

NOTIFICATION OF TIMBER HARVEST

Town: _____ Date: _____
Property Location: _____

List all parcels:

Assessor's Info:

| Map | Block | Lot |
|-----|-------|-----|
| | | |
| | | |
| | | |
| | | |

OR:

| Unique ID |
|-----------|
| |
| |
| |
| |

Total acreage of property(s): _____ Total acreage of harvest area: _____

Landowner(s) of Record: _____
Mailing Address: _____
Town: _____ Zip _____
Phone () _____
E-mail: _____

Primary Contact: _____
Mailing Address: _____
Town: _____ Zip _____
Phone () _____
E-mail: _____

Note: Timber harvesting is a *Permitted as of Right Activity* pursuant to the Inland Wetlands and Watercourses Act, except for those practices regulated under Section 22a-36 through 22a-45 of the Connecticut General Statutes.

Is there a current forest management/stewardship plan for this property? Yes No

| |
|---|
| <p>This timber harvest has been prepared by a State of Connecticut certified: (Check one): <input type="checkbox"/> Forester OR <input type="checkbox"/> Supervising Forest Products Harvester Forest Practitioner Certificate #: _____ Name: _____ Address: _____ E-mail: _____ Phone #: (Business) _____ (Cell) _____</p> |
|---|

Property Boundaries:
Bounds are marked: Yes No

Timber Harvest Boundaries:
Have been marked or flagged: Yes No

Have owners of all lands within 100 feet of the harvest area been notified via first-class mail prior to filing this "Notification of Timber Harvest"? Yes No

Estimated starting date of timber harvesting operations: ____/____/____

Description of Timber Harvest:

Objective: _____
Treatment: _____

Amount of forest products to be harvested:

_____ Board feet _____ Cords _____ Cubic feet _____ Tons

How have the trees to be harvested been designated?

- They have been marked with paint at eye level and at ground level. **Paint color(s):** _____
- They have not been marked

SOIL, WATER AND INLAND WETLANDS RESOURCES

Actions Being Performed On This Land

(Check all that apply and locate on attached Timber Harvest Area map -- see information below on maps.)

| | |
|--|--|
| <p style="text-align: center;"><u>Crossings / Clearing</u></p> <input type="checkbox"/> Temporary stream/drainage crossing <input type="checkbox"/> Temporary wetlands crossing <input type="checkbox"/> Removal of trees in wetlands <input type="checkbox"/> Removal of trees in upland review area | <p style="text-align: center;"><u>Erosion and Sedimentation Control Measures:</u></p> <input type="checkbox"/> Installation of water bars <input type="checkbox"/> Grading <input type="checkbox"/> Seeding <input type="checkbox"/> Other (describe below) |
| <p style="text-align: center;"><u>Log landing area:</u></p> <input type="checkbox"/> anti-tracking pad <input type="checkbox"/> curb cut | <p style="text-align: center;"><u>Roads</u></p> <p>Are new roads, other than skid trails, to be constructed for transport of logs or other activities associated with this harvest?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No |

Describe in further detail as necessary:

The following maps are attached to this “Notification” (Check all that apply)

- Copy of USGS topographic map with property outlined
- Copy of Assessor’s map with property outlined
- Timber Harvest Area map showing outline of harvest area, main skid road locations, log landing area, truck access roads, inland wetlands, watercourses and any crossings

The undersigned hereby swear that the information contained in this application is true, accurate and complete to the best of my (our) knowledge and belief and that the timber harvest will be conducted in accordance with the specifications outlined in this “Notification of Timber Harvest.”

Signature of Landowner(s): _____ Date: _____

Print/Type Name: _____

Signature of Landowner(s): _____ Date: _____

Print/Type Name: _____

Signature of Certified Forest Practitioner: _____ Date: _____

Print Name: _____

Certificate #: _____ Expiration Date: ____/____/____

Complete and Submit to:

- The Municipal Inland Wetlands Agency/ies in which the property is located, and
- A courtesy copy of this Notification Form should also be sent to The Department of Environmental Protection, Division of Forestry
79 Elm Street, Hartford, CT, Tel: (860) 424-3630

This is not an official CT DEP form but it has been endorsed for town usage by: CT Farm Bureau Assoc., CT Forest & Park Assoc., CT Professional Timber Producers, Society of American Foresters - CT Chapter, and others.