions - Personnel

Date	Name	Hrs	Rate	Cost
1/2/2014	Lawrence Beals	2.00	\$18.50	\$37.00
1/8/2014	Lawrence Beals	2.00	\$18.50	\$37.00
1/15/2014	Lawrence Beals	2.00	\$18.50	\$37.00
1/22/2014	Lawrence Beals	2.00	\$18.50	\$37.00
1/29/2014	Lawrence Beals	2.00	\$18.50	\$37.00
2/5/2014	Lawrence Beals	2.00	\$18.50	\$37.00
2/12/2014	Lawrence Beals	2.00	\$18.50	\$37.00
2/19/2014	Lawrence Beals	2.00	\$18.50	\$37.00
2/26/2014	Lawrence Beals	2.00	\$18.50	\$37.00
3/5/2014	Lawrence Beals	2.00	\$18.50	\$37.00
3/12/2014	Lawrence Beals	2.00	\$18.50	\$37.00
3/19/2014	Lawrence Beals	2.00	\$18.50	\$37.00
3/26/2014	Lawrence Beals	2.00	\$18.50	\$37.00
2/10/2014	Tess Walls	5.00	\$18.50	\$92.50
1/2/2014	Greg Niswender	2.00	\$22.00	\$44.00
1/4/2014	Greg Niswender	3.00	\$22.00	\$66.00
1/6/2014	Greg Niswender	2.00	\$22.00	\$44.00
1/8/2014	Greg Niswender	2.00	\$22.00	\$44.00
1/10/2014	Greg Niswender	2.00	\$22.00	\$44.00
1/13/2014	Greg Niswender	2.00	\$22.00	\$44.00
1/15/2014	Greg Niswender	2.00	\$22.00	\$44.00
1/17/2014	Greg Niswender	2.00	\$22.00	\$44.00
1/20/2014	Greg Niswender	2.00	\$22.00	\$44.00
1/22/2104	Greg Niswender	2.00	\$22.00	\$44.00
1/24/2014	Greg Niswender	2.00	\$22.00	\$44.00
1/27/2014	Greg Niswender	2.00	\$22.00	\$44.00
1/29/2014	Greg Niswender	2.00	\$22.00	\$44.00
1/31/2014	Greg Niswender	2.00	\$22.00	\$44.00

GLACIER VIEW FIRE
Non Paid Contributions - Personnel

2/3/2014	Greg Niswender	2.00	\$22.00	\$44.00
2/5/2014	Greg Niswender	2.00	\$22.00	\$44.00
2/7/2014	Greg Niswender	2.00	\$22.00	\$44.00
2/10/2014	Greg Niswender	2.00	\$22.00	\$44.00
2/12/2104	Greg Niswender	2.00	\$22.00	\$44.00
2/14/2014	Greg Niswender	2.00	\$22.00	\$44.00
2/17/2014	Greg Niswender	2.00	\$22.00	\$44.00
2/19/2014	Greg Niswender	2.00	\$22.00	\$44.00
2/21/2014	Greg Niswender	2.00	\$22.00	\$44.00
2/24/2014	Greg Niswender	2.00	\$22.00	\$44.00
2/26/2014	Greg Niswender	2.00	\$22.00	\$44.00
2/28/2014	Greg Niswender	2.00	\$22.00	\$44.00
3/3/2014	Greg Niswender	2.00	\$22.00	\$44.00
3/5/2014	Greg Niswender	2.00	\$22.00	\$44.00
3/7/2014	Greg Niswender	2.00	\$22.00	\$44.00
3/10/2014	Greg Niswender	2.00	\$22.00	\$44.00
3/12/2014	Greg Niswender	2.00	\$22.00	\$44.00
3/14/2014	Greg Niswender	2.00	\$22.00	\$44.00
3/17/2014	Greg Niswender	2.00	\$22.00	\$44.00
3/19/2014	Greg Niswender	2.00	\$22.00	\$44.00
3/21/2014	Greg Niswender	2.00	\$22.00	\$44.00
3/24/2014	Greg Niswender	2.00	\$22.00	\$44.00
3/26/2014	Greg Niswender	2.00	\$22.00	\$44.00
3/28/2014	Greg Niswender	2.00	\$22.00	\$44.00
3/31/2014	Greg Niswender	2.00	\$22.00	\$44.00

Non Paid Contributions Total

110.00

\$2,311.50

GLACIER VIEW FIRE
Non Paid Contributions - Equipment

Date	Name	Hrs	Rate/Hrly	Cost
1/13/2014	Engine 602	7.50	\$65.00	\$487.50
1/23/2014	Engine 602	3.50	\$65.00	\$227.50
1/27/2014	Engine 602	8.50	\$65.00	\$552.50
1/28/2014	Engine 602	0.50	\$65.00	\$32.50
1/29/2014	Engine 602	4.50	\$65.00	\$292.50
1/30/2014	Engine 602	8.50	\$65.00	\$552.50
1/31/2014	Engine 602	4.50	\$65.00	\$292.50
2/3/2014	Engine 602	8.00	\$65.00	\$520.00
2/4/2014	Engine 602	5.50	\$65.00	\$357.50
2/5/2014	Engine 602	3.50	\$65.00	\$227.50
2/6/2014	Engine 602	8.50	\$65.00	\$552.50
2/7/2014	Engine 602	5.50	\$65.00	\$357.50
2/10/2014	Engine 602	8.50	\$65.00	\$552.50
2/11/2014	Engine 602	7.00	\$65.00	\$455.00
2/12/2014	Engine 602	8.00	\$65.00	\$520.00
2/13/2014	Engine 602	5.50	\$65.00	\$357.50
2/17/2014	Engine 602	9.00	\$65.00	\$585.00
2/18/2014	Engine 602	1.50	\$65.00	\$97.50
2/19/2014	Engine 602	3.00	\$65.00	\$195.00
2/20/2014	Engine 602	8.00	\$65.00	\$520.00
2/24/2014	Engine 602	1.00	\$65.00	\$65.00
2/27/2014	Engine 602	4.50	\$65.00	\$292.50
3/3/2014	Engine 602	2.00	\$65.00	\$130.00
3/4/2014	Engine 602	7.00	\$65.00	\$455.00
3/5/2014	Engine 602	2.00	\$65.00	\$130.00
3/6/2014	Engine 602	5.00	\$65.00	\$325.00
3/6/2014	Dozer	5.00	\$60.00	\$300.00
3/11/2014	Engine 602	5.50	\$65.00	\$357.50
3/11/2014	Dozer	5.50	\$60.00	\$330.00
3/14/2014	Engine 602	5.00	\$65.00	\$325.00
3/17/2014	Engine 602	3.00	\$65.00	\$195.00
3/18/2014	Engine 602	9.00	\$65.00	\$585.00

