



### MODIFICATION OF GRANT OR AGREEMENT

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1. U.S. FOREST SERVICE GRANT/AGREEMENT NUMBER: 13-F1-11051900-031		2. RECIPIENT/COOPERATOR GRANT or AGREEMENT NUMBER, IF ANY:	3. MODIFICATION NUMBER: 001
4. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING GRANT/AGREEMENT (unit name, street, city, state, and zip + 4): Lake Tahoe Basin Management Unit 35 College Drive South Lake Tahoe, CA 96150		5. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING PROJECT/ACTIVITY (unit name, street, city, state, and zip + 4): Lake Tahoe Basin Management Unit 35 College Drive South Lake Tahoe, CA 96150	
6. NAME/ADDRESS OF RECIPIENT/COOPERATOR (street, city, state, and zip + 4, county): Gareth Harris, Fire Chief Lake Valley FPD 2211 Keetak St. South Lake Tahoe, CA 96150		7. RECIPIENT/COOPERATOR'S HHS SUB ACCOUNT NUMBER (For HHS payment use only):	

### 8. PURPOSE OF MODIFICATION

CHECK ALL THAT APPLY:	This modification is issued pursuant to the modification provision in the grant/agreement referenced in item no. 1, above.
<input checked="" type="checkbox"/>	CHANGE IN PERFORMANCE PERIOD: 05/01/2014-04/30/2015
<input type="checkbox"/>	CHANGE IN FUNDING:
<input checked="" type="checkbox"/>	ADMINISTRATIVE CHANGES: Amend Clauses 29, 36 and 42
<input checked="" type="checkbox"/>	OTHER (Specify type of modification): Updated AOP

Except as provided herein, all terms and conditions of the Grant/Agreement referenced in 1, above, remain unchanged and in full force and effect.

9. ADDITIONAL SPACE FOR DESCRIPTION OF MODIFICATION (add additional pages as needed):  
Annual Operating Plan for 2013 is replaced by attached 2014 AOP which expires on 4/30/2015.

### 10. ATTACHED DOCUMENTATION (Check all that apply):

<input type="checkbox"/>	Revised Scope of Work
<input type="checkbox"/>	Revised Financial Plan
<input checked="" type="checkbox"/>	Other: See attached 2014 AOP and changed clauses

### 11. SIGNATURES

**AUTHORIZED REPRESENTATIVE:** BY SIGNATURE BELOW, THE SIGNING PARTIES CERTIFY THAT THEY ARE THE OFFICIAL REPRESENTATIVES OF THEIR RESPECTIVE PARTIES AND AUTHORIZED TO ACT IN THEIR RESPECTIVE AREAS FOR MATTERS RELATED TO THE ABOVE-REFERENCED GRANT/AGREEMENT.

11.A. LAKE VALLEY FPD SIGNATURE 	11.B. DATE SIGNED 5/14/14	11.C. U.S. FOREST SERVICE SIGNATURE 	11.D. DATE SIGNED 5/14/14
(Signature of Signatory Official)		(Signature of Signatory Official)	
11.E. NAME (type or print): Gareth Harris		11.F. NAME (type or print): NANCY J. GIBSON	
11.G. TITLE (type or print): Chief		11.H. TITLE (type or print): Forest Supervisor	

### 12. G&A REVIEW

12.A. The authority and format of this modification have been reviewed and approved for signature by:  JOHN V. HEFNER, R5 U.S. Forest Service Grants & Agreements Specialist	12.B. DATE SIGNED 5/13/2014
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USDA Forest Service

OMB 0596-0217  
FS-1500-19

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13-FI-11051900-031 Modification 001

The following Provisions in the Cooperative Fire Protection Agreement are hereby replaced:

**29. EQUIPMENT** The Party that owns the equipment is responsible for the operation, service, and repair of such equipment. Notwithstanding the general waiver of claims against each other in Clause #30, the parties agree that the Protecting Party shall pay or reimburse for damage in excess of normal wear and tear, and shall replace or reimburse items lost or destroyed, except for damage occurring as a result of negligence by the Supporting Party. Special rates for Federal Excess Personal Property (FEPP) equipment will be displayed in the rate schedules, which eliminate any purchase or replacement costs for the apparatus.

**36. ELECTRONIC FUNDS TRANSFER (EFT)** The recipient/cooperator shall designate a financial institution or an authorized payment agent through which a federal payment may be made in accordance with US Treasury Regulations, Money and Finance at 31 CFR 208, which requires that federal payments are to be made by EFT to the maximum extent possible. A waiver may be requested and payments received by check by certifying in writing that one of the following situations apply:

1. The payment recipient does not have an account at a financial institution.
2. EFT creates a financial hardship because direct deposit will cost the payment recipient more than receiving a check.
3. The payment recipient has a physical or mental disability, or a geographic, language, or literacy barrier.

In order to receive EFT payments the recipient/cooperator shall register in the System for Award Management (SAM). You may register by going to [www.sam.gov](http://www.sam.gov) and following the instructions provided online. For assistance, contact SAM User Help contact the supporting Federal Service Desk at (866) 606-8220 or [www.fsd.gov](http://www.fsd.gov).

**42. PRINCIPAL CONTACTS.** Individuals listed below are authorized to act in their respective areas for matters related to this instrument.

**Principal U.S. Forest Service Contacts:**

U.S. Forest Service Program Contact	U.S. Forest Service Administrative Contact
Kit Bailey 35 College Dr. South Lake Tahoe, CA 96150 Telephone: 530-543-2631 FAX: 530-543-2655 Email: <a href="mailto:kbailey@fs.fed.us">kbailey@fs.fed.us</a>	John Hefner 35 College Drive South Lake Tahoe, CA 96150 Telephone: 530-543-2696 Fax: 530-543-2693 Email: <a href="mailto:jvhefner@fs.fed.us">jvhefner@fs.fed.us</a>