

**FLEP Grant 2006
Fort Collins District**

Funding Distribution & Project Tracking

Applicant	FLEP Practice	FLEP Code	Qty Requested	C/S Amount Requested	C/S Amount Approved	Acres Treated (Completed)	Date Inspected	Payment Amount
Bowen, Zack	Thinning	666-1	3	\$1,500.00	\$560.00			
Bowen, Zack	Chipping	666-3	3	\$900.00				
Budge, David	Thinning	666-1	4	\$2,000.00	\$560.00			
Budge, David	Chipping	666-3	2	\$2,000.00				
Budge, David	Pruning	660	4	\$300.00				
Colard, Christopher	Thinning	666-1	2	\$500.00	\$500.00			
Doyle, Cliff	Thinning	666-1	2.5	\$1,250.00	\$560.00			
Herrmann, Ray	Thinning	666-1	4	\$1,000.00	\$560.00			
Lucia, Edwin	Thinning	666-1	5	\$2,500.00	\$1,000.00			
Ronca, Carlie	Thinning	666-1	5.65	\$2,825.00	\$560.00			
Ronca, Carlie	Pruning	660	5.65	\$423.00				
Snyder, Glenn	Thinning	666-1	2	\$1,000.00	\$560.00			
Snyder, Glenn	Pruning	666-3	1	\$300.00				
Snyder, Glenn	Hauling	666-4	1	\$300.00				
Soulen, Ric	Thinning	666-1	1.5	\$750.00	\$560.00			
Soulen, Ric	Hauling	666-4	1.5	\$750.00				
Young, Michael	Thinning	666-1	4	\$600.00	\$560.00			
Total:				\$18,898.00	\$5,980.00	0.00		\$0.00



COLORADO'S
FLEP FOREST LAND
ENHANCEMENT PROGRAM
APPLICATION FOR COST-SHARE

PROJECT NUMBER: _____

(For Official Use Only)

NAME: Jay HERMAN

MAILING ADDRESS: 1520 PETERSON ST,

City: FT. COLLINS State: CO

Zipcode: 80524

TELEPHONE NO: 970 224-2598

PROJECT ADDRESS/LEGAL DESCRIPTION: 51010-00-001

PRACTICES TO BE COMPLETED BY: OCT/NOV. 2006

Practice No. & Component Title	Quantity Requested	Quantity Approved	Maximum C/S Amount	C/S Amount Requested	C/S Amount Approved
6661, 3, 79 Stand improvement thinning	4.0		2,000	1,000	
6664, 3, 79 Slash hauling Saw to saw chips to burning	4.0		1,000	600	

Total: 1600

Request for cost-share assistance under this program is to meet the objective stated in the management plan. If cost-sharing is approved for the practice requested, I agree to cover expenses at the time of implementation, knowing I will be receiving cost-share funds not exceeding 50% of actual cost. **I understand that I will not be reimbursed for any expenses incurred prior to approval of my application.** Work must be completed according to approved plan and application, and must meet the standard set for each component. Practices must be maintained for a minimum of 10 years. There are no partial payments.

LANDOWNER SIGNATURE: _____

DATE: 06/07/06

CSFS FIELD REVIEW SIGNATURE: _____

DATE: _____

(Additional USFWS guidelines addressed)

C/S APPROVED: _____

AMOUNT: \$ 560.⁰⁰ DATE: _____

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

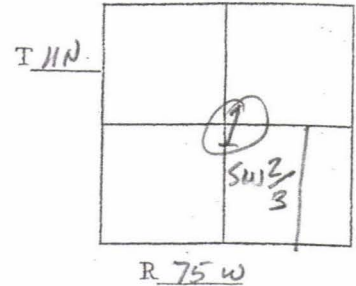
Colorado
State
FOREST
SERVICE

2003 FLEP

FOREST LAND ENHANCEMENT PROGRAM PLAN DESIGN

Sketch project area and design. Include numbers, volumes, rows, lengths, species, etc., as appropriate. Include structures and landmarks. Indicate, by location, the practices to be implemented. Show distances. Illustrate road access.

Use additional pages if needed for more detail.



AREA #4 (see attached map)

- continued thinning and
removal of dead standing & down trees (lodgepole)
removal of mistletoe trees

AREAS #2 & 3 - removal of some diseased & dead
standing trees (larch, ponderosa, lodgepole)

move & stack slash for chipping or burning.

LIST PRACTICE AND COMPONENTS WITH IMPLEMENTATION SCHEDULE:

PRACTICE/COMPONENT/OTHER SPECIFICATIONS	COMPLETION DATE
37,9(666-1) Stand Thinning	OCT. 06

