



Harvest Status Questionnaire

Landowner(s): Please complete and return this form to the Small Forest Landowner Office at the address below after completion of harvest in the area associated with the easement.

1. Please enter the Forest Practice Application Number(s) associated with the Forestry Riparian Easement:

FPA # _____ FPA # _____

FPA # _____ FPA # _____

2. Date Harvest was completed: _____

3. Statement of Small Forest Landowner:

All timber harvest activity for the FPA(s) listed above, as of the date entered above, is complete within the Forestry Riparian Easement area(s) or my FPA was disapproved because of restrictions under the Forest Practice rules.

Landowner Signature _____ Date _____

Print landowner name _____

For Office Use Only

Statement on behalf of WA State Dept. of Natural Resources:

On behalf of WA State Department of Natural Resources, and to the best of my knowledge, all state forest practices requirements have been met within the easement premises for the Forest Practices Application(s) listed above.

DNR Forest Practices Forester Signature _____

Date _____ Print name _____

**WA State Dept. of Natural Resources
Small Forest Landowner Office
PO Box 47012
Olympia, WA 98504-7012**