TIMBER HARVEST PERMIT

PERMIT NUMBER _____ DATE _____

ISSUED BY _____

NAME _____

ADDRESS _____

TELEPHONE NUMBER _____

COMPANY CONTACT_____

CHECK ONE: ( ) INDIVIDUAL ( ) COMPANY ( ) PARTNERSHIP ( ) OTHER

DATE OF TIMBER AGREEMENT _____

OWNER OF REAL PROPERTY _____

ADDRESS _____

TELEPHONE NUMBER _____

LOCATION OF PROPERTY – COUNTY ROAD _____

ROUTE _____

DATE OF TIMBER CONTRACT _____

EXPIRATION DATE _____

ASSIGNMENT OF TIMBER AGREEMENT _____

ADDRESS _____

ADDRESS _____

Letter of credit received $_____

_____
Signature of Company Official

FOR COUNTY USE ONLY

DATE OF INSPECTION BY ROAD SUPERINTENDENT _____

AMOUNT OF BOND FORFEITED-_____

_____
SIGNATURE OF ROAD SUPERINTENDENT