GLACIER VIEW FIRE
Non Paid Contributions - Equipment

3/19/2014	Engine 602	9.00	\$65.00	\$585.00
3/20/2014	Engine 602	4.00	\$65.00	\$260.00
1/2/2014	Squad 2		\$55.00	\$55.00
1/4/2014	Squad 2		\$55.00	\$55.00
1/6/2014	Squad 2		\$55.00	\$55.00
1/8/2014	Squad 2		\$55.00	\$55.00
1/10/2014	Squad 2		\$55.00	\$55.00
1/13/2014	Squad 2		\$55.00	\$55.00
1/15/2014	Squad 2		\$55.00	\$55.00
1/17/2014	Squad 2		\$55.00	\$55.00
1/20/2014	Squad 2		\$55.00	\$55.00
1/22/2104	Squad 2		\$55.00	\$55.00
1/24/2014	Squad 2		\$55.00	\$55.00
1/27/2014	Squad 2		\$55.00	\$55.00
1/29/2014	Squad 2		\$55.00	\$55.00
1/31/2014	Squad 2		\$55.00	\$55.00
2/3/2014	Squad 2		\$55.00	\$55.00
2/5/2014	Squad 2		\$55.00	\$55.00
2/7/2014	Squad 2		\$55.00	\$55.00
2/10/2014	Squad 2		\$55.00	\$55.00
2/12/2104	Squad 2		\$55.00	\$55.00
2/14/2014	Squad 2		\$55.00	\$55.00
2/17/2014	Squad 2		\$55.00	\$55.00
2/19/2014	Squad 2		\$55.00	\$55.00
2/21/2014	Squad 2		\$55.00	\$55.00
2/24/2014	Squad 2		\$55.00	\$55.00
2/26/2014	Squad 2		\$55.00	\$55.00
2/28/2014	Squad 2		\$55.00	\$55.00
3/3/2014	Squad 2		\$55.00	\$55.00
3/5/2014	Squad 2		\$55.00	\$55.00
3/7/2014	Squad 2		\$55.00	\$55.00
3/10/2014	Squad 2		\$55.00	\$55.00
3/12/2014	Squad 2		\$55.00	\$55.00

GLACIER VIEW FIRE
Non Paid Contributions - Equipment

3/14/2014	Squad 2	\$55.00	\$55.00
3/17/2014	Squad 2	\$55.00	\$55.00
3/19/2014	Squad 2	\$55.00	\$55.00
3/21/2014	Squad 2	\$55.00	\$55.00
3/24/2014	Squad 2	\$55.00	\$55.00
3/26/2014	Squad 2	\$55.00	\$55.00
3/28/2014	Squad 2	\$55.00	\$55.00
3/31/2014	Squad 2	\$55.00	\$55.00

Non Paid Contributions Total

\$14,215.00

Rates per CSPS letter 2011-2014 Cooperator Resource Rate Forms dtd 11/22/2010

Type 6 Engine = \$65/hr

Type 3 Dozer = \$60/hr

Squad = \$55/daily



COPY

Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input checked="" 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 type="checkbox"/>

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

10-22-13

Name: Glacier View F.P.D.Address: 1414 Green Mountain DriveLivermore, CO 80536Attn: Greg Niswender

Approved for Payment

C.S.F.S.

2668423

10-22-13

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: 536695-4-FC Cooperator Match: \$ 20,789.13Approved Funding: \$ 54,820 ~~\$ 54,822~~ Total Project: \$ 38,638.53CSFS Account Number: 5366950-6693 Amount of Payment: \$ 17,849.401/2CPG SFA CG3 Projects Under Northern Ca.Circle one: 1st Payment 2nd Payment 3rd Payment Final PaymentApproved by [Signature]
(Program manager signature)Date: 10/29/13

EXHIBIT B
CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

In order to receive reimbursement, you **must** provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by receipts for actual costs (out of pocket expenses) incurred by the recipient. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and have corresponding match.

1. Project/Account #: 536695-4 - FC	2. Total Award Amount: \$54,822.00
3. Project Name: Glacier View F.P.D.	4. Reimbursement Amount to Date: \$11,831.82
5. Make Payment To: Glacier View F.P.D. Name: Attn: Greg Niswender Address: 1414 Green Mountain Drive Livermore, CO 80536	6. Period of Performance (Project Period): From: 2-Jul-13 To: 30-Sep-13

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. 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, etc., for which the award was granted. Attach additional sheets as necessary.

Crews have completed 59.12 Acres (32.56 acres this reimbursement period) on private land, all defensible space.
See attached spreadsheets.

$$32.56 \text{ ac} \times \$548^{20} / \text{ac} = \$17,849^{40}$$

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Award Amount	B. Recipient Contribution	C. Non-recipient Contribution	D. Total Contributions	E. Reimbursement Requested Amount	F. Total Match Ratio %
			B + C		E / D
\$54,822.00	\$29,131.01	\$9,507 ⁵² 80.00	\$38,638 ⁵³ \$29,131.01	\$17,849 ⁴⁰ \$17,842.88	46.2% 61.25%

* Use results from Exhibit B: Financial Assistance Cost-Share Program Reimbursement Calculation Worksheet to complete table above. Include Exhibit B: and Form D, CSFS Financial Assistance Cost-Share Program Cost Documentation, or other approved documentation with Exhibit B to request reimbursement.

\$17,849⁴⁰

Reimbursement Request: I request reimbursement in the amount of \$ 17,849⁴⁰ for the work completed and documented above.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature:

[Signature] Chief GUSD

Date:

9-30-2013

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature:

[Signature]

Date:

10/9/13

11. Funding is available and request is approved for reimbursement.

Program Manager Signature:

[Signature]

Date:

10/23/13

COPY

EXHIBIT B
CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

mailed to Scott on 10/10/13

In order to receive reimbursement, you **must** provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by receipts for actual costs (out of pocket expenses) incurred by the recipient. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and have corresponding match.

1. Project/Account #:	536695-4	2. Total Award Amount: \$54,822.00
3. Project Name:	Glacier View F.P.D.	4. Reimbursement Amount to Date: \$11,831.82
5. Make Payment To:	Glacier View F.P.D.	6. Period of Performance (Project Period):
Name:		From: 2-Jul-13
Attn:	Greg Niswender	To: 30-Sep-13
Address:	1414 Green Mountain Drive Livermore, CO 80536	

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. 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, etc., for which the award was granted. Attach additional sheets as necessary.

Crews have completed 59.12 Acres (32.56 acres this reimbursement period) on private land, all defensible space.
See attached spreadsheets.

$$32.56 \text{ ac} \times \$548.20/\text{ac} = \$17,849.40$$

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Award Amount	B. Recipient Contribution	C. Non-recipient Contribution	D. Total Contributions	E. Reimbursement Requested Amount	F. Total Match Ratio %
			B + C		E / D
\$54,822.00	\$29,131.01	\$9,507.52	\$38,638.53	\$17,849.40	46.2%

* Use results from Exhibit B: Financial Assistance Cost-Share Program Reimbursement Calculation Worksheet to complete table above. Include Exhibit B: and Form D, CSFS Financial Assistance Cost-Share Program Cost Documentation, or other approved documentation with Exhibit B to request reimbursement.

\$17,849.40

DCS

Reimbursement Request: I request reimbursement in the amount of \$ 17,849.40 for the work completed and documented above.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature:

[Signature] Chief GVPD

Date: 9-30-2013

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature:

[Signature]

Date: 10/9/13

11. Funding is available and request is approved for reimbursement.

Program Manager Signature:

Date: _____



Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input checked="" 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 type="checkbox"/>

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

Name: Glacier View F.P.D.

Address: 1414 Green Mountain Drive

Livermore, CO 80536

Attn: Greg Niswender

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: 536695-4

Cooperator Match: \$ 20,789.¹³

Approved Funding: \$ 54,820.⁰⁰

Total Project: \$ 38,638.⁵³

CSFS Account Number: 536695 -6693

Amount of Payment: \$ 17,849.⁴⁰

Circle one: 1st Payment

2nd Payment

3rd Payment

Final Payment

Approved by _____
(Program manager signature)

Date: _____

GLACIER VIEW FIRE
WUI Expenditures - TOTALS

Crew Wages
Crew Wages - FICA
Crew Wages - FICA previous quarter
Contractor Costs
Material Costs

\$10,002.25
\$765.17
\$702.27
\$6,250.00
\$380.96

} paid by Glacier View Fire
DCS

Total Paid Costs

\$18,100.65

Non-Paid Contributions

Personnel

\$2,397.38

Equipment

\$8,632.98

Cash match From Homeowners

\$9,507.52

Total Costs

~~\$29,131.01~~

\$ 38,638.53

} DCS

**CSFS FINANCIAL ASSISTANCE COST-SHARE PROGRAM
COST DOCUMENTATION**

The following are activities conducted for completion of the Financial Assistance Program practice for which I have been funded. The value of each the activity is itemized below. Attach receipts.

