

Forest Practices Application/Notification Renewal Form

For DNR Region Office Use Only					
FPA/N No.:					
Region:					
Date of Receipt:					

FPA/N Renewal Eligibility:

You may renew your current Forest Practices Application/Notification if:

- You are not proposing to modify the uncompleted operation.
- There are no outstanding enforcement actions associated with the application/notification.
- The current forest practices rules do not require a change in the nature and extent of the forest practices.
- You are within 60 days of expiration.
- The approved FPA/N was not previously renewed.

Submit the completed form with appropriate fees to the DNR region office that is responsible for the geographic areas of the operation. You can find a list of DNR region offices by visiting the DNR website at www.dnr.wa.gov and clicking on Regions.

Renewal requests must be received and accepted at the region office prior to the expiration date of your current forest practices application or notification.

pproved FPA/N No.:	Expiration Date of	Expiration Date of approved FPA/N:				
Landowner, Timber Owner and Operator						
Legal Name of Landowner	Legal Name of Timber Owner	Legal Name of Operator				
	□Same as Landowner	□Same as Landowner Mailing Address City, State, Zip Phone: Email:				
Mailing Address	Mailing Address					
City, State, Zip	City, State, Zip					
Phone:	Phone:					
Email:	Email:					
Contact Person:	Phone:					
	Email:					

	□ No □ Yes If yes, the approved FPA/N is not eligible for renewal and you must complete a new Forest Practice Application/Notification form.									
3. Are you a small forest landowner per RCW 76.09.450? See FPA/N instructions for details.										
	□ No □ Ye	s If no, skip	to Questic	on 5.						
4.	. Is entire proposed harvest on a single contiguous ownership consisting of one or more parcels? $\hfill\Box$ No $\hfill\Box$ Yes									
5.	What is the legal description of your forest practices?									
	Section	Township	Range	E/W	Tax Parcel Number	er	County			
6.		vledge the fo	_	on/notificati	on is true.					
	• I/We un	derstand this	proposed t	orest practi	ce is subject to:					
	0	The Forest Pra	actices Act	and Rules,	AND					
 All other federal, state or local regulations. 										
	•	ance with the last Act or other t			nd Rules does not ensure co aws.	mpliance with	the Endangered			
De	partment of I	Natural Reso	urces to e	nter the pro	submitting this FPA/N Reno operty in order to review the ee years after its expiration	e proposal, ir	spect harvest			
Signature of Legal Landowner			wner	Signature of Legal of Timber Owner* (if different than landowner)		Signature of Legal Operator (if different than landowner)				
Print Name:			P	Print Name:		Print Name:				

2. Are you proposing any modifications to the original approved forest practices?

*NOTE: if you are a "Perpetual Timber Rights Owner," and are submitting this without the landowner's signature, provide written evidence the landowner has been notified.

Date:

Date:

Date: