

# 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:	9/21/2011
FOR REVIEWER'S USE ONLY:	
Rating:	

Applicant Information	
Applicant:	Bruce Correll
Contact Person:	Bruce
Address:	6700 Sunshine Canyon Dr.
City/Zip Code:	Boulder, CO 80302
Phone (Work/Cell):	303-589-7870
Email:	<a href="mailto:sunshinepointe@cs.com">sunshinepointe@cs.com</a>
Fax:	303-449-0514

Community At Risk Information	
Name of Project:	Correll Property
Community Name(s):	Sunshine Canyon
County:	Boulder
Congressional District:	2 <sup>nd</sup>
Latitude (decimal degrees):	40.065 N
Longitude (decimal degrees):	105.373 W
Threat Description (check all that apply)	
Homes:	<input checked="" type="checkbox"/> X Number of: 1
Infrastructure:	<input type="checkbox"/> Estimated value of:
Businesses:	<input type="checkbox"/> Number of: Economic Viability: <input type="checkbox"/> Estimated value of:
Watersheds:	<input type="checkbox"/> Number 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.	
<b>Dollar Amount Requested May Not Exceed \$470 x Number of Acres Proposed For Treatment</b>	
Dollar Amount Requested	\$4,700.00
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 property has had recent fire activity through the Four Mile Canyon Fire. Burn intensity ranges from moderate in some areas to severe in others. Vegetation consists of predominately ponderosa pine and douglas fir in the overstory, and rocky mountain juniper and random native grasses throughout the understory. Slopes throughout the project area range from mild to steep.</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 funding will be used to conduct hazardous fuels reduction throughout the intended project area. In areas of moderate burn intensity, trees will be thinned from below to increase the residual crown spacing. Bole-wood material will be cut into manageable lengths and stacked for firewood consumption at a later time. Slash will be chipped, with no new depth to exceed 4 inches. In areas of severe burn intensity, trees will be thinned heavily, leaving many wildlife habitat trees (7-10/acre). Bole-wood will either be contour felled and used for erosion control purposes, or cut into manageable lengths and stacked for firewood consumption at a later time. Slash will be chipped where it can be reasonably reached or lopped and scattered (no new depth to exceed 18 inches) elsewhere. All remaining trees throughout the project area will be limbed, and all stumps cut as low as possible. All completed work will reflect CSFS standards of approvable forest management.

**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 available contractor is ready, and will continue through completion, which is targeted for Fall, 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



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:	10.0	Estimated cost per acre:	\$1,500.00
	<b>Project Type</b> (check all that apply)			
	Defensible Space	<input type="checkbox"/>	Thinning w/o Product	<input type="checkbox"/>
	Fuelbreak	<input checked="" type="checkbox"/>	Mastication	<input type="checkbox"/>
Thinning w/ Product	<input 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>\$ 4,700.00</b>
	<b>TOTAL:</b>	<b>\$4,700.00</b>	<b>\$ 4,700.00</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*





# Correll Proposal



0 187.5 375 750 1,125 1,500 Feet

**Correll Project Area: 10 Acres**

-  Correll
-  BOCO\_PARCELS1209



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







EMERGENCY SUPPLEMENTAL FUNDS  
LANDOWNER ASSISTANCE PROGRAMS  
APPLICATION

Form A-ES

PROJECT NUMBER: 5308400-80-65

(For Official Use Only)

NAME: Bruce Correll

MAILING ADDRESS: 6700 SUNSHINE CANYON DR

City: BOULDER State: CO

Zip code: 80302

TELEPHONE NO: 303-589-7870

PROJECT ADDRESS/LEGAL DESCRIPTION: 6700 SUNSHINE CANYON

PRACTICES TO BE COMPLETED BY: FALL 2012

Date

Landowner and CSFS forester:

CSFS forester:

Practice No. & Component Title	Quantity Requested	Quantity Approved
		Total:

Request for financial assistance under the Emergency Supplemental LOA program is to meet the objective stated in the management plan. I will not receive more than the actual cost up to \$470 per acre.

**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. Requests for partial payments will be approved on a case by case basis.

LANDOWNER SIGNATURE: Bruce Correll

DATE: 9/12/11

To be completed by CSFS forester:

CSFS FIELD REVIEW SIGNATURE: B. B.

DATE: 1/28/2013

(Additional USFWS guidelines addressed)

**PROGRAM:**

ESF: X

Funding Allocated: Ally Clark

CSFS District Forester

AMOUNT: \$4,700.00

DATE: 9/12/11

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.





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 (a.k.a.: VFA/RFA)	<input type="checkbox"/>
Forest Land Enhancement Program (a.k.a.: FLEP)	<input type="checkbox"/>
Insect and Disease Prevention and Suppression Program	<input type="checkbox"/>
State Fire Assistance (a.k.a.: SFA)	<input 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 checked="" type="checkbox"/>

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

03-12-13

Name: BRUCE CORRELLAddress: 6700 SUNSHINE CANYONBOULDER, CO 80302

Approved for Payment

C.S.F.S.