Date m/d/yr	By Whom	Activity/Expense*	Hours	Value (\$)
		SEE ATTACHED SPREADSHEETS		

*Use Exhibit B1 CSFS Financial Assistance Cost-Share Program Reimbursement Calculation Worksheet to be sure you account for the type of activities, expenses and other contributions provided to complete project, or phase of project. Visit Independent Sector to determine current volunteer labor rate.

Grant Recipient Signature_____
Date_____
District Forester Signature_____
Date

GLACIER VIEW FIRE
Mitigation Crew Wages

Date	Name	Gross Wages	FITW	SITW	FICA	MED	Net Wages
7/15/2013	Taylor M. Burnett	\$1,008.00			\$62.50	\$14.62	\$930.89
7/29/2013		\$1,008.00			\$62.50	\$14.62	\$930.89
8/12/2013		\$931.00			\$57.72	\$13.50	\$859.78
8/19/2013		\$315.00			\$19.53	\$4.57	\$290.90
7/15/2013	Scott D. Gallagher	\$1,008.00			\$62.50	\$14.62	\$930.89
7/29/2013		\$1,008.00			\$62.50	\$14.62	\$930.89
8/12/2013		\$980.00			\$60.76	\$14.21	\$905.03
8/19/2013		\$315.00			\$19.53	\$4.57	\$290.90
7/15/2013	Cody T. May	\$1,044.00			\$64.73	\$15.14	\$964.13
7/29/2013		\$1,044.00			\$64.73	\$15.14	\$964.13
8/12/2013		\$1,015.00			\$62.93	\$14.72	\$937.35
8/19/2013		\$326.25			\$20.23	\$4.73	\$301.29
Total Manpower Costs		\$10,002.25			\$620.16	\$145.06	\$9,237.07

GLACIER VIEW FIRE - WUI Grant

Contractor Costs

Date	Name	Amount
7/8/2013	Eagles Nest Forestry LLC	\$1,500.00
7/8/2013	Eagles Nest Forestry LLC	\$1,450.00
7/14/2013	Eagles Nest Forestry LLC	\$900.00
7/29/2013	Eagles Nest Forestry LLC	\$650.00
7/30/2013	Eagles Nest Forestry LLC	\$200.00
7/30/2013	Eagles Nest Forestry LLC	\$200.00
7/30/2013	Eagles Nest Forestry LLC	\$100.00
8/9/2013	Eagles Nest Forestry LLC	\$400.00
8/20/2013	Eagles Nest Forestry LLC	\$200.00
8/20/2013	Eagles Nest Forestry LLC	\$200.00
8/27/2013	Eagles Nest Forestry LLC	\$450.00

tractor Cost Total

\$6,250.00

GLACIER VIEW FIRE - WUI Grant

Material Costs

Date	Material	Amount
6/25/2013	Fuel (17.4 gals @ 3.699)	\$64.36
7/15/2013	Marking Tape (White Cap)	\$99.20
7/25/2013	Fuel (58 gals @ 3.599)	\$208.74
8/1/2013	Marking Tape (Jax)	\$8.66

Material Costs Total

\$380.96

GLACIER VIEW FIRE
Non Paid Contributions - Personnel

Date	Name	Hrs	Rate	Cost
7/8/2013	Lawrence Beals	2.00	\$18.50	\$37.00
7/15/2013	Lawrence Beals	2.00	\$18.50	\$37.00
7/22/2013	Lawrence Beals	2.25	\$18.50	\$41.63
7/28/2013	Lawrence Beals	2.00	\$18.50	\$37.00
8/5/2013	Lawrence Beals	2.75	\$18.50	\$50.88
8/12/2013	Lawrence Beals	2.00	\$18.50	\$37.00
8/19/2013	Lawrence Beals	2.00	\$18.50	\$37.00
8/26/2013	Lawrence Beals	1.75	\$18.50	\$32.38
9/3/2013	Lawrence Beals	2.00	\$18.50	\$37.00
9/9/2013	Lawrence Beals	1.75	\$18.50	\$32.38
9/16/2013	Lawrence Beals	1.50	\$18.50	\$27.75
9/23/2013	Lawrence Beals	1.75	\$18.50	\$32.38
				\$0.00
7/3/2013	Greg Niswender	2.50	\$22.00	\$55.00
7/4/2013	Greg Niswender	1.50	\$22.00	\$33.00
7/6/2013	Greg Niswender	4.00	\$22.00	\$88.00
7/8/2013	Greg Niswender	3.00	\$22.00	\$66.00
7/9/2013	Greg Niswender	2.00	\$22.00	\$44.00
7/10/2013	Greg Niswender	1.00	\$22.00	\$22.00
7/15/2013	Greg Niswender	2.50	\$22.00	\$55.00
7/16/2013	Greg Niswender	3.00	\$22.00	\$66.00
7/17/2013	Greg Niswender	4.00	\$22.00	\$88.00
7/22/2013	Greg Niswender	4.00	\$22.00	\$88.00
7/23/2013	Greg Niswender	2.00	\$22.00	\$44.00
7/24/2013	Greg Niswender	5.00	\$22.00	\$110.00
7/29/2013	Greg Niswender	6.00	\$22.00	\$132.00
7/30/2013	Greg Niswender	3.00	\$22.00	\$66.00
8/5/2013	Greg Niswender	4.00	\$22.00	\$88.00
8/6/2013	Greg Niswender	6.00	\$22.00	\$132.00
8/9/2013	Greg Niswender	7.00	\$22.00	\$154.00
8/12/2013	Greg Niswender	2.50	\$22.00	\$55.00
8/13/2013	Greg Niswender	2.50	\$22.00	\$55.00

GLACIER VIEW FIRE
Non Paid Contributions - Personnel

8/14/2013	Greg Niswender	8.00	\$22.00	\$176.00
8/19/2013	Greg Niswender	5.50	\$22.00	\$121.00
8/20/2013	Greg Niswender	7.00	\$22.00	\$154.00
8/21/2013	Greg Niswender	3.00	\$22.00	\$66.00

Non Paid Contributions Total	112.75	\$2,397.38
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GLACIER VIEW FIRE
Non Paid Contributions - Equipment

Date	Name	Acres	Rate	Cost
5/30/2013	Engine 602	3.00	\$146.00	\$438.00
5/31/2013	Engine 602	1.30	\$146.00	\$189.80
6/3/2013	Engine 602	2.09	\$146.00	\$305.14
6/3/2013	Engine 602	1.00	\$146.00	\$146.00
6/5/2013	Engine 602	4.68	\$146.00	\$683.28
6/17/2013	Engine 602	2.80	\$146.00	\$408.80
6/18/2013	Squad 1	5.28	\$146.00	\$770.88
6/26/2013	Engine 602	4.76	\$146.00	\$694.96
6/26/2013	Engine 602	1.70	\$146.00	\$248.20
6/27/2013	Engine 602	1.25	\$146.00	\$182.50
6/30/2013	Squad 1	1.00	\$146.00	\$146.00
7/9/2013	Engine 602	2.50	\$146.00	\$365.00
7/10/2013	Engine 602	3.20	\$146.00	\$467.20
7/11/2013	Engine 602	1.32	\$146.00	\$192.72
7/16/2013	Engine 602	2.03	\$146.00	\$296.38
7/18/2013	Engine 602	1.50	\$146.00	\$219.00
7/19/2013	Squad 1	4.00	\$146.00	\$584.00
7/23/2013	Engine 602	2.28	\$146.00	\$332.88
7/24/2013	Engine 602	1.50	\$146.00	\$219.00
7/31/2013	Engine 602	1.00	\$146.00	\$146.00
8/1/2013	Engine 602	3.19	\$146.00	\$465.74
8/2/2013	Engine 602	1.00	\$146.00	\$146.00
8/7/2013	Engine 602	2.50	\$146.00	\$365.00
8/8/2013	Engine 602	1.00	\$146.00	\$146.00
8/12/2013	Engine 602	1.00	\$146.00	\$146.00
8/13/2013	Engine 602	2.25	\$146.00	\$328.50

