



# FOREST PRACTICE APPLICATION/NOTIFICATION RENEWAL FORM

Revised 5/14/2020

## Instructions:

Use this form to renew your current Forest Practices Application/Notification if:

- You are not proposing to modify the uncompleted operation
- There are no outstanding enforcement actions associated with the application/notification.
- The forest practice rules in effect at the time of renewal do not require a change in the nature and extent of the forest practice.

Fill out this form and return it to the Clark County Permit Services Center. **Type or print in permanent ink.** You can find a list of Clark County Forest Practice Application Forms by going to the County website at <https://www.clark.wa.gov/public-works/forest-practices-permits>.

**Renewal requires must be received and accepted at the county office prior to the expiration date of your current forest practice application or notification.**

APPLICATION NUMBER: \_\_\_\_\_ ORIGINAL EXPIRATION DATE: \_\_\_\_\_

Classification of the original forest practice:

Class I w/NHC – [ ]    Hazard Tree – [ ]    Class IV-General – [ ]    Class IV-Special – [ ]

Are you proposing any modification of the original forest practices?

[ ] YES – STOP. You must complete a new Forest Practice Application/Notification Form.

[ ] NO – Continue.

1) Full legal name of <u>Landowner</u>	2) Full legal name of <u>Timber Owner</u>	3) Full legal name of <u>Operator</u>
Mailing Address	Mailing Address	Mailing Address
City, State, Zip	City, State, Zip	City, State, Zip
Phone (    )	Phone (    )	Phone (    )
E-Mail:	E-Mail:	E-Mail:

4) Legal description of the forest practice activity.

Within ¼ sect. Of ¼ sect. of:	Section	Township	Range E/W	Parcel Number

5) I/We affirm that the information contained herein is true, and understand that this proposed Forest Practice is subject to the current rules and regulations of the Forest Practices Act, as well as any applicable Federal, State or Local rules and regulations. We the undersigned also affirm compliance with the Clark County Code Chapter 40.380. Compliance with this application/notification does not ensure compliance with the Endangered Species Act, or other federal, state, or local laws.

The landowner understands that by signing and submitting this FPA/N, he/she is authorizing the Clark County Forester to enter the property in order to review the proposal, inspect harvest operations, and monitor compliance for up to three years after its expiration date RCW 76.09.150.

Signature of <b>Landowner</b> :	Signature of <b>Timber Owner</b> :	Signature of <b>Operator</b> :
Date:	Date:	Date:
Print <b>Landowner</b> name:	Print <b>Timber Owner</b> name:	Print <b>Operator</b> name:

**County Staff Use Below the Line**

FPA #: \_\_\_\_\_ DATE RCVD: \_\_\_\_\_

**Decision:** EFFECTIVE DATE \_\_\_\_\_

MEETS REQUIREMENTS OFR RENEWAL EXPIRATION DATE \_\_\_\_\_

DOES NOT MEET REQUIREMENT FOR RENEWAL

Modification(s) to the uncompleted operation.

Outstanding enforcement actions associated with this application / notification.

The current forest practice rules require a change in the nature and extent of the forest practice.

Request was not received and accepted at the county office prior to the expiration date of your current forest practices application or notification.

CLOSED-OUT

**CONDITIONS:**

ALL CONDITIONS OF THE ORIGINAL APPLICATION / NOTIFICATION APPLY

THE FOLLOWING CONDITIONS APPLY:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

County Forester Signature

Date