

WSOS

COMMUNITY ACTION

HELPING PEOPLE HELP THEMSELVES - SINCE 1965

October 18, 2011
Diane Schaefer
Perkins Township
1210 E Bogart Rd
Sandusky, OH 44870

To Whom It May Concern:

WSOS Community Action Commission, Inc. has received a new and additional grant from the Ohio Department of Natural Resources Division of Forestry for the removal of Ash Trees and is designed to assist residential homeowners with the removal of up to two (2) Ash Trees providing a potential threat to structures and play areas. Private property owners within Lucas, Wood and Erie Counties will be accepted into this application period beginning as soon as possible and running until funds are exhausted. Please note that many changes have been made, please share these applications to all interested parties within your area.

The program provides funding for the removal of **two (2) Ash Trees** per property with matching funds provided by the homeowner. The program provides **up to 40%** of the removal costs per household. To improve the program and expedite the tree removal process, homeowners are required to **submit applications with three (3) estimates from certified arborists** for the removal. Once all is submitted and approved they will receive a letter indicating the acceptance to the program and that removal may begin. **Under no circumstances will grant funds pay for trees removed prior to official approval from WSOS.**

Applications will be accepted until funds are exhausted. Several copies of the application packet have been included with this letter as well as an Ash tree Identification sheet. Information Letter and Applications are also available on line at www.wsos.org/program_details.php?id=63. For additional questions regarding this program, please contact Cindy Brookes at (419) 334-5016 or cabrookes@wsos.org.

Sincerely,



Cindy Brookes
Watershed Specialist
WSOS Community Action Commission, Inc.

ROUTING SLIP

	INITIALS	DATE	CHK IF COPY NEEDED
CHAIR	<i>JS</i>	10/25	_____
VICE CHAIR			_____
TRUSTEE	<i>MS</i>	10/25/11	_____
FISCAL OFFICER			_____

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10/17/2011

Dear Resident,

Thank you for your interest in the *2011-2012 Western Lake Erie Basin Emerald Ash Borer Ash Tree Removal Program*. This letter should serve as your initial guidance as you work to receive approval for 40% Cost Share assistance from WSOS Community Action Commission Inc. for tree removal only of up to two (2) Ash Trees. The cost share will be provided to you if and only if you complete the following requirements as listed. The total cost share provided by WSOS will not exceed the value indicated on the approval letter following application.

Requirements For Cost Share:

1. Submit the completed Application Form.
2. Submit at least three (3) itemized estimates from companies employing ISA Certified Arborist(s) with your application form for the cost of the work to be performed. WSOS determines cost share based on the lowest best bid from a Qualified ISA Certified Arborist. A list of ISA Certified Arborists and phone numbers is provided.
3. Once approval has been granted for funding your tree removal, you will receive a signed letter in the mail explaining the steps that you will need to complete to receive funding assistance. No funding is guaranteed until all of the listed requirements have been met.

Below is an outline of the steps that you will be responsible for following receipt of the approval letter. This information is for your reference; please do not move beyond this step until you have received your approval letter.

4. A contractor will be hired and the work will be completed.
5. Upon completion of the removal, assessment of the removal may be completed by an ODNR Division of Forestry representative.
6. Pay the contractor for your portion of the cost. Submit to WSOS the following items: (1) copy of the contractor's final bill, (2) receipt for your portion of bill as paid to the contractor, (3) request form for the release of payment from WSOS to the contractor. This must be done within 14 days of receipt of the final bill from the contractor.
7. Once the above forms are received, WSOS will verify the proper payment and will release the eligible funds to the contractor. This will be completed within 14 days. Notification will be sent to inform you of the payment by WSOS.