59.13

GLACIER VIEW FIRE
Non Paid Contributions - Equipment

Non Paid Contributions Total	118.26	\$8,632.98
------------------------------	--------	------------

GLACIER VIEW FIRE DEPARTMENT FUEL LOG

[illegible]

Invoice

Page: 1

	Subtotal	392.59
	Sales Tax	
	Total Invoice Amount	392.59
Check/Credit Memo No:	Payment/Credit Applied	
	TOTAL	\$392.59

Eagles Nest Forestry LLC

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

INVOICE

DATE: August 25, 2013
INVOICE # 138
FOR: Mitigation Work

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 744 Bald Mountain Drive Work complete 08/20/2013 Chipping of slash – 2.0 Hrs x \$100.00/hour	200.00
POSTED BY <i>rs</i> DATE <i>8/26/2013</i> check # <i>7780</i>	
TOTAL	\$200.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Eagles Nest Forestry LLC

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

INVOICE

DATE: August 25, 2013
INVOICE # 137
FOR: Mitigation Work

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 121 Mount Bross Circle Work complete 08/20/2013 Chipping of slash – 2.0 Hrs x \$100.00/hour	200.00
POSTED BY <i>18</i> DATE <i>8/26/2013</i> Check # <i>7779</i>	
TOTAL	\$200.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Eagles Nest Forestry LLC

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

INVOICE

DATE: August 11, 2013
INVOICE # 136
FOR: *Mitigation Work*

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 471 Ute Peak Drive Work complete 08/09/2013 Chipping of slash – 4.0 Hrs x \$100.00/hour	400.00
TOTAL	\$400.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Eagles Nest Forestry LLC

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

INVOICE

DATE: July 14, 2013
INVOICE # 128
FOR: Mitigation Work

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 413 Lizard Head Drive Work complete 07/10/2013 Chipping of slash – 9.0 Hrs x \$100.00/hour	900.00
TOTAL	\$900.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Eagles Nest Forestry LLC

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

INVOICE

DATE: July 8, 2013
INVOICE # 126
FOR: *Mitigation Work*

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 278 Manhead Mountain Drive. Work complete 07/02/2013 Chipping of slash – 14.5 Hrs x \$100.00/hour	1,450.00
TOTAL	\$1,450.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Eagles Nest Forestry LLC

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

INVOICE

DATE: July 8, 2013
INVOICE # 127
FOR: Mitigation Work

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 79 Willow Court Work complete 07/05/2013 Chipping of slash – 15.0 Hrs x \$100.00/hour	1,500.00
TOTAL	\$1,500.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Eagles Nest Forestry LLC

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

INVOICE

DATE: August 4, 2013
INVOICE # 132
FOR: Mitigation Work

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 60 Horn Peak Drive Work complete 07/29/2013 Chipping of slash – 6.5 Hrs x \$100.00/hour	650.00
TOTAL	\$650.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Eagles Nest Forestry LLC

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

INVOICE

DATE: August 4, 2013
INVOICE # 133
FOR: *Mitigation Work*

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 157 Horn Peak Drive Work complete 07/30/2013 Chipping of slash – 2.0 Hrs x \$100.00/hour	200.00
TOTAL	\$200.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Eagles Nest Forestry LLC

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

INVOICE

DATE: August 4, 2013
INVOICE # 134
FOR: *Mitigation Work*

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 543 Cucharas Mountain Drive Work complete 07/30/2013 Chipping of slash – 2.0 Hrs x \$100.00/hour	200.00
TOTAL	\$200.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Eagles Nest Forestry LLC

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

INVOICE

DATE: August 4, 2013
INVOICE # 135
FOR: *Mitigation Work*

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 203 Mount Evans Court Work complete 07/30/2013 Chipping of slash – 1.0 Hrs x \$100.00/hour	100.00
TOTAL	\$100.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Eagles Nest Forestry LLC

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

INVOICE

DATE: August 31, 2013
INVOICE # 139
FOR: *Mitigation Work*

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 4360 Green Mountain Drive Work complete 08/27/2013 Chipping of slash – 4.5 Hrs x \$100.00/hour	450.00
TOTAL	\$450.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above Glacier View Fire Protection District	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input checked="" type="checkbox"/> Other (see instructions) ▶ _____	Exemptions (see instructions): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____
	Address (number, street, and apt. or suite no.) 1414 Green Mountain Drive	Requester's name and address (optional) Colorado DNR Executive Directors Office kaylee.moore@state.co.us
	City, state, and ZIP code Livermore	List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number								
			-					
Employer identification number								
8	4	-	1	1	2	5	2	9 6

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below), and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶ 	Date ▶ 9/9/2013
-----------	--	------------------------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

3:34 PM

10/15/13

Accrual Basis

Glacier View Fire Protection District

Account QuickReport

January 1 through October 15, 2013

Type	Date	Num	Name	Memo	Split	Amount
900 · Grants						
905 · CSFS WUI Grant 2013/2104						
905.2 · CSFS WUI - Landowner Cost Share						
Invoice	5/29/2013	2013-1	J. Rothe	2.5 acres of ...	135 · Account...	-730.00
Invoice	6/5/2013	2013-2	Victoria Baron	2.09 acres of ...	135 · Account...	-610.28
Invoice	6/10/2013	2013-3	Floyd Agee		135 · Account...	-379.60
Invoice	6/10/2013	2013-4	K.G. Mackay	3 acres of Mit...	135 · Account...	-876.00
Invoice	7/1/2013	2013-5	Norma Gillham	5.6 Acres at ...	135 · Account...	-1,389.92
Invoice	7/1/2013	2013-6	Roger Shea	3.4 acres @ ...	135 · Account...	-496.40
Invoice	7/1/2013	2013-7	Larry Kuebrich	Mitigation ser...	135 · Account...	-365.00
Invoice	7/1/2013	2013-8	Ronald Bailer	Mitigation Se...	135 · Account...	-1,541.76
Invoice	7/1/2013	2013-9	Larry Peterson		135 · Account...	-1,366.56
Invoice	7/1/2013	2013-...	Danny Heide		135 · Account...	-817.60
Invoice	7/1/2013	2013-...	Paul Benedetti		135 · Account...	-292.00
Invoice	7/15/2013	2013-...	Hal Curtis		135 · Account...	-730.00
Invoice	7/15/2013	2013-...	Mary Battaia	Mitigation Se...	135 · Account...	-934.40
Invoice	7/15/2013	2013-...	Jeremy Burton		135 · Account...	-386.32
Payment	7/17/2013	10226	Roger Shea	Discrepancy ...	1499 · Undep...	87.60
Invoice	7/22/2013	2013-...	Wynne Dimock/War...	Mitigation Se...	135 · Account...	-591.30
Invoice	7/22/2013	2013-...	Diane/Tony Morgas	Mitigation Se...	135 · Account...	-438.00
Invoice	7/22/2013	2013-...	David/CJ Muth	Mitigation Se...	135 · Account...	-817.60
Invoice	7/22/2013	2013-...	Kathy/Robert Gaines	Mitigation Se...	135 · Account...	-292.00
Invoice	7/29/2013	2013-...	Sherry Ryder/Pam ...	Mitigation Se...	135 · Account...	-438.00
Invoice	7/29/2013	2013-...	Alex Bopp	Mitigation Se...	135 · Account...	-665.76
Invoice	8/5/2013	2013-...	Dan Johnson	Mitigation Se...	135 · Account...	-931.48
Invoice	8/5/2013	2013-...	Dean Turner	Mitigation Se...	135 · Account...	-292.00
Invoice	8/5/2013	2013-...	Victoria Baron	Mitigation Se...	135 · Account...	-292.00
Invoice	8/12/2013	2013-...	Jerry Zuhlke	Mitigation Se...	135 · Account...	-292.00
Invoice	8/13/2013	2013-...	Deanna Snell	Mitigation Se...	135 · Account...	-292.00
Invoice	8/13/2013	2013-...	Mike & Mary Keller	Mitigation Se...	135 · Account...	-657.00
Invoice	9/3/2013	2013-...	Jeremy Burton	Removal of 5...	135 · Account...	-200.00
Total 905.2 · CSFS WUI - Landowner Cost Share						-17,027.38
Total 905 · CSFS WUI Grant 2013/2104						-17,027.38
Total 900 · Grants						-17,027.38
TOTAL						-17,027.38



