

Chilliwack Forest District

Cutting Permit Application

This form is used to apply for a Cutting Permit in the Chilliwack Forest District.

Do not submit this application unless all content items are complete.

Once complete, this form can be submitted to fta.dck@gov.bc.ca or mailed to the Chilliwack Forest District at 46360 Airport Road, Chilliwack BC V2P 1A5.

Licence # _____ Licensee _____

Cutting Permit # _____ Location _____

Total Hectares: _____ Total Volume: _____ Cutblocks: _____

Either 1, 2 or 3 must be yes

- 1) The total area covered under this Cutting Permit (CP) application is located within a Forest Development Unit of an approved Forest Stewardship Plan, or Yes ___ N/A ___
- 2) The total area covered under this CP application is located within an approved Woodlot Licence Plan, or is consistent with a Forest Development Plan for a Woodlot, OR Yes ___ N/A ___
- 3) The Licensee is exempted under the *Forest and Range Practices Act* from the requirement for a Forest Stewardship Plan or Woodlot Licence Plan. Yes ___ N/A ___
- 4) Identify any cutblocks deemed approved under *Forest and Range Practices Act* Section 196(1) _____ N/A ___
- 5) Requested Cutting Permit Term _____ (Max. 4 years).
(The requested CP term must be consistent with the licence document)
- 6) The CP application is consistent with any notice(s) given under sections 2.03 & 2.04 of the Licence. Yes ___ N/A ___
- 7) Information Sharing with First Nations is complete.
 - Consistent with FSP results and strategies.
 - Copy of the information package that the applicable first nations received is included. Yes ___

Either 8, 9 or 10 must be yes

- 8) All appraisal data is compiled in accordance with the current Coast Appraisal Manual (CAM) and is submitted through the ECommerce Appraisal System (ECAS) or. Yes ___ N/A ___
ECAS submission ID# _____
- 9) The timber volume is less than 2,500 m3 and the appraisal officer (Coast Region) has waived the requirement for a full appraisal. A volume estimate by species is included. Yes ___ N/A ___
- 10) Tabular stumpage rates are requested (Woodlots & Community Forest Agreements only) and a completed Miscellaneous Timber Pricing Appraisal Data Submission (excel file) is attached. Yes ___ N/A ___

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- 11) Reserved timber has been identified in a tabular format.
 - Not required for WTRA's
 - Not required for spatially defined (group retention) reserved timber
 - **Required** for non-spatially defined (dispersed retention) reserved timber Yes N/A
- 12) A rationale, consistent with DM letter dated Nov. 4th, 2005, for helicopter harvesting is included in the appraisal information in ECAS.
 (Refer to the supporting document "Requirements for Heli Logging Appraisal submissions") Yes N/A
- 13) Supporting documentation for non-tabular road appraisal costs that were previously accepted by the District Manager is included as an ECAS attachment. Yes N/A
- 14) All Licensee Key Value Indicator Forms for C&E Risk Rating are included.
 (Refer to the supporting document "Licensee Key Value Indicator (KVI) Form") Yes
- 15) An electronic application consisting of the attributes and spatial data (XML/GML) meeting the standards established in the Electronic Submission Framework (ESF) has been submitted.
 ESF Submission ID# _____ Yes
- 16) The ESF Land Use Report has been reviewed. A summary rationalizing all land use conflicts to support the ESF submission is included. Yes
- 17) A Rationale Checklist for harvesting adjacent to private land is included.
 (Mandatory if CP is within 150 metres of park or private land)
[Rational Checklist](#) Yes N/A
- 18) The closing error for all cutting boundaries is less than or equal to 1% or all cutting boundaries were located using a GPS device and the data conforms to Resources Information Standards Committee (RISC) standards (<5m positional error). <http://ilmbwww.gov.bc.ca/risc/pubs/other/index.htm> Yes

Notes: _____

The CP document will be issued electronically by email unless a paper copy is requested. Below I have indicated the email address or mailing address (for paper copy) to send the CP document to.

 (Please only include one address)

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To the best of my knowledge the statements in the above checklist are correct.

Registered Professional's Name _____;#_____.

Signature: _____ Seal:

Date: _____