WSOS has no obligation to make any payment to the contractor until the above conditions are met. Your approval for funding does not guarantee any cost share dollars. Removal of your tree(s) must begin within 3 months of approval or you will forfeit your right to cost share dollars. You may request an extension if one is necessary. If the above conditions are not met by August 31, 2012 you will automatically forfeit your right to any cost share dollars. WSOS is not responsible or liable in any way

for the work completed or damage to your property. WSOS is responsible only for the payment of cost share dollars as listed above and nothing more. Actual cost share dollars will be determined by WSOS upon receipt of the contractor's bill and accompanying paperwork. If you have any concerns that any expenses may not be covered by this grant, please contact WSOS to verify that expenses are acceptable.

Thank you for your participation, if you have any questions or concerns at any time, please feel free to contact me at 419-334-5016 or cabrookes@wsos.org.

Sincerely,

Cindy Brookes
Watershed Specialist
Sandusky River Watershed Coalition
WSOS Community Action Commission, Inc.

WSOS Community Action Commission, Inc.
219 S Front St. PO Box 590, Fremont, OH 43420
p(419) 334-5016 f(419) 334-5125 www.sanduskyriver.org

Homeowner/Applicant

Name: _____ Phone #: _____

Mailing Address: _____

City: _____ State: OH Zip: _____

Property Address of Tree: _____

City: _____ State: OH Zip: _____

County: _____ Number of Trees _____ (Limit 2)

Applicant Signature: _____ Date: _____

Contractors

All contractors hired to complete this work must have ISA Certified Arborists on staff and on the job site at the time of removal. Listed on the next page are some of the ISA Certified Arborists from the area or you can obtain additional listings by visiting the website <http://treesaregood.com> and go to "Find a Tree Care Service".

Additionally, all contractors should provide you with Insurance Certificates and Workers' Compensation Certificates. As a homeowner you have every right to request copies of these Certificates before work begins so as to safe guard yourself.

Estimates

Three itemized estimates from companies employing ISA Certified Arborist are required to be submitted by the property owner in order to complete this application.

ISA Certified Arborist must provide their certification number on the quote or to you directly so it can be provided below. Please note that Removal does **not** include stump grinding.

Name of Company	ISA Certification Number
1.	
2.	
3.	

Companies Employing ISA Certified Arborists	Location	Phone
Aaron Tree & Lawn	Toledo, OH 43613	419-410-6049
Advanced Tree Health, Ltd.	Findlay, OH 45840	419-889-1123
Blanchard Tree & Lawn	Holland, OH 43528	419-865-7071
C & J Tree Services	Fremont, OH 43420	419-332-4718
Complete Tree & Shrub Care LLC	Sylvania Township, Ohio 43615	419-410-1946
Davey Tree Expert Co	Toledo, OH 43615	419-531-9737
Eco Tree Services, LLC	Amherst, OH 44001	800-686-4430
Edwards Tree Service of Ohio	Vermillion, OH 44089	440-988-4477
Envirocare Lawn & Landscape	Perrysburg, OH 43551	419-467-2237
Flora Landscape, Inc.	Toledo, OH 43607	419-536-7640
Forest City Tree Protection Co., Inc.	Cleveland, OH 44121	216-381-1700
L. E. Savory Tree Service	Toledo, OH 43617	419-841-4411
Neville Landscape & Tree Service, Inc	Holland, OH 43528	419-865-2922
New Century Tree & Lawn Inc	Wauseon, OH 43567	419-335-7337
Oberlander's Tree & Landscape	Bucyrus, OH 44820	419-562-8733
Schrivers Tree Service	Wellington, OH 44090	440-647-5457
Tawa Tree Service, Inc.	Ottawa, OH 45875	419-523-9001
The Tree Co., Inc	North Olmstead, OH 44070	440-979-1508
Tree Experts	Huron, OH 44839	419-433-0668
Treemasters	Medina, OH 44256	330-441-2105

Office Use Only	
Application Received _____	Coded _____
Funding Encumbered _____	Removal Completed _____
Contractor _____	Invoice Date _____
Proof of Payment _____	
Receipt for Payment Date _____	
Payment Date _____	