

## **Commercial Cutting Permit Application**

Submit a completed and signed application to the appropriate Forest Management District Office. Retain a copy for your records.

I am apply	ing as	s a:										
		New Ap	plicant				Current C	ommer	cial Permit	Holder		
Forest Ma	nager	nent Dis	trict (Haı	vest Ar	ea):							
Section 1	. App	licant Ir	nformati	on (All a	applica	nts co	mplete thi	s sectio	n)			
Business	Name	(Legal):										
Primary Co	ontact	::										
Title:												
Address:												
	Stree	t / P.O. Box										
	City							Provinc	ce	Postal Code		
Business	Phone	e:				_	Busines	s Fax:				
Cell Phone	e:					-	Email:	<u>-</u>				
Business	Type:											
			Corpora	ation		Partr	nership		Proprieto	rship		
CRA Busir	ness N	lumber:										
Is your bu	siness	s register	ed in Ne	wfound	lland ar	nd Lab	rador?		YES		NO	
Company	Numb	er:										
Number o	f Emp	lovees:							Part Time	/Tempora	ry:	
Equipmen										,		
_90.10		0.000.	-									
			-									
			-									
Do you ha Departme						the			YES		NO	



I am:						
	A current commercial permit holder requesting a renewal ONLY.					
	A current commercia	ng an increase.	→ Begin at Section 2			
	A new applicant app	lying for a new Commerc	cial Cutting Permit.	→ Begin at Section 3		
	A new applicant app	lying for a temporary Cor	mmercial Permit.	→ Begin at Section 4		
		ercial Permit Holder Int commercial permit hold	formation ers requesting an increase)			
How Ic	How long have you been a Commercial Permit holder?					
Curren	Current Commercial Permit Information:					
Location	on	Permit No.	Softwood Allocation (m³)	Hardwood Allocation (m <sup>3</sup> )		
Past A	nnual Production:	Softwood:	m³ Hardwood:	m³		
Are your return/royalty submissions up to date?		☐ YES	□ NO			
If NO,	explain why:					
Produc	cts Currently Produced	4				
TTOGG	oto ourrently i roudock					
Currer	nt Product Market:					



## **Section 3. Commercial Permit Information**

(To be completed by current permit holders requesting an increase and new applicants applying for a new Commercial Permit)

Do you currently hold an a	active Commercial Cutting Permit?		YES	□ NO	
Requested Annual Produc	ction Level:				
	Softwood:	m³	Hardwood:		m³
Required Fibre Resource:					
	Hardwood:	m³	Spruce:		m³
	Balsam Fir:	m³	Other:		m³
Resource Dimensions:	Diameters:		Lengths:		
Residue Management:					
Product(s) to be Produced					
Projected Market(s):					
<u> </u>					
Projected Employment	Full Time/Permanent :		Part Time/	Temporary:	

Proceed to Section 5 →



## Section 4. Temporary Commercial Permit Information (To be completed by applicants applying for a temporary Commercial Permit (e.g. right-of-way cutting, roadside clearing, etc.) Details/Purpose: Land Tenure: Location Description: (Please Attach Map) Requested Allocation: Softwood: m<sup>3</sup> Hardwood: **Section 5. Timber to be Scaled** (All applicants complete this section) As per Forestry Act, Section 120, all timber cut for commercial purpose on Crown lands, public land or forest land upon which a royalty is due and payable to the Crown shall be scaled by a timber scaler before being manufactured. Did you employ or have access to a certified timber scaler? $\Box$ YES NO If YES. Scaler Name: Scaler Certificate Number: Section 6. Environmental Management System (EMS) (All applicants complete this section) All forestry operation administered by the Department of Fisheries and Land Resources must comply with the requirements of EMS certification. This includes forest access road construction and maintenance, harvesting operations, silviculture operations, and the insect and disease forest protection program. Is your company willing to operate and comply with the YES NO requirements of the departments Environmental Management System? Has any employees within your company completed the *EMS* YES NO Awareness Standard Operating Procedures - Harvesting training? Is your company prepared to complete all required EMS YES NO

training before commencing operations?



## Section 7. Occupational Health and Safety (All applicants complete this section) Workers and employers in Newfoundland & Labrador have responsibilities under the Occupational Health and Safety Act and Regulations with regards to workplace safety. Does your company have an Occupational Health and Safety ☐ YES (OHS) program? NO If NO, please provide a brief overview of how you plan to address OHS requirements. Section 8. Supplement Information A business plan must accompany all Commercial Cutting Permit Applications over 1000 m<sup>3</sup>. **Section 9. Applicant Declaration** (All applicants complete this section) The Department of Fisheries and Land Resources is committed to protecting personal information, which is being collected in accordance with section 61(c) of the Access to Information and Protection of Privacy Act, 2015 (ATIPPA, 2015) and will be used in the assessment of Commercial Cutting Permit applications. It will not be used for any other purposes unless authorized under ATIPPA, 2015. I confirm the information given in this application is, to the best of my of my knowledge and ability, complete, true and correct. I acknowledge that failure to disclose relevant information may result in the invalidation of this application and cancellation of the Commercial Cutting Permit. Signature of Authorized Individual: Name (please print):



For Office Use Only
District Manager Comments/ Recommendation:
Regional Director Comments/Recommendation:
Assistant Deputy Minister Comments/Recommendation (greater than 5,000m³):