



HARVEST PERMIT APPLICATION

PLEASE PRINT CLEARLY USING BLACK INK

Pursuant to By-law No. 2006-170

PERMIT NUMBER							
EFFECTIVE DATE	dd	mm	yr				
24 Hr Notice	dd	mm	yr				
Office Use Only							

Completed PERMIT APPLICATION to be received by Norfolk County ~ Forestry Division at **LEAST 7 BUSINESS DAYS PRIOR TO PROPOSED COMMENCEMENT OF THE DESTRUCTION, INJURY OR HARVESTING OF TREES**. All Sections are to be filled out completely upon this Permit Application, failure to do so will result in making this application null and void, and this document will be returned to the applicant for correction.

WOODLOT OWNER		Surname					Given Name					Phone							
911 Address				Town				Postal Code											
Mailing Address				Tax Roll No.				3	3	1	0								
Woodlot Location		Former Township				Lot				Concession									
TYPE OF HARVEST																			
GOOD FORESTRY PRACTICES		OPFA No.				Prescription Date				mm	dd	yr							
Prescription Prepared by		Surname					Given Name					Phone							
Address		Town				Postal Code													
CIRCUMFERENCE		RESIDUAL BASAL AREA ~ 16 m2/ha assessed using the provision set forth in the By-law on trees 26 cm or more at DBH																	
STAND IMPROVEMENT		Any Trees proposed to be harvested under stand improvement must conform to the provisions set forth in the By-law.																	
TREE MARKER		Surname					Given Name					Phone							
Address		Town				Postal Code													
Certified Tree Marker		YES	No.	Paint Colour				Date Marked				mm	dd	yr					
CONTRACTOR		COMPANY NAME				ID No.													
Contact Information		Surname					Given Name					Phone							
Address		Town				Postal Code													
Person in Charge		Surname					Given Name					Phone							

TIMBER HARVEST INFORMATION	Woodlot Area		Acres	Hectares	Estimated Volume		FBM	M3
Total Trees to be Harvested	Property enrolled in the Managed Forest Tax Incentive Program?							
	Property enrolled in the Conservation Land Tax Incentive Program?							
	Is there a Municipal Drain located in or adjacent to the woodland?							

ATTACHMENTS REQUIRED (initials required for each applicable requirement)

Good Forestry Practices		Circumference / and/or Stand Improvement	
Approved Prescription (minimum requirements outlined in Template – 2006-170-A)		Timber Harvest Summary (minimum requirements outlined in Form – 2006-170-B)	
Timber Harvest Summary (minimum requirements outlined in Form – 2006-170-B)		Contractor Registration (if not filed with Norfolk County) (minimum requirements outlined in Form – 2006-170-C)	
Contractor Registration (if not filed with Norfolk County) (minimum requirements outlined in Form – 2006-170-C)		PERMIT APPLICATIONS WILL NOT BE PROCESSED WITHOUT ALL SUPPORTING DOCUMENTATION.	

I agree that operations will be in accordance with the provisions of the Norfolk County ~ Forest Conservation By-law No. 2006-170 and that I am familiar with the contents and requirements of this By-law and acknowledge having received a copy thereof. I further agree that any tree harvested will be undertaken in compliance with the By-law and meet conditions set forth in the permit issued.

	dd	mm	yr		dd	mm	yr
Signature of Landowner	Date			Signature of Contractor (if applicable)	Date		



MINIMUM PRESCRIPTION REQUIREMENTS

Template 2006-170-A

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The information summarized on this template must be **received** by Norfolk County ~ Forestry Division prior to or with the Harvest Permit Application. In the absence of a summary of the information required on this template, the template itself can be completed in full and filed prior to or with the Harvest Permit Application. Failure to submit all the required information will result in making the entire application null and void, all documentation will be returned to the applicant for correction.

WOODLOT OWNER		Surname					Given Name					Phone				
Mailing Address						Tax Roll No.	3	3	1	0						
Woodlot Location	Former Township								Lot					Concession		
Prescription Prepared by		Surname					Given Name					Phone				
Address						Town					Postal Code					
Is the Author of Prescription the tree marker		Yes		No		If No, will the Author of the Prescription be auditing the tree marking once complete.				Yes		No				

LANDOWNER OBJECTIVES

Long-term: _____

Short-term: _____

STAND INFORMATION ~ MAP TO BE ATTACHED

Species Composition					Harvest Area			Hectares		Acres	
Estimated Age		Average Stand Height		Ft.		M	Density		Estimated Trees/Ha		
Stand Quality Notes											
Regeneration Notes											
Topography											
Past Management											
Integrated Resource Management Considerations											
Treatment Guidelines (Tree Marker)											
Follow-up Recommendations											

Tree Size (cm)	Actual BA (m2/ha)			BA to Cut (m2/ha)			Actual Residual BA (m2/ha)			IDEAL BA
	AGS	UGS	TOTAL	AGS	UGS	TOTAL	AGS	UGS	TOTAL	
10 - 24										5
26 - 40										5
42 - 48										4
50 - 60										4
62 +										2
TOTAL										20

I agree that the prescription I have prepared meets or exceeds the definition of good forestry practice and as such will be in accordance with the provisions of the Norfolk County ~ Forest Conservation By-law No. 2006-170.

Signature of Landowner		Date	
Signature of Contractor		Date	

OPFA STAMP



TIMBER HARVEST SUMMARY

Form 2006-170-B

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Completed TIMBER HARVEST SUMMARY to be received by Norfolk County ~ Forestry Division with the Harvest Permit Application. All Sections are to be filled out completely upon this Summary, failure to do so will result in making the entire application null and void, all documentation will be returned to the applicant for correction.

WOODLOT OWNER		Surname	Given Name				Phone										
THIS INFORMATION MUST MATCH THE PERMIT APPLICATION.							Tax Roll No.	3	3	1	0						
Woodlot Location	Former Township					Lot		Concession									

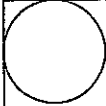
TYPE OF HARVEST		Good Forestry		Circumference		Stand Improvement
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HARVEST PERMIT APPLICATION SUBMITTED	dd	mm	yy
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PERMIT APPLICATIONS WILL NOT BE PROCESSED WITHOUT ALL SUPPORTING DOCUMENTATION.

DESCRIPTION OF AREA

(must be legible and drawn in black ink)



Indicate NORTH

TREE HARVEST SUMMARY

(A legible tally sheet can be substituted and attached)

Tree Species	No.
Total Trees	

All trees to be cut shall be marked with a paint spot on opposite sides of the tree at a height no lower than 1.37 metres above the highest point of ground at the base of the tree. The mark shall be at least 8 centimeters in diameter for hardwood sawlogs/conifer poles or sawlogs and a slash 20 centimeters long for fuelwood/ conifer sawlogs/pulp. A similar mark shall be placed at the base of the tree below the saw line and extending to the ground. All trees shall be marked facing the same direction, unless the terrain requires a change in direction, in which case the marking will proceed consistently with the terrain.

Map must be legible and include:

- Preferred entry points for inspection
- Location/name of surrounding roads
- Location of buildings on property
- Forested areas and harvest areas
- Log landing(s)
- Power lines and Municipal ditches

It is requested that if loggers are working near or adjacent to power lines that they contact the local Hydro Utility Company for assistance to prevent an accident and any damage that may occur to hydro lines and equipment due to a logging accident.

	dd	mm	yy
Signature of Landowner	Date		
	dd	mm	yy
Signature of Contractor (if applicable)	Date		