



FOREST OPERATIONS NOTIFICATION of intent to harvest forest products, construct land management roads, and/or establish water crossings

- 21. Expected date of re-entry (cutting cycle) _____ / _____
- 22. Type of silvicultural cutting proposed _____
- 23. Check what you plan for reforestation
 Natural _____ Planting _____ Artificial Seeding _____
 Yes _____ No _____ Unknown _____
- 24. Pesticide or other chemical treatment planned? _____
- 25. If Yes, the period of treatment is from (month / year): _____ / _____ to: _____ / _____
- 26. What are the proposed plans to mitigate the evidence of harvest?
 Slash Disposal _____
 Haul Roads _____
 Log Landings _____

HAVE YOU?

- ✓ Included your AWW LOCATION MAP showing the location of the proposed activity?
- ✓ If there are Sub-Harvest Areas, clearly numbered each?

Waterway Manager Comments/Suggestions _____

Signature: _____ Date _____

State Licensed Forester Comments/Suggestions _____

Signature: _____ Date _____

Approved Without Additional Conditions (check box)

Approved With The Following Conditions _____

Bureau Director (or Designee) _____ Date _____