



# SILVICULTURE PRESCRIPTION AMENDMENT (SHORT FORM)

AMENDMENT NO. \_\_\_\_\_

*This form is to be used for submission of amendments to approved Silviculture Prescriptions. When these amendments are approved or put into effect by the District Manager, they form an integral part of the original prescription and should be attached thereto.*

TENURE DESCRIPTION AND LOCATION														
LICENSEE		TIMBER MARK		LICENCE NO.		C.P. NO.		BLOCK NO.		OPENING NO.				
LOCATION		DISTRICT		SUBMISSION DATE		ORIGINAL SP APPROVAL DATE		ADVERTISING DATES (where applicable)		TO				
		Y	M	D			Y	M	D			Y	M	D

REASONS FOR AMENDMENT(S)	
AMENDMENT UNDER THE FOREST PRACTICES CODE OF B.C. ACT <i>(check applicable section reference)</i> <input type="checkbox"/> SECTION 34 <input type="checkbox"/> SECTION 35 <input type="checkbox"/> SECTION 36	CONSISTENT WITH <i>(provide name of forest development plan and/or higher-level plan)</i>

## AMENDMENT DETAILS

AREA CHANGES				AMENDED STANDARDS UNIT AREAS		
	Total Area under the Prescription	Non-productive	Net area to be reforested	Standards Unit	Original	Amended
ORIGINAL				_____	_____ ha	_____ ha
AMENDED				_____	_____ ha	_____ ha
OTHER CHANGES				_____	_____ ha	_____ ha
				_____	_____ ha	_____ ha
				_____	_____ ha	_____ ha
				_____	_____ ha	_____ ha
				_____	_____ ha	_____ ha
				_____	_____ ha	_____ ha
				_____	_____ ha	_____ ha
				_____	_____ ha	_____ ha

NOTE: Total of Amended Standards Unit Areas must = Amended Net Area to be Reforested

(CHANGES MAY BE CONTINUED ON FS 395-2)

SIGNATURES				ATTACHMENTS	
R.P.F. PREPARING PRESCRIPTION AMENDMENT R.P.F. SIGNATURE  <div style="text-align: center; font-size: 2em; letter-spacing: 0.5em;">S E A L</div>  R.P.F.'S NAME <i>(please print)</i>		LICENCE HOLDER SIGNING AUTHORITY DATE SIGNED Y M D  DISTRICT MANAGER'S NAME <i>(please print)</i>  DISTRICT MANAGER'S SIGNATURE DATE Y M D		<input type="checkbox"/> Revised SP Map <input type="checkbox"/> New Field Data Cards <input type="checkbox"/> MLSIS Update Required Form FS 708____ <input type="checkbox"/> Copies of Advertising <input type="checkbox"/> Written Comments <input type="checkbox"/> Assessment of Comments <input type="checkbox"/> Revised Stand Tables <input type="checkbox"/> FS 395-2 Other:	
		INITIALS <span style="border: 1px solid black; padding: 2px;">  </span>			