COPY

Colorado State Forest Service Program Payment Request

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	<input type="checkbox"/>
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input checked="" 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 type="checkbox"/>

☒ Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/> 08-15-16 (K)

Name: Glacier View F.P.D.

Address: 1414 Green Mountain Drive
Livermore, CO 80536

Approved for Payment

C.S.F.S.

2563508

08-15-16 (K)

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: 5366950-4-FC Cooperator Match: \$11,831.⁸² ~

Approved Funding: \$54,820.⁸² ~ Total Project: \$23,663.⁶³ ~

CSFS Account Number: 5366950-6693 Amount of Payment: \$11,831.⁸² ~
1/2 CPG SFA CG3 Projects Under Northern LA

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

Approved by [Signature]
(Program manager signature)

Date: 8/14/13

EXHIBIT B
CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

In order to receive reimbursement, you must provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by receipts for actual costs (out of pocket expenses) incurred by the recipient. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and have corresponding match.

1. Project/Account #: <u>536695-4 - FC</u>	2. Total Award Amount: <u>54,822.00</u>
3. Project Name: <u>Glacier View FPD</u>	4. Reimbursement Amount to Date: <u>0</u>
5. Make Payment To: <u>Glacier View FPD</u>	
Name: _____ Attn: <u>Greg Niswender</u> Address: <u>1414 Green Mountain Dr Livestock 85536</u>	
6. Period of Performance (Project Period): From: <u>May 20 2013</u> To: <u>July 1 2013</u>	

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. 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, etc., for which the award was granted. Attach additional sheets as necessary.

Greens have completed 26.56 acres on private land all Defensible space
seespread sheets attached

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Award Amount	B. Recipient Contribution	C. Non-recipient Contribution	D. Total Contributions	E. Reimbursement Requested Amount	F. Total Match Ratio %
			B + C		E / D
<u>\$54,822.00</u>	<u>\$23,663.03</u>	<u>/</u>	<u>\$23,663.03</u>	<u>\$11,831.82</u>	

* Use results from Exhibit B: Financial Assistance Cost-Share Program Reimbursement Calculation Worksheet to complete table above. Include Exhibit B: and Form D, CSFS Financial Assistance Cost-Share Program Cost Documentation, or other approved documentation with Exhibit B to request reimbursement.

Reimbursement Request: I request reimbursement in the amount of \$ 11,831.82 for the work completed and documented above.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: _____

Greg Niswender

Date: _____

7/6/2013

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: _____

Jim C. Sells

Date: _____

7/24/13

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: _____

[Signature]

Date: _____

8/14/13



Colorado State Forest Service Program Payment Request

*Mailed to
Scott W.
on 7/24/13*

GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
Forest Restoration Grant (SB71 and HB1199)	
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	
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)	

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

Name: Glacier View F.P.D.

Address: 1414 Green Mountain Drive
Livermore, CO 80536

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: 5366950-4 Cooperator Match: \$11,831.⁸²

Approved Funding: \$54,820.⁰⁰ Total Project: \$23,663.⁶³

CSFS Account Number: 5366950-6693 Amount of Payment: \$11,831.⁸²

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

Approved by _____
 (Program manager signature)

Date: _____

EXHIBIT B

CSFS GRANT AND COST-SHARE PROGRAM REIMBURSEMENT REQUEST

In order to receive reimbursement, you **must** provide documentation supporting your costs and corresponding match. Complete Form D and submit it with your request for reimbursement. Reimbursement requests must be accompanied by receipts for actual costs (out of pocket expenses) incurred by the recipient. Other costs and matching funds incurred by the applicant and/or donated by other resources includes expenses for goods, services and labor necessary for project implementation. You may request partial reimbursement as you incur expenses and have corresponding match.

1. Project/Account #: <u>536695-4</u>	2. Total Award Amount: <u>54,822.00</u>
3. Project Name: <u>Glacier View FPD</u>	4. Reimbursement Amount to Date: <u>0</u>
5. Make Payment To: <u>Glacier View FPD</u> Name: Attn: <u>Greg Niswander</u> Address: <u>1414 Green Mountain Dr Livermore Ca 94536</u>	6. Period of Performance (Project Period): From: <u>May 20 2013</u> To: <u>July 1 2013</u>

7. What has been accomplished? Please provide a description of accomplishments that meet the requirements listed in the project Scope of Work. 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, etc., for which the award was granted. Attach additional sheets as necessary.

CREWS Have completed 26.56 acres on private land all Defensible space
seespread sheets attached

8. Reimbursement request amount cannot exceed the total project award obligation as identified in the project award notification. The reimbursement request amount must comply with the appropriate cost-share requirement for the period being billed. The reimbursement amount cannot exceed the actual project costs to recipient.

A. Award Amount	B. Recipient Contribution	C. Non-recipient Contribution	D. Total Contributions	E. Reimbursement Requested Amount	F. Total Match Ratio %
			B + C		E / D
<u>\$54,822.00</u>	<u>\$23,663⁶³</u>	<u>/</u>	<u>\$23,663⁶³</u>	<u>\$11,831⁸²</u>	

* Use results from Exhibit B: Financial Assistance Cost-Share Program Reimbursement Calculation Worksheet to complete table above. Include Exhibit B: and Form D, CSFS Financial Assistance Cost-Share Program Cost Documentation, or other approved documentation with Exhibit B to request reimbursement.

Reimbursement Request: I request reimbursement in the amount of \$ 11,831⁸² for the work completed and documented above.

9. I certify that to the best of my knowledge this report is correct and complete, and that all outlays reported are for the purposes set forth in the project documents (i.e. award notification, scope of work, etc.). All expenses and all cost-share are true and accurate.

Grant Recipient Signature: Greg Niswander

Date: 7/6/2013

10. Certification:

Work meets minimum standards and specifications as set forth by the CSFS in the Scope of Work.

District Forester Signature: [Signature]

Date: 7/24/13

11. Funding is available and request is approved for reimbursement.

Program Manager Signature: _____

Date: _____

**CSFS FINANCIAL ASSISTANCE COST-SHARE PROGRAM
COST DOCUMENTATION**


The following are activities conducted for completion of the Financial Assistance Program practice for which I have been funded. The value of each the activity is itemized below. Attach receipts.

Date m/d/yr	By Whom	Activity/Expense*	Hours	Value (\$)
	Greg Nizwender	see spread sheet attached		

*Use Exhibit B1 CSFS Financial Assistance Cost-Share Program Reimbursement Calculation Worksheet to be sure you account for the type of activities, expenses and other contributions provided to complete project, or phase of project. Visit Independent Sector to determine current volunteer labor rate.


