

**APPLICATION FOR PERMIT
NON-FEDERAL COMMERCIAL USE OF ROADS RESTRICTED BY ORDER
(FSM 7732)**

NOTE: This report is authorized by Acts of June 10, 1914; April 24, 1950; June 12, 1960, and October 13, 1964 (USC 478,572,530 and 532-38). No permit may be issued unless a completed Form 7700-40 is received.

For Official Use Only					DATE OF APPLICATION
REGION	STATE	COUNTY	FOREST	RANGER DISTRICT	
1. APPLICANT (Name, address, and Zip Code)					TELEPHONE NUMBER () -

2. DESCRIPTION AND MILEAGE OF ROAD(S) OR ROAD SEGMENT(S) TO BE USED (as shown on attached map)					
3. PURPOSE OF USE					
HAULING LOGS OR LUMBER _____ MBF (Quantity)					
HAULING OTHER MATERIALS _____ TONS (Quantity)					
DESCRIBE MATERIALS _____					
4. USE SCHEDULE					
SEASON	NUMBER OF DAYS OF USE	TYPE OF TRUCKS TO BE USED	TYPE OF LOADING TO BE USED		
_____	_____	_____	_____		
_____	_____	_____	_____		
_____	_____	_____	_____		
_____	_____	_____	_____		
5. PLANS FOR FUTURE USE (Not applied for on this application)					
HAULING LOGS OR LUMBER _____ MBF (Estimated Quantity)					
HAULING OTHER MATERIALS _____ TONS (Estimated Quantity)					
DESCRIBE MATERIALS _____					
ESTIMATED PERIOD OF USE FROM _____ TO _____					
SIGNATURE OF APPLICANT					DATE
_____					_____

REPORT ON APPLICATION
 (To Be Completed By District Ranger)

1. GENERAL DESCRIPTION AND ADAPTABILITY OF ROAD(S) FOR PROPOSED USE. (Show road(s) on 1/2" Forest Transportation Map)			
2. IMPROVEMENTS FOR BETTERMENT WORK NEEDED ON ROAD(S) TO SAFELY ACCOMMODATE THE ADDITIONAL TRAFFIC			
3. IMPROVEMENTS OR BETTERMENT WORK DESIRED			
4. RECOMMENDATION OR COMMENTS (Include any factors which might affect the granting of the hauling permit or future use of the road(s).)			
REPORT SUBMITTED _____	NAME AND SIGNATURE _____	TITLE _____	DATE _____
REPORT APPROVED _____	NAME AND SIGNATURE _____	TITLE _____	DATE _____

Burden and Privacy Act Statements

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0596-0016. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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