

# Colorado State Forest Service

## Emergency Supplemental

### 2010 Grant Application

DISTRICT'S: Please Complete	
District Submitting Project:	<b>Boulder</b>
Forester Submitting Project:	<b>Bryan Baer</b>
District Priority Number:	
Date Submitted:	<b>8/11/2011</b>
<b>FOR REVIEWER'S USE ONLY:</b>	
Rating:	

Applicant Information	
<b>Applicant:</b>	Stephen Pruitt
<b>Contact Person:</b>	Same
<b>Address:</b>	97 Jasper Drive
<b>City/Zip Code:</b>	Lyons, CO 80540
<b>Phone (Work/Cell):</b>	970-222-1647
<b>Email:</b>	Sp408373@gmail.com
<b>Fax:</b>	

Community At Risk Information			
<b>Name of Project:</b>	Pruitt Property		
<b>Community Name(s):</b>	Lyons		
<b>County:</b>	Boulder	<b>Congressional District:</b>	2 <sup>nd</sup>
<b>Latitude (decimal degrees):</b>	40.207 N	<b>Longitude (decimal degrees):</b>	105.275 W
Threat Description (check all that apply)			
<b>Homes:</b>	<input checked="" type="checkbox"/>	Number of:	1
<b>Businesses:</b>	<input type="checkbox"/>	Number of:	
<b>Watersheds:</b>	<input type="checkbox"/>	Number of:	
<b>Other (Describe):</b>			

Requested Grant Amount / Project Description	
All information for the project must fit into the space provided below. The review committee will not consider attachments.	
<b>Dollar Amount Requested May Not Exceed \$470 x Number of Acres Proposed For Treatment</b>	
<b>Dollar Amount Requested</b>	\$1,057.50
<b>Will this Project be conducted as a Pass-Through Grant?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Provide a brief overview of the project and the project area. (If applying for a fuels reduction project, identify vegetation types)</b>	
<p>The project area is located outside of the Lyons area. The project area overstory is composed of predominantly ponderosa pine, with juniper, random native grasses and shrubs in the understory. Slope throughout the project area is moderate to steep. Access will most likely be from the main road and driveway.</p>	

### Scope of Work / Project Timeline

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

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

Project funding will be used to conduct hazardous fuels reduction throughout the intended project area. Thinning to obtain desirable tree-crown spacing for wildfire defensibility purposes will be of highest priority. Also, removal of any beetle infested trees will be of highest priority. Additional suppressed trees and non-suppressed trees will be removed to obtain the desired tree-crown spacing. All slash will either be hauled off site, chipped, piled for burning at a later date, lopped and scattered, or some combination of the described practices. All logs will be hauled off site, chipped, cut into firewood/manageable lengths and stacked in appropriate areas, or some combination of the described practices. Stumps will be cut as low to the ground as possible, with the average stump height being at or below 4" on the uphill side. All remaining trees will be limbed to a minimum of six feet above the ground, or up to 25%, whichever is of the lesser. All work completed will reflect CSFS standards of approvable forest stewardship.

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

Landowner will continually monitor property for encroaching vegetation, and remove any undesired growth upon detection. Landowner will continue to monitor desirable tree growth, and limb to remove any fuel ladders.

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

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

**Provide a timeline for the project**

Project work will begin as soon as available contractor can start, and will continue through completion, which is targeted for Fall 2012.

### Interagency Collaboration

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

None

### Community Wildfire Protection Plan (CWPP)

**Does this community have a wildfire protection plan that follows the Healthy Forest Restoration Act CWPP guidelines? (check one)**     yes     no

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

6	<b>Project Category</b> (check all that apply and answer related questions)			
	Hazard Fuels Reduction <input checked="" type="checkbox"/> Other Forest Management Treatment <input type="checkbox"/>			
	Number of acres to be treated:	2.25	Estimated cost per acre:	\$1,000.00
	<b>Project Type</b> (check all that apply)			
	Defensible Space	<input checked="" type="checkbox"/>	Thinning w/o Product	<input checked="" type="checkbox"/>
	Fuelbreak	<input checked="" type="checkbox"/>	Mastication	<input type="checkbox"/>
Thinning w/ Product	<input checked="" type="checkbox"/>	Other	<input type="checkbox"/>	

7	<b>Total Project Expense (Pass Through)</b>		
	<i>Please fill all fields</i>	<b>Grant Share</b> (\$ Amount Requested)	<b>TOTAL</b>
	<b>Contractual Services:</b>		<b>\$ 1,057.50</b>
	<b>TOTAL:</b>	<b>\$1,057.50</b>	<b>\$ 1,057.50</b>

Grant funding may only be used for Contractual Service.

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

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



*Attach Project Map Showing Specific Treatment Areas*

# Pruitt Proposal Area



0 100 200 400 600 Feet

**Pruitt Property: 2.25 acres**

-  Pruitt\_Proposal
-  BOCO\_PARCELS1209



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





COPY



### Colorado State Forest Service Program Payment Request

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

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

09-09-11  
KC

Name: STEPHEN FRUITT

Address: 97 JASPER DR.

LYONS, CO 80540

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

1495783

09-09-11

(KC)

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

Grant Number: 5308400-80-56

Approved Funding: \$ 1,057.50

Total Project: \$ 1,255.50

CSFS Account Number: 5308400-6693  
'09SUP HAZ FUELS FR 80

Amount of Payment: \$ 1,057.50

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

Final Payment

Approved by [Signature]  
(Program manager signature)

Date: 9/6/11



## Colorado State Forest Service Program Payment Request

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

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

Name: STEPHEN FRUITT

Address: 97 JASPER DR.

LYONS, CO 80540

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

Grant Number: 5308400-BO-56

Approved Funding: \$ 1,057.50

Total Project: \$ 1,255.50

CSFS Account Number: 5308400-6693

Amount of Payment: \$ 1,057.50

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

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

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

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

Project No. 5308400-BO-56  
(For Official Use Only-  
No. from original application)

Applicant name (please print): Stephen Pruitt

	Total Contracted Services <sup>1</sup>	Total Landowner Services <sup>2</sup>	Totals
Labor Cost (Actual)		\$ 1,255.50	A Labor Cost= \$ 1,255.50
Operating Exp <sup>3,4</sup> (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = \$ 1,255.50
			Amount Originally Approved = \$ 1,057.50
			Amount to be Reimbursed not to exceed \$470 Per Acre \$ 1,057.50

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

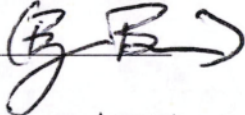
\* Attach receipts, Cost Documentation Form D-ES (contractor costs, your time ledger, gas, oil, etc). Keep copies for your files.

Landowner Signature: Stephen Pruitt Date: 8/22/2011

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

Mailing Address: 97 Jasper Drive City: LYONS

County: Boulder State: CO Zip: 80540 Phone: \_\_\_\_\_

Practice certified by: Brian Baer (CSFS forester) 

Payment Approval: \_\_\_\_\_ Amount: \_\_\_\_\_ Date: \_\_\_\_\_  
*CSFS program manager*

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

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

Project No. 5308400-B0-56

To be completed by CSFS forester:

**PROGRAM:**

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

2.25 Acres  
 H<sub>2</sub>O Fuels Red.

**WUI D-space Accomplishment:**

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

**I & D Prevention and Suppression Accomplishment:**

No. of infested trees treated: \_\_\_\_\_  
 Acres inspected and treated: \_\_\_\_\_  
 Acres thinned: \_\_\_\_\_

**Accomplishment (Not included above) – LOA Practice Number:**

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