Grant Recipient Signature

7/8/2013
Date


District Forester Signature

7/24/13
Date

GVFPD WUI GRANT
2013 Applicants

Last Name	First Name	GVF Address	Phone #	Number of Acres	Treated Acres	Filing	Lot	\$ Billed	Paid
Agee	Floyd	119 Turtle Rock Ct	416-8777	1.3	1.30			\$379.60	6102013
Appeldorn	Roger	202 Manhead Meadow Ct	970-482-5184 651-429-0880	3.5		2	65		
Bailey/Ferrier	Ron/Pat	71 Saint Elias Drive		5.28	5.28			\$1,541.76	
Baron	Vicki	212 Wetterhorn Ct	493-4844	2.5		4	69A		
Baron	Vicky	810 Manhead Mt	493-4884	2.09	2.09	6	62	\$610.28	6052013
Benedetti	Paul	682 Manhead Mt Dr	970-663-7685 970-290-8767	1		2	89		
Burton	Jeremy	79 Horn Peak Dr	970-590-9168	2.57		6	83		
Curtis	Hal	1048 Mt Champion Dr	970-224-5748 970-493-0673	2.5		6	2		
Dietz	Jeff/Debbie	3728 Mead St	970-226-5219	5.6		1	6		
Dimock/Baker	Wynne	157 Horn Peak Dr	472-1561	2		6	82		
Emmori	Russell	3996 Green Mt Dr	685-8688	1.5		7	7		
Field	Ronald	475 Chiney Rock Dr	970-407-9145	2.87		10	20		
Fitzgerald	Penny	467 Montcalm Dr	472-5454	2		9	19		
Fleming	Kenneth	39 Castle Canyon	970-224-9091 970-481-9763	2.75		6	84		
Foster	Nancy	749 Cherokee Drive	970-222-9333	3.7		2	85		
Fouad	Nadya/Sam	127 Iron Mountain Rd	970-482-4150			6	87,88,89,90		
Gaines	Robert	285 Saint Elias Dr	970-482-2805	1					
Gillham	Norma	79 Willow Mt Ct	970-522-9065	5.6	4.76			\$1,389.92	
Green	Mike	142 Navajo Peak Ct	972-816-5420	2.2					
GVM HOA		MT Moriah Greenbelt							
	Dolores	1733 Montcalm Dr	867-6802	3		9	107		
Heide	Danny	278 Manhead Mt. Dr.	720-810-1040	3					
Helm/Lukes	Linda/Mark	321 Guardian Peak Dr	970-218-5833	2.7		11	23		
Herrick	Joe	132 Hide Out Ct	970-217-9488	3		9	126		
Jones/Sprinkle	Jill/Nelson	112 & 116 Critter Court	970-419-8922			9	95 & 96		
Kellerman	Steve/Judy	2080 Green Mountain Dr	970-221-5561	8					
Kuebrich	Larry	1127 Mt Champion Dr	303-776-6266	2.25	1.25			\$365.00	
Kyrke	Ann	616 Mont Blanc Rd	970-237-0365	2					
MacKay	Kenneth	296 Manhead Meadow Ct	482-1462	3	3.00			\$876.00	6102013
Millard	Kathleen	23 E Quandary Ct	970-482-3004 720-233-2835	0.87		8	20		
Morgas	Antonio	98 Deadhorse Mt Ct.	493-0134	3		2	55		
Muth	Dave/CJ	543 Cucharas Mtn Dr	970-484-8358	4.3		2	59		

GVFPD WUI GRANT

2013 Applicants

Norrie	Daniel	3229 Green Mountain Dr	303-548-4229	2.5				
Nurse	Beverley	114 Bobcat Mtn Ct	970-484-5243					
O'Halloran	William	51 Mt. Yale Ct	484-0138	4		1	83	
Parker	Jeffrey	7 Meadow Mt	816-591-7755	2		12	33	
Patterson	Joe	272 Mt. Alice Ct	307-214-6477	6.5		1	50	
Peterson	Larry	6 Mount Bowen Dr	493-1399	4.68	4.68	1	90-91	\$1,366.56
Rothe	Jan	116 Byers Peak Ct	493-3222	2.5	2.50	11	11	\$730.00 5292013
Roy/Battaia	Andre/Mary	60 Horn Peak Dr	970-493-8593	4		6	78	
Ryder/Pickle	Sherry/Pam	203 Mt. Evans Ct	495-0207	3		1	15	
Scott	Mark/Regina	2077 Green Mountain Dr	601-918-9054	3.5				
Shea	Roger	413 Lizardhead Mtn Drive	224-2560	3.4	1.70			\$496.40
Shobe	John	832 Chimney Rock Dr	303-618-8959 800-241-4416	2		10	45	
Singleton	Shari	319 Iron Mt Dr.	970-618-5529	2.77		6	32	
Snell	Deanna	121 Mt. Bross Circle	221-0189	1			59	
Thibodeaux	Betty	193 Critter Court	970-472-4271	2		9	94	
Trapp	Anita	184 Mt. Alice Ct	856-435-5700	2		1	51	
Trumble	Matt	110 Lindsey Ct	282-9016	2.5				
Turner	Dean	249 Wetterhorn Ct	970-980-4782	1		4	67	
Valencia	Sal	326 Ute Peak Drive	970-407-1699	1		1	24	
Wallack	Jere	119 Mt Parniassus Ct	970-484-1999	3				
Will	Doug	180 Sunlight Circle	970-669-8238 970-690-1933	1		8	44	
Yates	Sidney/Teri	120 Mountain Lion Track	702-675-5355	5				
Yorker	Edward	1460 Bald Mt Dr	970-219-7707	1		7	51	
Younger	Bruce	85 Mt Massive Drive	913-787-4048	1.14				
Zuhlke	Gerald	4360 Green Mt. Dr.	970-472-4295	1		4	27	

TOTALS

147.57 26.56

\$7,755.52

GVFPD WUI GRANT
2013 Applicants

Declined Work

Coy	William	1150 Iron Mr Dr	303-423-0699 970-416-1283	3
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GLACIER VIEW FIRE DEPARTMENT FUEL LOG

[illegible]

LACIER VIEW FIRE DEPARTMENT

FUEL LOG

[illegible]

GLACIER VIEW FIRE PROTECTION DISTRICT
WUI CREW TIME SHEET
2013

[illegible]

NAME: Tom Bizzel
Lawrence Beals

DATE: 7/8/2013

GLACIER VIEW FIRE PROTECTION DISTRICT
WUI CREW TIME SHEET
2013

[illegible]

NAME:

Bob / season

DATE:

7/1/2013

WUI
Hours

GLACIER VIEW FIRE PROTECTION DISTRICT
WUI CREW TIME SHEET
2013

DATE	START TIME	END TIME	HOURS	JOB Property owners name or address	HOURS FOR DATE
5/20	0900	1700	8	See Mit crew training	
5/21	0900	1600	7	Marking Wai Properties	
5/22	0900	1030	1½	Over site Mantleheadout	
5/23	1300	1600	3	Contracts Wai project	
5/28	1300	1500	2	Over site & Contracts	
5/29	0730	1700	8½	Marking 9th	
5/30	0900	1400	5	Marking	
5/31	0730	1700	8	Marking / contracts	
6/1	0900	1100	2	Over site	
6/3	061500	1800	3	Marking	
6/14	1200	1400	2	Over site	
6/21	1300	1500	3	Over Site & Equipment Repair	
6/26	1300	1800	5	Marking	
6/27	0800	1100	3	Marking	
6/30	0800	1300	5	Marking & Over site	
			66	x 22.00 = \$1452	

Chief

NAME:

Greg Niswender

DATE:

July 1 2013

GLACIER VIEW FIRE
WUI Expenditures - TOTALS

Crew Wages	\$9,180.00
Contractor Costs	\$5,617.50
Material Costs	\$2,441.60

Total Paid Costs	\$17,239.10
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Non-Paid Contributions	\$2,014.38
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Total Costs	\$19,253.47
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GLACIER VIEW FIRE
Mitigation Crew Wages

