



Tzeachten First Nation TIMBER PERMIT APPLICATION



This application is required to obtain approval and is to be completed by the applicant. Note: Tzeachten First Nation reserves the right to reject the review of an incomplete application. The information below will be only used for the purpose for which it was obtained.

General Information			
Applicant Name:		Job Title:	
Company Name:			
Contractor Name:			
Address, City, Province, Postal Code:			
Email Address:		Phone #	
Project Information			
Lot #		Project No.:	
Status Of Land:		<input type="checkbox"/> CP Land <input type="checkbox"/> Leased Land <input type="checkbox"/> Reserve Land <input type="checkbox"/> Designated/Surrendered Land	
Reason for Removal:		<input type="checkbox"/> Diseased <input type="checkbox"/> Dangerous <input type="checkbox"/> Clearing Property to Develop <input type="checkbox"/> Tree Topping/Limbing	
Project Checklist			Notes:
Commencement Date of Requested Permit:			
Duration of Requested Permit:			
Land Status Report Attached:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Legal Survey Drawing:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Site Sketch Plan:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Environmental Assessment:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Silviculture Prescription:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Harvesting Plan or Logging Plan:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cultural & Historical Site Assessment:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Project Description:			

All applicants must read and declare the following:

- I hereby declare that all of the above statements and information contained in this application and in the material submitted in support of this application are, to the best of my knowledge, true and correct in all respects.
- I hereby consent to having the Tzeachten First Nation conduct or cause to be conducted a personal credit investigation.
- I hereby agree to ensure that all non-marketable timber will be made available to Tzeachten Members for firewood.
- I hereby agree to only use qualified fallers and to follow all applicable laws and standards including safety standards and regulations.
- I hereby agree to ensure that I have insurance and Workers Compensation Board coverage for any activity carried out in relation to this application.
- I hereby agree to release and indemnify Tzeachten First Nation from all claims and liability in relation to any activities carried out under a permit issued based on this application.

Signature of Applicant: _____

Date: _____

If the Applicant is not the CP-Holder, the CP-Holder must sign below.

- I hereby consent to this application:

Signature of CP-Holder: _____

Date: _____