

Colorado State Forest Service

Emergency Supplemental

2010 Grant Application

DISTRICT'S: Please Complete	
District Submitting Project:	Boulder
Forester Submitting Project:	Bryan Baer
District Priority Number:	
Date Submitted:	3/23/2011
FOR REVIEWER'S USE ONLY:	
Rating:	

Applicant Information	
Applicant:	Peter P. Brady
Contact Person:	Peter P. Brady
Address:	4850 Four Mile Canyon Drive
City/Zip Code:	Boulder, CO 80302
Phone (Work/Cell):	303-720-1859
Email:	PeterPBrady@msn.com
Fax:	

Community At Risk Information			
Name of Project:	Brady-Morris		
Community Name(s):	Upper Four Mile Canyon Drive		
County:	Boulder	Congressional District:	T1N, R71W, Sec#18
Latitude (decimal degrees):	40.05 N	Longitude (decimal degrees):	105.38 W
Threat Description (check all that apply)			
Homes:	<input checked="" type="checkbox"/>	Number of:	2
Businesses:	<input type="checkbox"/>	Number of:	
Watersheds:	<input type="checkbox"/>	Number of:	
Infrastructure:	<input type="checkbox"/>	Estimated value of:	
Economic Viability:	<input type="checkbox"/>	Estimated value of:	
Historic Structures:	<input type="checkbox"/>	Number of:	
Other (Describe):			

Requested Grant Amount / Project Description	
All information for the project must fit into the space provided below. The review committee will not consider attachments.	
Dollar Amount Requested May Not Exceed \$470 x Number of Acres Proposed For Treatment	
Dollar Amount Requested	\$9,400.00
Will this Project be conducted as a Pass-Through Grant?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Provide a brief overview of the project and the project area. (If applying for a fuels reduction project, identify vegetation types)	
<p>The project area is located on Salina Mountain Road, which is accessed from Melvina Hill Road off of Four Mile Canyon Road. The project area has experienced recent fire activity from the Four Mile Canyon Fire. Slopes are generally steep, with some areas with moderate slopes as well. Tree species composition is generally ponderosa pine on the southern aspects, and douglas fir on the northern aspects. There are several junipers located throughout the project area, as well as native grasses and brush species in the understory.</p>	

Scope of Work / Project Timeline

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

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

4 Project work will be done with the objective of reducing the hazardous fuels present within the project area. In areas where fire intensity has been severe, many of the trees will be cut, leaving a select few wildlife trees/snags for habitat purposes. In these areas, trees will be contour-felled, and the slash will either be chipped, piled for later burning, or lopped and scattered, depending upon ease and effectiveness of the chosen method. In areas where the fire intensity was moderate-low, trees will be thinned to increase the spacing of the tree crowns in the dominant overstory. Tree boles will be cut and stacked into manageable lengths, placed away from any standing trees. Mid-story vegetation will be thinned to reduce the amount of competition, as well as to reduce fuel ladders. All slash will be handled in the same manner as mentioned above. All remaining uncut trees will be limbed to a minimum of six feet, or 25% of the bottom limbs, whichever is the lesser.

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

Landowner will continually monitor property for any new undesirable re-growth of trees, and remove upon detection. Landowner will also monitor maturing, growing vegetation, and continually remove limbs and other ladder fuels as they become present.

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 layout is complete and chosen contractor is available. Project work will continue through completion, which is targeted for April, 2012.

Interagency Collaboration

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

5
None

Community Wildfire Protection Plan (CWPP)

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

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

Project Category (check all that apply and answer related questions)			
Hazard Fuels Reduction <input checked="" type="checkbox"/> Other Forest Management Treatment <input type="checkbox"/>			
6	Number of acres to be treated:	20	Estimated cost per acre: \$1,500.00
Project Type (check all that apply)			
	Defensible Space	<input checked="" type="checkbox"/>	Thinning w/o Product <input checked="" type="checkbox"/>
	Fuelbreak	<input type="checkbox"/>	Mastication <input type="checkbox"/>
	Thinning w/ Product	<input type="checkbox"/>	Other <input type="checkbox"/>

Total Project Expense (Pass Through)		
<i>Please fill all fields</i>	Grant Share (\$ Amount Requested)	TOTAL
7	Contractual Services:	\$ 9,400.00
	TOTAL:	\$ 9,400.00

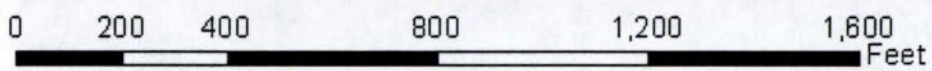
Grant funding may only be used for Contractual Service.