Date	Name	Gross Wages	FITW	SITW	FICA	MED	Net Wages
6/2/2013	Taylor M. Burnett	\$1,008.00			\$62.50	\$14.62	\$930.89
6/16/2013		\$1,008.00			\$62.50	\$14.62	\$930.89
7/1/2013		\$1,008.00			\$62.50	\$14.62	\$930.89
6/2/2013	Scott D. Gallagher	\$1,008.00			\$62.50	\$14.62	\$930.89
6/16/2013		\$1,008.00			\$62.50	\$14.62	\$930.89
7/1/2013		\$1,008.00			\$62.50	\$14.62	\$930.89
6/2/2013	Cody T. May	\$1,044.00			\$64.73	\$15.14	\$964.13
6/16/2013		\$1,044.00			\$64.73	\$15.14	\$964.13
7/1/2013		\$1,044.00			\$64.73	\$15.14	\$964.13
Total Manpower Costs		\$9,180.00			\$569.19	\$133.14	\$8,477.73

GLACIER VIEW FIRE - WUI Grant

Contractor Costs

Date	Name	Amount
6/17/2013	Eagles Nest Forestry LLC	\$4,250.00
6/30/2013	Eagles Nest Forestry LLC	\$782.50
7/1/2013	Eagles Nest Forestry LLC	\$585.00
7/14/2013		900.00
7/8/2013		1480.00
7/8/2013		1500

Contractor Cost Total

\$5,617.50

GLACIER VIEW FIRE - WUI Grant

Material Costs

Date	Material	Amount
4/22/2013	Chainsaws	\$1,510.46
5/31/2013	Fuel (9.6 gals@3.799)	\$36.47
6/1/2013	Fuel (12.6 gals @ 3.799)	\$47.75
6/6/2013	GPS	\$447.28
6/6/2013	Chainsaw Oil	\$67.22
6/3/2013	Fuel (14.3 gals @ 3.799)	\$54.33
6/11/2013	Fuel (9.3 gals @ 3.799)	\$35.33
6/11/2013	Chainsaw Helmet	\$72.44
6/12/2013	Chainsaw parts	\$33.73
6/14/2013	Chainsaw parts	\$16.94
6/17/2013	Fuel (2.5 glas @ 3.699)	\$9.23
6/20/2013	Fuel (9.1 glas @ 3.699)	\$33.66
6/24/2013	Fuel (5.8 glas @ 3.699)	\$21.77
6/27/2013	Bar Oil	\$54.99

Material Costs Total

\$2,441.60

Eagles Nest Forestry LLC

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

INVOICE

DATE: July 1, 2013
INVOICE # 125
FOR: Mitigation Work

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work on Lot 90 and Lot 91 Filing 1 Glacier View Meadows Work complete 07/01/2013 Tractor work stacking slash – 9 hours X \$65.00/hour	585.00
TOTAL	\$585.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Eagles Nest Forestry LLC

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

INVOICE

DATE: June 17, 2013
INVOICE # 122
FOR: Mitigation Work

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 71 Saint Elias (work complete 6/15/2013) Hours worked: ¹⁰¹ 6/04/2013 – 7 hours 6/05/2013 – 4 hours 6/07/2013 – 7 hours 6/10/2013 – 3 hours 6/11/2013 – 6.5 hours 6/12/2013 – 6.5 hours 6/14/2013 – 6.5 hours 6/15/2013 – <u>2</u> hours Total - 42.5 hours 42.5 x \$100 = \$4,250.00	4,250.00
TOTAL	\$4,250.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Eagles Nest Forestry LLC

INVOICE

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

DATE: July 14, 2013
INVOICE # 128
FOR: *Mitigation Work*

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 413 Lizard Head Drive Work complete 07/10/2013 Chipping of slash – 9.0 Hrs x \$100.00/hour	900.00
TOTAL	\$900.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Eagles Nest Forestry LLC

INVOICE

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

DATE: July 8, 2013
INVOICE # 126
FOR: Mitigation Work

Bill To:
Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 278 Manhead Mountain Drive. Work complete 07/02/2013 Chipping of slash – 14.5 Hrs x \$100.00/hour	1,450.00
TOTAL	\$1,450.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

Eagles Nest Forestry LLC

INVOICE

81 Eagles Nest Court
Livermore, CO 80536
Phone 970-218-6031

DATE: July 8, 2013
INVOICE # 127
FOR: Mitigation Work

Bill To:

Glacier View Fire Protection District
1414 Green Mountain Drive
Livermore, CO 80536

DESCRIPTION	AMOUNT
1. Mitigation work at 79 Willow Court Work complete 07/05/2013 Chipping of slash – 15.0 Hrs x \$100.00/hour	1,500.00
TOTAL	\$1,500.00

Make all checks payable to **Eagles Nest Forestry LLC**

THANK YOU FOR YOUR BUSINESS!

EXHIBIT A
Financial Assistance Program
Cooperative Match Project
SCOPE OF WORK

Project Number: 5366950-4

Cooperator: Glacier View Fire Protection District

Work to be completed:

As described in the "Scope of Work" from the 2012 State Fire Assistance Grant Application.

1. Type of Treatment – Thinning, defensible space, fuels mitigation

Milestone dates: Completion by September 1, 2014

Standards or Guidelines: Will meet CSFS guidelines appropriate for treatment.

Project Period: November 2012 – September 1, 2014

Funded Amount: \$54,820

Minimum cooperator match: \$54,820

Deliverables: treatment of 100 acres

Project Types:

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, WSFM Competitive Grants" will be the document used to both request reimbursement and to certify that work has been completed to minimum standards.

Initials:

Colorado State FOREST SERVICE

Colorado State University
Fort Collins, Colorado 80523-5060
(970) 491-8660
FAX: (970) 491-8645

November 26, 2012

Dear 2012 SFA WUI Grant Recipient:

This letter is to inform you that the application you submitted for the 2012 State Fire Assistance (SFA) Wildland Urban Interface (WUI) grant program has been funded.

Attached you will find five separate pages that need action from you.

1. The Financial Assistance Program Cooperative Match Project notification. After you have read the notification, and if you agree with the conditions of participation, please sign and date.
2. The second page is 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. The third page is Exhibit B. Retain this attachment and use it to request reimbursement for qualifying project costs. You may make additional copies if needed.
4. The fourth page is Exhibit B1. This is a worksheet that accompanies Exhibit B and is used to request reimbursement.
5. Form D. This form is to be used to document both in-kind and hard costs and is also used when requesting reimbursement.

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

Colorado State Forest Service
Fort Collins District, Attn: Diana Selby
5060 Campus Delivery, CSU
Fort Collins, CO 80523

- The grant requires at least a 50/50 match. If you cannot equally match the amount you were awarded, the award will be adjusted or rescinded. Your match must be from nonfederal sources.
- Reimbursement will be made for actual costs up to the amount listed on your project notification with consideration of the matching requirement.
- If your original request was reduced, the reduction is noted on your proposal.
- You may not use these funds to purchase capital equipment.

- **The grant end date for this project is September 1, 2014.** All reimbursement requests and reporting are due to the CSFS Fort Collins District Office on or before this date.

Additionally, we will be requiring strict documentation. Remember, the total amount of the award must be matched by nonfederal sources. This award may be considered as income by the IRS. You should check with your tax advisor.

The form required to obtain periodic reimbursement for costs you incur and documentation of your match is Exhibit B.

The Final Closeout Report must include:

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

Your project will have oversight by your local assistant district forester, Diana Selby (me), but disbursement of payments will come from the CSFS State Office. When you are ready to claim reimbursement you need to submit an Exhibit B, ExhibitB1 and Form D to me and I will certify that the work has been completed and the documentation adequate. Certification by me may require a site visit to your property. I will then forward paperwork to the state office for processing. Please feel free to contact me at (970) 491-8839 with any questions you may have.

