



Province of
British Columbia



Ministry
of
Forests

Post Harvest Report
SMALL SCALE SALVAGE PROGRAM
100 Mile House Forest District

Updated: January 18, 2010.

19545-25/FLTC A

Deliver or Mail to:	Date received
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Legal name of licensee:	Address of licensee(s):	
Client No. _____		
Prepared by: (Name and registration number of the professional that prepared the certificate of completion)	Contact information: (address, phone number, e-mail)	

I have reviewed the relevant documents and conducted a field assessment on the area(s) authorized for harvest under this license. As a result, I am able to attest to the completion of obligations as set out in the license in a manner consistent with the identified results, standards, guidelines and legislation subject to specific comments provided below.

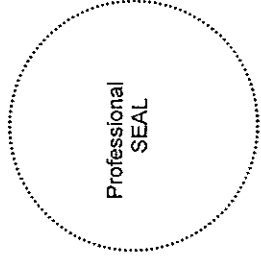
All obligations are complete <u>OR</u>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Obligations are substantially complete with the exception(s) noted below	Yes <input type="checkbox"/> No <input type="checkbox"/>
Specify obligations not satisfactory completed:	

SPECIFIC OBLIGATIONS

Harvesting has been conducted in a manner consistent with the "Professional Application", license and any legislation and any requirements attached thereto.	Yes <input type="checkbox"/> No <input type="checkbox"/>
All timber required by the license to be harvested has been removed from the site.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Waste and residue standards have been achieved.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Estimated volume of waste _____ m ³	
Measures undertaken to protect soil, water, archeological features and wildlife habitat have achieved the required results.	Yes <input type="checkbox"/> No <input type="checkbox"/>
All access structures have been deactivated, rehabilitated, or otherwise treated in a manner consistent with the requirements of the license and road use agreement.	Yes <input type="checkbox"/> No <input type="checkbox"/>
A silviculture survey is attached:	Yes <input type="checkbox"/> NA <input type="checkbox"/>
Stocking has been assessed as per the "Stocking and Free Growing Survey Procedures Manual" AND The harvested area has retained a free-growing stand with a minimum stocking that is at least 20% greater than the applicable specified minimum standard as per the "Reference guide for Forest Development Plan Stocking Standards".	Yes <input type="checkbox"/> No <input type="checkbox"/>
A silviculture treatment prescription is attached: The area is not free growing.	Yes <input type="checkbox"/> NA <input type="checkbox"/>
A fire hazard assessment report is attached:	Yes <input type="checkbox"/>
Debris piles or debris accumulation on site will require fire hazard abatement	Yes <input type="checkbox"/> No <input type="checkbox"/>
All identified recreation and range trails have been left clear of harvesting debris and the integrity of the trail base has been maintained.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Wildlife Tree Retention measures have been met as per Section 66 of FPPR	NA <input type="checkbox"/>
A map is included with this declaration.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Yes <input type="checkbox"/> NA <input type="checkbox"/>

I certify that the work necessary to complete this declaration has been done or directly supervised by me, and that the information contained herein is accurate.

Professional Signature



Date