## APPLICATION FOR COST-SHARE

	IAME: Total S	u da c		OJECT NUMBI (For Official U		×
N	IAME: John Sn IAILING ADDRESS:	PO BOX	67			
	City: Belly		State:	CO		
	Zipcode: 8					
T	ELEPHONE NO: 970	0 493 07	76			
P	ROJECT ADDRESS/LE	MPLETED BY	1: 9/15/	paral #	07031-05-	16
	Practice No. &	Quantity	Quantity	Maximum	C/S Amount	C/S Amount
	Component Title	Requested	Approved	C/S Amount	Requested	Approved
Code						
566-1	3,7,9 Thinning	17 A		7500 /A	\$ 85 w	
666-3	· Chipping	17 A		\$ 300 /A	5100	

Total: 13, 600

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: John O Bl	DATE: 5/12/07
CSFS FIELD REVIEW SIGNATURE:	DATE:
(Additional USFWS guidelines addressed)	
C/S APPROVED: Milly M. HybraMOUNT:	\$ 1000 DATE: 6/8/07

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.



## 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.  Cross hatched area = project area.
1500 00000x 171A 800' R. 70
emergency egress route for subdivision
10+ 16
Saddle Ridge Subdivision (location map is attached)

## LIST PRACTICE AND COMPONENTS WITH IMPLEMENTATION SCHEDULE:

DD + CET CE +CC;		
	IPONENT/OTHER SPECIFICATIONS	COMPLETION DATE -
Practice 3, 7,9 Code 666-1	Thinning ~17 acros	9/15/07
Dractice 3,7,9	Slash disposal	1
onle 666-3	(Chipping) 217 acres	9/15/07
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Map 1: Location