Best Regards,

Diana Selby
Fort Collins District
Assistant District Forester

Colorado State Forest Service
State Fire Assistance Grant
Application

FOR OFFICIAL USE ONLY	
District Submitting Project:	Fort Collins
District Priority Number:	
Dollar Amount Requested:	54,820
Matching Share:	54,822

*For guidance on filling in each box in this application, refer to the *Criteria and Instructions*

1	Applicant Information	
	Applicant:	Glacier View Fire Protection District
	Contact Person:	Chief Greg Niswender
	Address:	1414 Green Mountain Drive
	City/Zip Code:	Livermore, CO 80536
	Phone (Work/Cell):	(970) 493-3353 (W)
	Email:	gtreg@glacierviewfire.org
	Fax:	(970) 493-3376
Federal Tax ID/DUNS #:		

2	Community At Risk Information		
	Name of Project:	Glacier View Fire Protection District 2012 WUI Project	
	Community Name:	Glacier View Meadows	
	County(ies):	Larimer	
	Congressional District:	4th	
Latitude:	41 11'36.08 N	Longitude:	105 09'10.81 W

3	Grant Contributors (Matching Share)						
	(Applications will be disqualified if insufficient match is identified; federal dollars DO NOT qualify- see criteria & instructions for exception) Specify each match contributor and the dollar amount of each contribution. DO NOT show grant requested funds in this table. This is for matching share only.						
	Contributors Name:	Glacier View Fire	Glacier View	GVFPD Property			TOTAL
	Dollars (Hard Match):			29,180			29,180
	In-Kind (Soft Match):	15,642	10,000				25,642
	TOTAL:	15,642	10,000	29,180			54,822

4	Total Project Expense (break down matching share totals from block #3)				
	Budget Detail (Provide additional information in Block 7)	Grant Share (\$ Amount Requested)	Match (from block #3)		TOTAL
			Dollars	In-Kind	
	Personnel / Labor:	32,000	18,000		50,000
	Fringe Benefits:	9,600	9,600		19,200
	Travel:				
	Equipment:	500	500		1,000
	Supplies:	1,920	1,080		3,000
	Contractual:	10,800		25,642	36,442
	Construction:				
	Other:				
	Indirect Costs:				
	TOTAL:	54,820	29,180	25,642	109,642

Budget Narrative

5

This project will fund implementation and continuation of Defensible Space/Fuels Reduction projects for property owners and Home Owners Associations (HOA's) in Glacier View Fire Protection District; which consists of approximately 56 square miles. Property Owners of improved and unimproved lots will be encouraged to participate in the program at an out-of-pocket cost of \$292 per acre.

GVFPD personnel will manage the project including hiring of crew to complete the defensible space, fire mitigation, and fuel reduction for property owners and participating HOA's in the district. All payroll, benefits, tracking of costs, required grant documentation and submittals will be completed throughout the project by fire district personnel.

Project Area Description

6

The project area is the Glacier View Fire Protection District identified as "at risk" within the northern Larimer County WUI. The fire district has a wide range of topography including valleys, slopes, rocky areas and mountains. There is a wide variety of vegetation types, including grass and shrub areas and heavily forested areas with ponderosa pine, lodgepole pine, Douglas-fir, and juniper. This project will specifically address the forested areas and the fire mitigation/fuel reduction of those types of properties.

The district includes Glacier View Meadows (GVM) which is 4,000 acres, with 950 lots and 558 improved or developed. GVM has over 140 acres of "green belt" areas with over 90 acres classified as heavily forested.

Scope of Work

7

Individual property owners and Home Owners Associations will be offered wildland fire mitigation/fuel reduction for their property. For each acre that is within the scope of this project the property owner will be charged \$292.00 for the fire mitigation. Trained personnel will evaluate the property and complete hazard reduction including felling trees, piling of slash for burning by the fire department at a later date, slash removal to a permitted community slash pile, cutting trees into 4' lengths and piled on property for the property owners use/disposal. Standards for wildfire reduction and defensible space will follow Colorado State Forest Service (CSFS) guidelines and Firewise recommendations and principles.

Project Summary (check all that apply and answer related questions)				
8	Project Category 1: Hazard Fuels Reduction / Fire Adapted Ecosystem Restoration			X
	Number of acres to be treated:	100	Estimated cost per acre:	\$1,098
	Number of communities directly affected by this project:			6
	Project Category 2: Information & Education			
	Number of citizens to be reached:			
	Project Category 3: Planning			
	Number of residences affected:			

Interagency Collaboration	
9	<p>Glacier View Fire Protection District - Management of the project including; payroll for personnel, distribution of information about the project, and project review. GVFPD is permitted by the state of Colorado to burn slash following appropriate guidelines. The fire department will complete the burns as fuel, weather, staffing allows throughout the project. GVFPD has been active over several years with previous fuel reduction efforts on green space, and annual burning of slash throughout the district.</p> <p>Glacier View Meadows-Management of slash piles to facilitate burning of slash by the fire department.</p> <p>Property Owners within the district will pay partial costs for fire hazard mitigation on their properties.</p> <p>Home Owners Associations within the district are eligible for Fire hazard mitigation for the same rate as property owners.</p> <p>CSFS- provide technical assistance, grant oversight.</p> <p>Red Feather Lakes, Crystal Lakes, Magic Sky Ranch, other neighbors- similar adjacent work and support of fuels reduction work.</p>
	Community Wildfire Protection Plan (CWPP)
	Does this community have a wildfire protection plan that follows the Healthy Forest Restoration Act CWPP guidelines? (check one) <div style="display: flex; justify-content: space-around;"> X yes no in development </div>
	Is this project part of the plan? (check one) <div style="display: flex; justify-content: space-around;"> X yes no </div>
	Where would we obtain a copy of this plan? CSFS CWPP website
	Is this project identified in your Statewide Forest Resource Assessment and Strategy? <div style="display: flex; justify-content: space-around;"> X yes no </div>

Project Timeline	
10	<p>The project will be implemented as soon as possible after the grant start date (spring of 2012) and completed by October 1, 2013. Periodic inspections and evaluation of the project will be completed by grant management personnel. Goals will be to have 75% of project work complete with one year of project start and full completion within 1.5 years of project start date.</p> <p>Work will commence as weather and landowner interest permit and pile burning, when appropriate, will occur throughout the winter months.</p>

Maintenance / Sustainability

11

The Defensible Space/Fuels reduction program will utilize local "expert" resources, including CSFS Fort Collins District foresters, GVFPD members, and GVM Ecology Committee members, to prioritize projects to insure the best use of grant funding. Property owners and HOA's will be required sign an agreement to follow project guidelines that includes completion of the project by proper disposal of all wood products generated during mitigation/fuel reduction program. Maintenance for project effectiveness will be required by property owners and CSFS and GVFPD will provide information, education and technical assistance for landowners.

Landscape Scale

12

This project specifically targets and complements on going fuels reduction efforts of neighboring fire districts, neighboring property owners, and National Forest fuels reduction projects.

ALL INFORMATION MUST FIT INTO THE BOXES PROVIDED. ATTACHMENTS AND/OR MODIFICATIONS WILL NOT BE CONSIDERED BY THE COMMITTEE.

Colorado State Forest Service
State Fire Assistance Grant
Application

FOR OFFICIAL USE ONLY	
District Submitting Project:	Fort Collins
District Priority Number:	
Dollar Amount Requested:	54,820
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*For guidance on filling in each box in this application, refer to the *Criteria and Instructions*

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	Other:				
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	Project Category 3: Planning			
	Number of residences affected:			

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