Certain activities associated with timber harvesting are a use permitted as of right pursuant to Section 22a-40(a) of the Connecticut General Statutes and Section 4.1 of the Inland Wetlands for the Town of Thompson. (For guidance see Connecticut Department of Environmental Protection’s document entitled “Agriculture, Forestry and Wetlands Protection in Connecticut”) This form constitutes the notification required by Section 4.4 of the Inland Wetlands and Watercourse Regulations of the Town of Thompson for such timber harvesting. Note: If the timber harvest covers multiple properties with different owners, then a separate request for approval must be filed for each of the different property owner(s).

**Property Information**

(Locate property boundaries on attached USGS topographic map and copy of assessor’s map – see information on maps on reverse side of this form.)

- **Landowner of Record:**
- **Mailing Address:**
- **Town:**
- **Phone:** ( )
- **E-mail:**
- **Total acreage of Property(s):**

<table>
<thead>
<tr>
<th>Assessor’s Ref.</th>
<th>Map</th>
<th>Block</th>
<th>Lot</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

Property boundaries are marked and can be viewed in the field

- **Yes**
- **No**

Have owners of all lands within 100 feet of the harvest area been notified via first-class mail

- **Yes**
- **No**

prior to filing this form?

**Harvest Information**

This timber harvest has been prepared by a State of Connecticut certified:

- **(Check one):**
  - [ ] Forester
  - [ ] Supervising Forest Products Harvester

<table>
<thead>
<tr>
<th>Forest Practitioner Certificate #:</th>
<th>Name:</th>
<th>Address:</th>
<th>E-mail:</th>
<th>Phone # (Business)</th>
<th>(Cell)</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Harvester (if not landowner):

- **Mailing Address:**
- **Town:**
- **Phone:** ( )
- **E-mail:**

Estimated starting date of timber harvesting operations: _____/_____/_____

Estimated completion date of harvesting operations: _____/_____/_____

Total acreage of harvest area: ______

Timber harvest boundaries are marked/flagged and can be viewed in the field

- **Yes**
- **No**

Designation of trees to be harvested

- **Trees to be harvested have been marked with paint at eye level and at ground level**

If marked, then paint marking color(s) are ______________________________________

Amount of forest products to be harvested:

- _______ Board feet
- _______ Cords
- _______ Cubic feet
- _______ Tons
Timber Harvest Objective:

Timber Harvest Treatment:

**Actions Being Performed on This Land**
(Check all that apply and locate on attached Harvest Area map – see information below on maps.)

<table>
<thead>
<tr>
<th>Crossings / Clearing</th>
<th>Erosion and Sedimentation Control Measures*</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Temporary stream/drainage crossing</td>
<td>□ Installation of water bars</td>
</tr>
<tr>
<td>□ Temporary wetlands crossing</td>
<td>□ Grading</td>
</tr>
<tr>
<td>□ Removal of trees in wetlands</td>
<td>□ Seeding</td>
</tr>
<tr>
<td>□ Removal of trees in upland review area</td>
<td>□ Other (describe below)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Log landing area:</th>
<th>Roads</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Anti-tracking pad</td>
<td>Are new roads, other than skid trails, to be</td>
</tr>
<tr>
<td>□ Curb cut</td>
<td>constructed for transport of logs or other</td>
</tr>
<tr>
<td></td>
<td>activities associated with this harvest?</td>
</tr>
</tbody>
</table>


Describe in further detail as necessary: _____________________________________________________________

The following maps are attached to this Request For Approval Of Timber Harvest (Check all that apply)

□ Copy of USGS topographic map with the property outlined
□ Copy of Assessor’s map with the property outlines
□ Timber Harvest Area map showing outline of harvest area, skid road locations, log landing area, truck access roads, inland wetlands, watercourses and any crossings drawn to scale

*The undersigned hereby swears that the information contained in this application is true, accurate and complete to the best of my (our) knowledge and belief and that the timber harvest will be conducted in accordance with the specifications outlined in this Request for Approval of Timber Harvest*

Signature of Landowner: ___________________________ Date: __________

Print / Type Name: _______________________________________________________________________________

Signature of Certified Forest Practitioner: ___________________________ Date: __________

Print Name: _______________________________________________________________________________________

Complete and Submit to: Office of the Thompson Inland Wetlands Commission, Thompson Town Hall, 815 Riverside Drive, N. Grosvenordale, CT 06255
A courtesy copy of this completed form should be sent to the Department of Environmental Protection, Division of Forestry, 79 Elm Street, Hartford, CT 06106-5127, Tel: (860)424-3630

*** For Commission Use Only ***

Agency or Agent's Response: ________________________________________________________________

IWC Chair or Agent Signature: ___________________________________________ Date: __________