2310126

03-12-13

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: 5308400-BO-65 ~Approved Funding: \$4,700.00 ~Total Project: \$5,005.00 ~CSFS Account Number: 5308400-6693 ~Amount of Payment: \$4,700.00 ~

'09SUP HAZ FUELS Fr Bo

Circle one: 1<sup>st</sup> Payment2<sup>nd</sup> Payment3<sup>rd</sup> Payment

Final Payment

Approved by

(Program manager signature)

Date:

3/8/13

Colorado State Forest Service

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



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

Project No. 5308400-BD-65 ~  
(For Official Use Only-  
No. from original application)

Applicant name (please print): BRUCE CORRELL

	Total Contracted Services <sup>1</sup>	Total Landowner Services <sup>2</sup>	Totals
Labor Cost (Actual)	\$5,005.00	/	A Labor Cost= \$5,005.00
Operating Exp <sup>3,*</sup> (Actual)			B Oper. Exp.= /
Project Cost			C Total Project (A+B) = \$5,005.00
			Amount Originally Approved = \$4,700.00
			Amount to be Reimbursed not to exceed \$470 Per Acre \$4,700.00

<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: B. Correll

Date: 1/27/13

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

Mailing Address: 6700 SUNSHINE CANYON

City: BOULDER

County: BOULDER State: CO Zip: 80302

Phone: 303-589-7970

Practice certified by: BRYAN BAER (BB)

CSFS forester

Payment Approval: [Signature]

CSFS program manager

Amount: \$4,700.00 Date: 3/8/13

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.

01/19/10

COPY



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

Project No. 5308400-B0-65

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): \_\_\_\_\_

10.0 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 = \_\_\_\_\_





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GRANT PROGRAM (CHECK APPROPRIATE PROGRAM TYPE):	
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BOULDER, CO 80302

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Total Project: \$5,005.00

CSFS Account Number: 5308400-6693

Amount of Payment: \$4,700.00

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)**

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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: Bruce Correll

Date: 1/27/13

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Mailing Address: 6700 SUNSHINE CANYON

City: BOULDER

County: BOULDER State: CO Zip: 80302

Phone: 303-589-7970

Practice certified by: BRYAN BAER (BB)  
CSFS forester

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

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Retain documentation such as receipts and payment for six (6) years. The IRS considers reimbursable funds as ordinary income.  
Please consult your tax advisor.

01/19/10



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

Project No. 5308400-B0-65

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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 = _____         |
| #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 = _____ |                          |                                  |



**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.

**Bruce N. Correll**  
**SUNSHINE POINTE**  
6700 Sunshine Canyon Drive  
Boulder, Colorado 80302  
sunshinepointe@cs.com  
(303) 589-7870 Cell#

  
Landowner Signature

[illegible]



Bruce Correll  
6700 Sunshine Canyon Dr.  
Boulder, CO

INVOICE FOR FOREST CLEARING SERVICES

<u>Date</u>	<u>Hours</u>	<u>Rate</u>	<u>Total</u>	<u>Description of Services</u>	<u>Employees</u>
12/17/2012	12	\$25.00	\$300.00	Two sawyers cut for 6 hours each	Cuatro & Bill
	6	\$15.00	\$90.00	One swamper stacked slash	Abe
12/19/2012	5	\$25.00	\$125.00	One sawyer cut trees	Bill
12/20/2012	5	\$25.00	\$125.00	One sawyer cut trees	Bill
	5	\$15.00	\$75.00	One swamper stacked slash	Abe
12/24/2012	3	\$25.00	\$75.00	One sawyer cut trees	Cuatro
	3	\$15.00	\$45.00	Also stacked slash	Cuatro
1/3/2013	3	\$25.00	\$75.00	One sawyer cut trees	Cuatro
	2	\$15.00	\$30.00	Also stacked slash	Cuatro
1/4/2013	8	\$25.00	\$200.00	One sawyer cut trees	Bill
	8	\$15.00	\$120.00	One swamper stacked slash	Abe
1/7/2013	7	\$25.00	\$175.00	One sawyer cut trees	Bill
	7	\$15.00	\$105.00	One swamper stacked slash	Abe
	7	\$25.00	\$175.00	One sawyer cut trees	Cuatro
	7	\$15.00	\$105.00	One swamper stacked slash	Jesse
1/8/2013	8	\$25.00	\$200.00	One sawyer cut trees	Bill
	8	\$15.00	\$120.00	One swamper stacked slash	Abe
1/9/2013	6.5	\$25.00	\$162.50	One sawyer cut trees	Bill
	6.5	\$15.00	\$97.50	One swamper stacked slash	Abe
1/10/2013	8	\$25.00	\$200.00	One sawyer cut trees	Bill
	8	\$15.00	\$120.00	One swamper stacked slash	Jesse
1/15/2013	7.5	\$25.00	\$187.50	One sawyer cut trees	Bill
	7.5	\$15.00	\$112.50	One swamper stacked slash	Jesse
1/17/2013	8	\$25.00	\$200.00	One sawyer cut trees	Bill
	8	\$15.00	\$120.00	One swamper stacked slash	Jesse
1/19/2013	5.5	\$25.00	\$137.50	One sawyer cut trees	Bill
	5.5	\$15.00	\$82.50	One swamper stacked slash	Jesse
1/21/2012	14	\$50.00	\$700.00	Two sawyers cut trees for 7 hours	Cuatro & Bill
	7	\$15.00	\$105.00	One swamper stacked slash	Jesse
1/23/2013	8	\$25.00	\$200.00	One sawyer cut trees	Cuatro
	8	\$15.00	\$120.00	One swamper stacked slash	Jesse
1/25/2013	8	\$25.00	\$200.00	One sawyer cut trees	Bill
	8	\$15.00	\$120.00	One swamper stacked slash	Jesse
	228.0	Total	\$5,005.00		

PMO CK # 9538  
2/21/13