FOREST COVER AND DECLARATIONS - FORM 'C'

SHADED FIELDS ARE MANDATORY WITH ALL SUBMISSIONS MADE AFTER DEC. 31, 2003

A. ADMINISTRATION

REGION	DISTRICT	LICENSEE CONTACT NAME	LICENSEE E-MAIL ADDRESS	TELEPHONE NO.	DATE (YYYY - MM - DD)

B. TENURE (Enter one of Opening, Timbermark/Block, Licence No./Cutting Permit/Cutblock)

OPENING NO.	OBLIGATION		LICENCE NO.	CUTTING PERMIT	CUTBLOCK
	TIMBERMARK	BLOCK			

C. FOREST COVER

SU	POLYGON / STRATA	AREA (ha)	REF YR.	RESERVE		SITE		TREE COVER PATRN	RE-ENTRY YEAR	STOCKING		LAYER	SPECIES COMPOSITION														CC (%)	DENSITY (stms/ha)	TOTAL WELL-SPACED (stms/ha)	WELL-SPACED (stms/ha)	FREE-GROW (stms/ha)	BASAL AREA (m^2/ha)	DAMAGE AGENT			
				TYPE	OBJ	INDEX	SRC. CD.			STATUS	TYPE		SP	%	AGE (yrs)	HT (m)	SP	%	AGE (yrs)	HT (m)	SP	%	SP	%	SP	%							CODE	%	CODE	%

D. MILESTONE DECLARATIONS

SU	DECLARATION OF OBLIGATIONS MET			COMMENTS
	POST HARVEST YYYY - MM - DD	REGENERATION YYYY - MM - DD	FREE-GROWING YYYY - MM - DD	