

271 McMurdo St. P.O. Box 494 Miramichi, NB E1V 3M6 Telephone: (506) 622-7733 Fax: (506) 622-6317 Email: woodlot@nb.aibn.com

## SILVICULTURE REQUEST FORM

WOODLOT OWNER:		
ADDRESS:		
TELEPHONE #:		
WOODLOT LOCATION:		
PID #:		
TREATMENT REQUEST:		Pre-Commercial Thinning
		Planting
		Plantation Cleaning
		Partial Harvesting
		Management Plan
		Walk thru
COMMENTS:		HE WORK:
	<u>ow</u>	NER'S CONTRIBUTION
government funding, 2) fo	rest m downe	ach season and is obtained from three main sources: 1) nanagement check-off levy, and 3) land owner direct r contribution is a minimal amount of the total costs and reatment occurs.
ILandowner's Contribution tha	at is as	, (land owner) am responsible for the payment of the sociated with the above request.
DATE:		SIGNATURE: