



PROVINCIAL COMPARATIVE CRUISE CHECKLIST

FOREST REGION _____

FOREST DISTRICT _____

PARENT LICENCE: _____

PARENT C.P.: _____

NEW LICENCE: _____

NEW C.P.: _____

A. FIELDWORK	YES	NO
1. Fieldwork date (Parent cruise: mature must be less than 10 years/ Immature less than 5 years)		
2. Biogeoclimatic (BEC) Subzone – Both cruises the same BEC subzone		
3. Frequency of plots – Minimum of 6 measure plots per timber type or 1 plot per hectare in the parent and new cruises.		
B. DATA	YES	NO
4. Is there a location map provided showing proximity of parent and new cruises?		
5. Is the new Cruise Plan Map acceptable – systematic grid?		
6. Are all of the plot cards submitted for the new cruise properly completed and signed?		
7. Is the data collected to the <i>Cruising Manual</i> standards?		
8. Is there an average of 5.0 trees per plot in the new cruise?		
9. Were all of the tree diameters and heights measured in the new cruise?		
10. Are at least 2 ages measured of co-dominant and dominant trees per plot in the new cruise?		
C. COMPILATION	YES	NO
11. Were all summary pages submitted for the parent and new cruise?		
12. Cruise compilation version – parent and new must be compiled on the most recent version.		
13. Timber merchantability specifications – parent and new must be compiled to timber merchantability specifications.		
14. Species composition – must be within $\pm 5\%$ for major species and $\pm 10\%$ for minor species.		
15. Merchantable Vol/ha – must be within $\pm 10\%$		
16. Are the maturity classes similar for the parent and the new cruises?		
17. Lumber Recovery Factors – must be within ± 5 LRF points.		
18. Merchantable Vol/Tree – must be within $\pm 10\%$, not less than 0.20.		
19. If new cruise is less than 0.20 m ³ /tree, the parent cruise must be less than 0.20 m ³ /tree.		
20. Recompiled parent cruise meets +/- 15%?		
21. New plots added to the recompilation of the parent cruise?		

Notes:

1. References – Section 4.2 of the *Interior Appraisal Manual* and Section 2.1.2.3 of the *Cruising Manual*.
2. Attach the original copy of this checklist to the cutting permit application.

REMARKS :

Submitted by Licensee: (signature) _____
Approved by District Manager: (signature) _____
Approval/rejection letter sent by: _____ Date: _____