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:	3-1-2011
FOR REVIWER'S USE ONLY:	
Rating:	

	Applicant Information						
	Applicant:	Ronald Cole					
	Contact Person:	Ronald or Pam Cole					
1	Address:	1092 Brook Rd.					
10 C	City/Zip Code:	Boulder, CO 80302					
	Phone (Work/Cell):	303-447-3456					
C. A. B.	Email:	rcole@bltek.com					
	Fax:						

	Community At Risk Information									
	Name of Project:									
	Community Name(s):			Boulder Heights						
	County:		inty:	Boulder		Cong	Congressional District:		T1N, R71W, Sec#3	
2	Latitude (decimal degrees):			40.081 N		Longitude	Longitude (decimal degrees):		105.333 W	
	Threat Description (check all that apply)									
	Homes:	X	Numbe	er of:	1	Infrastruc	ture:	Estin		
	Businesses:		Numbe	er of:		Economic Viab	ility:	Estin	nated	
	Watersheds:		Numbe	er of:		Historic Struct	ures:	Numb		
	Other (Desc	ribe):					6,7567 1457	1933		

Dollar Amount Requested	\$2,232.50
Will this Project be conducted as a Pass-	
Provide a brief overview of the project a identify vegetation types)	nd the project area. (If applying for a fuels reduction project
the project area is located on a southern aspect consists of primarily ponderosa pine and juground juniper throughout the understory. located in this area. The northern portion of slopes. Tree species composition in this arpine scattered throughout. Tree density is a	slopes within the Boulder Heights area. The southern portion of pect, with a mild slope. Tree species composition in this area uniper. There are an assortment of native grasses, brush, and Access to this area should be fairly easy, as the main drive is of the project area is located on a northern aspect, with steep ea consists of primarily douglas fir, with a small mix of pondero considerably higher in this area, with a similar understory, but lead in this area, due to the main drive being located in the southern

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 mor specific than the project description)					
Funding will be spent to do fuels reduction throughout the project area. Improving upon the defensible space around the home, as well as the road corridor to the residence, will be of highest priority. In the southern portion of the project area, project work will increase the crown spacing of the ponderosa pine, as well as to eliminate as much insect and disease activity as noticed in these areas. Project work on the northern portion of the project area will thin the trees at the top of the slope with greater intensity (nearest to residence), and feather efforts as work moves down slope to less intense thinning. Removal of as much insect and disease as noticed will also be an objective in this area. Most slash will be lopped and scatted, but may be chipped in some areas. Remaining trees will be limbed to a minimum of six feet, or to 25% of the bottom limbs (whichever is less).					
Describe all planned long-term maintenance (grant funded or other). Landowner will continually monitor property for any new growth, and remove any undesired encroachment. Landowner will also monitor property for any new insect and disease activity, and make efforts to eradicate upon detection. Landowner will limb younger, growing vegetation, to eliminate ladder fuels.					
What is the duration of this project? (check one) X 1 Year 2 Years 3 Years 4 Years					
Is this a continuing project from previous year/s? (check one) Yes X No					
Provide a timeline for the project					
Provide a timeline for the project Project work will begin as soon as chosen contractor is available, and continue through completion, which is targeted for Spring, 2012.					
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Provide a timeline for the project Project work will begin as soon as chosen contractor is available, and continue through completion, which is targeted for Spring, 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 contribution each partner will make (i.e. – donating time/equipment, funding, etc.).					

	Project Category (check all that apply and answer related questions)							
	Hazard Fuels Reduction X Other Forest Management Treatment							
6	Number of acres to be treated:	4.75	Estimated cost per acre: \$1,500	.00				
	Project Type (check all that apply)							
	Defensible Space		Thinning w/o Product					
	Fuelbreak		Mastication					
	Thinning w/ Product		Other					

	Total Project Expense (Pass Through)					
7	Please fill all fields	Grant Share (\$ Amount Requested)	TOTAL			
	Contractual Services:		\$ 2,232.50			
	TOTAL:	\$2,232.50	\$ 2,232.50			

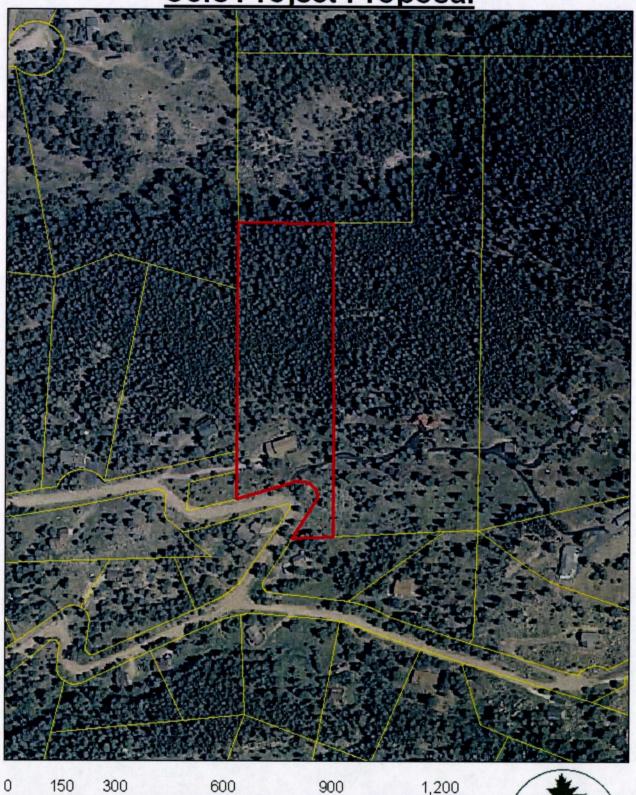
Grant funding may only be used for Contractual Service.

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

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

Attach Project Map Showing Specific Treatment Areas

Cole Project Proposal



1,200 Feet Cole Property: 4.75 acres



Cole_Property BOCO_PARCELS1209



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



Form A-ES



EMERGENCY SUPPLEMENTAL FUNDS LANDOWNER ASSISTANCE PROGRAMS APPLICATION

FOREST					
OLAVICE CI		PROJEC	T NUMBER	: 5308400-80-2	3
NAME:	anald (ole F	or Official Use	Only)	
MAILING ADDRE	iss: 1097 B	rook K	21		
City:_		State: Co			
Zip coo	le: 80300				
TELEPHONE NO:	303 447	3456			
PROJECT ADDRE	ESS/LEGAL DESCRIPT	TION: TIN	1, R71 W	, Section #3	
PRACTICES TO E	BE COMPLETED BY:_	3-31-20	12		
		Date			
	Landowner and CSFS for	rastar	CSFS foreste	,,,.	
	Practice No. &	Quantity	Quantity	i i	
	Component Title	Requested	Approved		
	-				
			Total:		
			10000	,	
Request for financial a	ssistance under the Emerger	ncy Supplemental	LOA program	is to meet the	
objective stated in the	management plan. I will no	t receive more the	an the actual co	ost up to \$470 per acre.	
	ill not be reimbursed for a st be completed according to				
standard set for each c	omponent. Practices must b	e maintained for	a minimum of	10 years. Requests for	
	be approved on a case by cas				
LANDOWNER SIG	GNATURE:	Cole		DATE: Feb 23	201
To be completed by	CSFS forester:				
CSES FIELD REV	IEW SIGNATURE:			DATE:	
(Additional USFWS guid					
PROGRAM:					
ESF: X	M AA				
LUI.	11. N.				
Funding Allocated:	Health	AMOU	NT:\$2,232.50	DATE: 3-1-11	

CSFS District Forester

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.