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



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

Attach Project Map Showing Specific Treatment Areas

Brady Project Proposal



Brady/Morris Proposal

-  Brady_Proposal
-  BOCO_PARCELS1209

Created By: Bryan Baer
CSFS - Boulder Dist.
April, 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)	X

Checked for Federal suspension and debarment (State Office) <http://www.epls.gov/> 02-05-13

Name: PETER P. BRADY

Address: 950 SALINA MT. ROAD

BOULDER, CO 80302

Approved for Payment
C.S.F.S.
2258066
02-06-13
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: 5308400-BO-27

Approved Funding: \$ 9,400.00

Total Project: \$ 2,430.00

CSFS Account Number: 5308400 - 6693
'09SUP HAZ FUELS Fr BO

Amount of Payment: \$ 2,350.00

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

Approved by [Signature]
(Program manager Signature)

Date: 2/1/13

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

Project No. 5308400-Bo-27
(For Official Use Only -
No. from original application)

Applicant name (please print): Perer P. Brady

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)		\$ 2,430.00	A Labor Cost= \$ 2,430.00
Operating Exp ³ (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = \$ 2,430.00
			Amount Originally Approved = \$ 9,400.00
			Amount to be Reimbursed not to exceed \$470 Per Acre \$ 2,350.00

¹ Any contracted services where payment was made for services.
² Use up to \$ 20.25/hour for Landowner time. This is the maximum allowable.
³ Equipment rental, supplies, etc. needed to complete project. (Tools and Equipment purchases are not reimbursable.)
⁴ Reimbursement amount cannot exceed amount approved. Requests for partial payments will be considered on a case by case basis.
⁵ 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: Perer P. Brady Date: 23 Jun 2013

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

Mailing Address: 950 Salina Mt. Road City: Boulder

County: Boulder State: CO Zip: 80302 Phone: 303-330-0698

Practice certified by: BRYAN BAER (B. B.)
CSFS forester

Payment Approval: [Signature] Amount: \$2,350.00 Date: 2/1/13
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.

COPY

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

Project No. 5308400-80-27

To be completed by CSFS forester:

PROGRAM:

WUI Incentives D-space: _____ I & D Prevention and Suppression – Bark Beetle: _____

FRFTP: _____ STEVENS' Fund: _____ SFA: _____ ESF: Forest
Restoration Grant (SB71 and HB1199): _____

5.0 ACRES
HAZ. FUELS RED.

WUI D-space Accomplishment:

No. of D-spaces = _____ Acres slash disposal = _____ Acres fuel breaks = _____

Acres thinned = _____ Acres pruned = _____

I & D Prevention and Suppression Accomplishment:

No. of infested trees treated: _____

Acres inspected and treated: _____

Acres thinned: _____

Accomplishment (Not included above) – LOA Practice Number:

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



Colorado State Forest Service Program Payment Request

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Bureau of Land Management Task Order Program	
Volunteer or Rural Fire Assistance (a.k.a.: VFA/RFA)	
Forest Land Enhancement Program (a.k.a.: FLEP)	
Insect and Disease Prevention and Suppression Program	
State Fire Assistance (a.k.a.: SFA)	
Front Range Fuels Treatment Partnership (a.k.a.: FRFTP)	
Stevens Fuels Treatment Funds	
Cooperative Fire Agreement (Active Fire Suppression Cooperators; CRS#R-24-103-206-01)	
Emergency Supplemental Funds (a.k.a.: ESF)	X

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

Name: PETER P. BRADY

Address: 950 SALINA MT. ROAD

BOULDER, CO 80302

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-27

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CSFS Account Number: 5308400 - 6693

Amount of Payment: \$ 2,350.00

Circle one: 1st Payment 2nd Payment 3rd 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-27
(For Official Use Only-
No. from original application)

Applicant name (please print): Perer P. Brady

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)		\$ 2,430.00	A Labor Cost= \$ 2,430.00
Operating Exp ^{3,*} (Actual)			B Oper. Exp.=
Project Cost			C Total Project (A+B) = \$ 2,430.00
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* Attach receipts, Cost Documentation Form D-ES (contractor costs, your time ledger, gas, oil, etc). Keep copies for your files.

