

VIRGINIA DEPARTMENT OF FORESTRY FOREST STEWARDSHIP PROGRAM APPLICATION

DOF USE ONLY	Tract No.:	Parcel:	Landowner Name:
	Submitted By:	SSN:	Name:
			Date Submitted:

The Virginia Forest Stewardship Program has been established to provide services that will meet the needs of the forest landowners. The Stewardship Program focuses on providing a customized forest management plan to meet your forestland ownership objectives. The information on this application will help the Forester develop a stewardship plan that meets your objectives.

LANDOWNER INFORMATION

Last Name: _____ First Name: _____ Mr. Mrs. Ms.

Mailing Address: _____

City: _____ State: _____ Zip: _____

SSN/FIN: _____

Telephone - Home: _____ Telephone - Work: _____

TRACT INFORMATION

1. County: _____
2. Tract Location: _____
3. Tract Name: _____
4. Total Tract Acres: _____
5. Acres of Forested Land: _____
6. Yes No Is this tract your primary residence? If No, how many days/year are spent on the tract? _____
7. Yes No Is this tract a Certified Tree Farm?
8. How long have you owned this forested land? 1 year 2-5 years 6-15 years 16 or more years
9. Yes No Have you ever harvested timber from this tract?
10. Yes No Do you own forest land in other Virginia counties?
If Yes, please list the counties and number of forested acres. _____
11. Yes No If you own other forested land, have you ever harvested timber from these tracts?
12. Yes No Have you ever received professional forestry advice about managing your forested lands?
If Yes, from whom? Private Consulting Foresters
(please check all that apply) Virginia Department of Forestry
 Industrial Landowner Assistance Program
 Other (please specify) _____
13. What did you receive professional forestry assistance for? (please check all reasons that apply)
 Preparing a Forest Management Plan
 Timber Sales or Harvesting (timber marking, sales assistance, timber valuation, etc.)
 Forest Stand Management (thinning, prescribed burn, pruning, herbicide application, etc.)
 Reforestation and Planting
 Wildlife Management
 Other (please specify) _____

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LANDOWNER OBJECTIVES

14. In the following list, please rank the five most important objectives you want to consider in your Stewardship Management Plan where number 1 indicates most important and number 5 is relatively less important.

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| <p>_____ Maintenance of a Scenic Forest</p> <p>_____ Wildlife for Hunting</p> <p>_____ Managing Timber for Income (to sell timber)</p> <p>_____ Forest Stand Management (maintain health of forest)</p> <p>_____ Non-Wildlife Related Outdoor Recreation
(Hiking, Non-Motorized Trail Biking, Horseback Riding, etc.)</p> | <p>_____ Wildlife Habitat</p> <p>_____ Real Estate Involvement</p> <p>_____ Protect Rare, Unique Natural Areas</p> <p>_____ Historical / Cultural Resources</p> <p>_____ Soil and Water Conservation</p> <p>_____ Other (please specify) _____</p> |
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15. If you are interested in managing for wildlife, please rank the species you are most interested in, where number 1 is the most important.

- | | |
|---|---|
| <p>_____ Deer / Turkey</p> <p>_____ Squirrel</p> <p>_____ Fish</p> <p>_____ Songbirds</p> <p>_____ Rare, Threatened or Endangered Species
(Plants or Animals)</p> | <p>_____ Rabbits</p> <p>_____ Bobwhite Quail</p> <p>_____ Water Fowl</p> <p>_____ Fur Bearers (Fox, Raccoon)</p> <p>_____ No Species Preference</p> <p>_____ Other (please specify) _____</p> |
|---|---|

To participate in the Forest Stewardship Program, forest landowners are encouraged to implement conservation practices as they are able, based on their objectives.

STEWARDSHIP PLEDGE

As a FOREST LANDOWNER, I BELIEVE the right to own land also carries the responsibility for stewardship of the natural resources in my care. I will work to implement conservation practices to produce a variety of benefits which may include scenic beauty, outdoor recreation, wildlife habitat, clean water, timber products and protection of the environmental and historical / cultural values for current and future generations.

I would like to have a Forest Stewardship Management Plan for my forested land that will meet my objectives and enhance the natural resources under my care.

I understand it is my option to have a Forest Stewardship Management Plan prepared by any of the following foresters who have completed a certified Virginia Forest Stewardship Training Course as approved by the State Forester. (Please check your preference for whom you would like to do this Stewardship Plan and sign application below).

- Virginia Department of Forestry Area Forester Forest Industry Forester Private Consulting Forester

LANDOWNER NAME (print)	LANDOWNER SIGNATURE	DATE
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THE FOREST STEWARDSHIP MANAGEMENT PLAN FOR THIS LANDOWNER WILL BE PREPARED BY:

FORESTER NAME (print)	FORESTER SIGNATURE	DATE
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AGENCY OR COMPANY	TELEPHONE NUMBER
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Return completed application to forester designated to prepare Stewardship Plan.