# Notification of Timber Harvest

**Town:**

**Property Location:**

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**Total acreage of property(s):**

**Total acreage of harvest area:**

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**Landowner(s) of Record:**

**Mailing Address:**

**Town:**

**Zip**

**Phone ( )**

**E-mail:**

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**Primary Contact:**

**Mailing Address:**

**Town:**

**Zip**

**Phone ( )**

**E-mail:**

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**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
- [x] No

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**This timber harvest has been prepared by a State of Connecticut certified:**

(Choose one):  
- [ ] Forester
- [x] Supervising Forest Products Harvester

**Forest Practitioner Certificate #:**

**Name:**

**Address:**

**E-mail:**

**Phone #:** (Business) ________ (Cell) ________

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**Property Boundaries:**

**Bounds are marked:**

- [ ] Yes
- [ ] No

**Timber Harvest Boundaries:**

**Have been marked or flagged:**

- [ ] Yes
- [ ] No

**Estimated starting date of timber harvesting operations:**

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**Description of Timber Harvest:**

**Objective:**

**Treatment:**

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**Amount of forest products to be harvested:**

<table>
<thead>
<tr>
<th>Board feet</th>
<th>Cords</th>
<th>Cubic feet</th>
<th>Tons</th>
</tr>
</thead>
</table>

**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

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*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.*
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.)

<table>
<thead>
<tr>
<th>Crossings / Clearing</th>
<th>Erosion and Sedimentation Control Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Temporary stream/drainage crossing</td>
<td>☐ Installation of water bars</td>
</tr>
<tr>
<td>☐ Temporary wetlands crossing</td>
<td>☐ Grading</td>
</tr>
<tr>
<td>☐ Removal of trees in wetlands</td>
<td>☐ Seeding</td>
</tr>
<tr>
<td>☐ Removal of trees in upland review area</td>
<td>☐ Other (describe below)</td>
</tr>
<tr>
<td>Log landing area:</td>
<td>Roads</td>
</tr>
<tr>
<td>☐ anti-tracking pad</td>
<td>Are new roads, other than skid trails, to be constructed for transport of logs or other activities associated with this harvest?</td>
</tr>
<tr>
<td>☐ curb cut</td>
<td>☐ Yes ☐ No</td>
</tr>
</tbody>
</table>

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, track 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
  78 Elm Street, Hartford, CT, Tel: (860) 424-3830

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