Landowner Signature: Perer P. Brady

Date: 23 Jun 2013

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

Mailing Address: 950 Sistrup Mt. Road

City: Boulder

County: Boulder State: CO Zip: 80302

Phone: 303-330-0698

Practice certified by: _____
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. 5308400-80-27

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): _____

5.0 ACRES
HAZ. FUELS RED.

WUI D-space Accomplishment:

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

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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 = _____
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Acres treated = _____	#7 Acres treated = _____	#11 Acres = _____
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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/> 05-01-12
KC

Name: PETER BRADY

Address: 4850 FOURMILE CANYON DR

BOULDER, CO 80302

Approved for Payment
C.S.F.S.
1827761
05-01-12
KC

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

Grant Number: 5308400-80-27 ~

Approved Funding: \$9,400.00 ~

Total Project: \$7,805.65 ~

CSFS Account Number: 5308400-6693
'09SUP HAZ FUELS Fr BO

Amount of Payment: \$7,050.00 ~

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

Approved by [Signature]
(Program manager signature)

Date: 4/23/12

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

Project No. 5308400-80-27
(For Official Use Only-
No. from original application)

Applicant name (please print): PETER BRADY

	Total Contracted Services ¹	Total Landowner Services ²	Totals
Labor Cost (Actual)		\$7,164.00	A Labor Cost= \$7,164.00
Operating Exp ³ (Actual)			B Oper. Exp.= N/A \$641.65
Project Cost			C Total Project (A+B)= \$7,805.65
			Amount Originally Approved = \$9,400.00
			Amount to be Reimbursed not to exceed \$470 Per Acre \$7,050.00

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

Landowner Signature: Peter P. Brady Date: 5 April 2012

All expenses are true and accurate and all cost share is true and accurate.
 Mailing Address: 4850 Four Mile Canyon Dr. City: Boulder

County: Boulder State: CO Zip: 80302 Phone: 803-330-0698

Practice certified by: Bryan Baez (B.R.)
CSFS forester

Payment Approval: [Signature] Amount: \$7,050.00 Date: 4/23/12
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.

COPY

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

Project No. 5308400-80-27

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PROGRAM:

WUI Incentives D-space: _____ I & D Prevention and Suppression - Bark Beetle: _____

FRFTP: _____ STEVENS' Fund: _____ SFA: _____ ESF: Forest
Restoration Grant (SB71 and HB1199): _____

15.0 Acres
HAZ. FUELS RED.

WUI D-space Accomplishment:

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Acres thinned = _____ Acres pruned = _____

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Accomplishment (Not included above) - LOA Practice Number:

- | | | |
|-------------------------------------|--------------------------|----------------------------------|
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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: PETER BRADY

Address: 4850 FOURMILE CANYON DR.
BOULDER, CO 80302

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Total Project: \$ 7,805.65

CSFS Account Number: 5308400-6693

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

Approved by _____
(Program manager signature)

Date: _____

**EMERGENCY SUPPLEMENTAL FUNDS
LANDOWNER ASSISTANCE PROGRAMS
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Mailing Address: 4850 Four Mile Canyon Dr. City: Boulder

County: Boulder State: CO Zip: 80302 Phone: 303-330-0698

Practice certified by: Brian Baer (BB)
CSFS forester

Payment Approval: _____ Amount: _____ Date: _____
CSFS program manager

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

Project No. 5308400-BO-27

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#4 Acres planted/ renovated = _____		

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

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

Peter P. Brady
Peter P. Brady
Landowner Signature

Date	By Whom:	Activity/Expense:	Hours	Expenses	
4/2011	PPB				
	SG-CM				
	DL	Tree cutting / slash spread			
		ALIGN HULLWOOD TO CONTOUR			
		CHIPPING			
3/2012			236	4779.00	SUB T
July/11	CxS	SHARPENING		57.00	
June/11	K2Go	Fuel		43.73	
"	Valero	"		98.79	
"	CxS	SHARPENING		30.00	
Mar/11	E S S	BAR OIL		16.21	
"	"	Fuel Oil		19.06	
"	"	SHARPENING		49.80	
July	"	Fuel Oil		16.24	
April 11	"	CHAINS		57.97	
"	"	BAR OIL, Fuel Oil, file Guine		134.27	
June 11		BAR OIL, SAFETY GLASSES		118.58	
				641.65	SUB T
4/2011	PPB	CHIPPING SLASH	26.5	2385	SUB T
4/2012				7805.65	G T.