

**SCHEDULE "F"**  
to the By-Law No. 18-39 amending By-Law No. 05-03  
(Woodlands Conservation By-Law)

APPLICATION NUMBER

**APPLICATION TO HARVEST, DESTROY OR INJURE TREES**

**for the**

**COUNTY OF ELGIN WOODLANDS CONSERVATION BY-LAW NO. 05-03**

This application must be completed at least thirty (30) business days prior to the proposed commencement of the Harvest. This permit is good for one year after being signed by the Officer.

**This application after being signed by the Officer will be returned to the Property Owner and Purchaser.**

Property Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Email: \_\_\_\_\_

Roll # of Woodland: \_\_\_\_\_

Location of Woodland Lot: \_\_\_\_\_ Concession: \_\_\_\_\_

Township: \_\_\_\_\_ Woodland Size: \_\_\_\_\_

Board Foot Removed: \_\_\_\_\_

911 of Woodlot: \_\_\_\_\_

Expected Starting Date: \_\_\_\_\_

Person in Charge of Cutting: \_\_\_\_\_

Contractor's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**Reason for removal: (A prescription must accompany Good Forestry Practices Cuts.)**

Good Forestry \_\_\_\_\_ Fuelwood Removal \_\_\_\_\_

Circumference \_\_\_\_\_ Other \_\_\_\_\_

Company and contact person who marked the woodlands: \_\_\_\_\_

Registered Professional Forester: \_\_\_\_\_

\_\_\_\_\_

Registered Professional Forester Registration Number: \_\_\_\_\_

Tree Marker: \_\_\_\_\_

Tree Marker's Number: \_\_\_\_\_

Mailing Address: Elgin County Tree Commissioner,  
c/o Kettle Creek Conservation Authority,  
RR #8, 44015 Ferguson Line,  
St Thomas, Ontario,  
N5P 3T3  
Phone: (519) 631-1270 ext. 231  
Fax: (519) 631-5026