



MARK/SITE DESIGNATION APPLICATION

TO: District Manager	DATE:
FOREST DISTRICT	FILE: 21630 –

I, _____ request a timber mark/scale site designation under **Section 94(1) of the Forest Act and Section 2 of the Timber Marking and Transportation Regulation** for the following timber marks to the following scaling sites.

Please indicate the type of timber product that you are sending to each scale site listed below by using any combination of the following terms to describe the timber product:

- Crown, private, species name, green, dry, firekilled, sawlogs, poles, pulp, grade name, short log, long log or any other appropriate descriptor.

TIMBERMARK	SCALE SITE NO.	SCALE SITE NAME	PRODUCT	VOLUME	DESIGNATION EXPIRY

A person whose timber is scaled under the Part must ensure a complete and accurate scale of the timber is performed (Forest 96(3))

I agree, by signing this application, to the method of scaling conducted at the above scale sites.

I understand that approval of this **Timber Mark/Scale Site Designation** is valid only for the timber marks transported to the scale sites indicated above.

Signatures of Mark Holder(s)	Scale Site
	Name of Site:
Mailing Address:	Mailing Address:
Phone Fax Numbers:	Phone Fax Numbers:
Email Address:	Email Address: