COLORADO STATE FOREST SERVICE

MEMORANDUM

TO: Boyd Lebeda, Diana Selby

FROM: Scott Woods

SUBJECT: Grant Award

DATE: April 2, 2009

This correspondence is to inform you of the approval for the following grant:

Title: Glen Haven

Account: \$1,500.00 (\$1,500.00 operating + \$0.00 indirect) has been transferred to

530835

Please let me know if you have any questions!

Account 530835

Expires 9/30/09

Contact
Tony Fink
(970) 586-6032

Colorado State Forest Service Front Range Fuels Treatment Partnership

2009 Grant Application

DISTRICT'S: Please Complete	
District Submitting Project:	Fort Collins
Forester Submitting Project:	Diana Selby
District Priority Number:	3
Date Submitted:	2/19/09
FOR REVIWER'S USE ONL	Y:
FRFTP Rating:	

		Applicant Information
	Applicant:	Glen Haven Association
	Contact Person:	Tony Fink
1	Address:	PO Box 297
	City/Zip Code:	Glen Haven Colorado 80532
	Phone (Work/Cell):	970-586-6032
	Email:	anthonyfink@comcast.net
	Fax:	

				Con	nmunity A	t Ris	k Information	Marketta.				
	Nam	e of Pro	ject:	Glen	Haven Defen	sible S	pace					
	Community Name(s):			Glen	Glen Haven							
	County:			Larimer		Congressional District:			4			
2	Latitude (decimal deg		mal degrees):		40.454 Longitude (decimal degrees):				40.454		-105.	449
-			T	hrea	t Descripti	on (c	heck all that apply	y)				
	Homes:	\boxtimes	Numb	per of:	200		Infrastructure:	\boxtimes	Estin valu	WEED STORY ()	2 mil	
	Businesses:	\boxtimes	Numb	er of:	10	Ec	onomic Viability:		Estin valu			
	Watersheds:	\boxtimes	Numb	er of:	2	Hi	storic Structures:		Numb	er of:		
	Other (Des	cribe):										

	Requested Grant Amount	
	Dollar Amount Requested \$ 1,500	Projected Match \$ 2,500
	Will this Project be conducted as a Pass-Through Gr	ant? Yes
3	Provide a brief overview of the project and the proje	ct area. (If applying for a fuels reduction project,
	identify vegetation types)	
	Glen Haven is a small mountain community locate	d in Devil's Gulch Canyon northeast of Estes
	Park on Devil's Gulch Road (CR 43) in Larimer Co	ounty, Colorado. The community is surrounded
	primarily by USFS land. The Glen Haven Retreat	CWPP was completed in 2007 and a copy of the
	plan is on file with the CSFS Fort Collins District.	The CWPP identifies creating and maintaining
	defensible space around homes as the number one p	priority for the community. The Glen Haven area
	has been identified as "high risk" for wildfire.	
	Vegetation in the area is mixed with primarily lodg	epole pine, Douglas-fir, blue spruce, and
	ponderosa pine. Stands are multi-storied with most	
	80 to greater than 100 square feet per acre in most 1	ocations. Most homes are located on 1-1 ½ mile
	long dirt roads off of CR 43 and many properties ha	
		, .

	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)					
	The Glen Haven Association Volunteer Fire Department (GHAVFD) will assist interested					
	individuals in assessing and marking defensible space around homes. Homeowners, community volunteers and the GHAVFD will cut trees and vegetation and haul slash to roadsides to create adequate defensible spaces using CSFS guidelines around a minimum of four homes. Depending on interest from homeowners, more defensible-spaces and fuels work may be completed with in-kind contributions. Grant money will be used to hire a contractor to chip materials and broadcast chips onto the ground.					
	Describe all planned long-term maintenance (grant funded or other).					
	It will be the responsibility of individual homeowners to maintain defensible space and follow other Firewise					
	concepts to protect homes. The GHAVFD and Larimer County Wildfire Specialist will continue to provide					
	advice and assistance with defensible space recommendations. The GHA community will continue educational efforts and plan to continue defensible space efforts.					
	What is the duration of this project? (check one) \(\subseteq \text{ One Year} \subseteq \text{Two Years} \) Is this a continuing project from previous year/s? (check one) \(\subseteq \text{Yes} \subseteq \text{No} \)					
	Provide a timeline for the project Project will begin when cost-share funds are awarded with most of the work taking place in the spring and summer. All project activities will be complete in one year or less of the award date.					
	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.). Colorado State Forest Service-grant development and administration, meet with community and VFD members. Larimer County Emergency services-training the GHAVFD, make recommendations to community members.					
	USFS- adjacent fuels treatments (identified in CWPP)					
	Glen Haven Association- time/labor, chainsaw mechanical use, related fuel, funds to purchase shipping services, time spent meeting and talking with agency reps and individual homeowners					
	Glen Haven Area Volunteer Fire Department: time/labor, time spent meeting/talking with agency reps, advice and guidance for completing the project					
	Community Wildfire Protection Plan (CWPP)					
	Does this community have a wildfire protection plan that follows the Healthy Forest Restoration Act CWPP guidelines? (check one)					
	Is this project part of the plan? (check one) ves no					

A copy of the plan must be submitted with this application, or on file with CSFS.

	Project Category	(check all that	apply and answer related qu	iestions)					
	Hazard Fuels Reduction 🖂								
	Number of acres to be treated: 4		Estimated cost per acre:	1,000					
	Number of communities directly af	fected by this p	roject: 1						
6	Information & Education								
	Number of citizens to be reached:	4+		v v					
	Planning								
	Number of residences affected:								
	Project Type (check all that apply)								
	Assessment / Scoping:		Implementation / Trea	tment:					
	Homeowner / Community Action:	\boxtimes	Monitoring / Evalu	nation:					
	Information / Education:		X						

	(Applications will be disqua Please specify	lified if insuffici	ent match is ide	ntified; federal		qualify- see crit	eria & instruction	
7	Contributors: (Please specify)	GHA						TOTAL
	Dollars (HardMatch):	1,000						\$ 1,000
	In-Kind (SoftMatch):	\$1,500		'y				\$ 1,500
	TOTAL:	\$ 2,500	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 2,500

	Please fill all fields	Grant Share (\$ Amount Requested)	Match (from	TOTAL	
			Dollars	In-Kind	
8	Personnel / Labor:			1,500	\$ 1,500
	Operating:	e d	s		\$ 0
	Travel:		c		\$ 0
	Contractual Services:	1,500	1,000		\$ 2,500
	Equipment:				\$ 0
	Indirect Costs:	8			\$ 0
	TOTAL:	\$ 1,500	\$ 1,000	\$ 1,500	\$ 4,000

Attach Project Map Showing Specific Treatment Areas