Rivers and Habitat Open Space Program

Application Form for Qualifying Channel Migration Zone Lands

Date Received	Application Number	Application Status
DNR staff will complete this box	DNR staff will complete this box	DNR staff will complete this box

General Instructions

Please read the document "Instructions for Completing the Rivers and Habitat Open Space Conservation Easement Application Form on Forest Lands Within Qualifying Channel Migration Zone Lands" before completing this form. The document, as well as Forest Practices Board Manual Section 18 *Rivers and Habitat Open Space Program*, can be used to help determine whether your property meets the eligibility criteria for the Rivers and Habitat Open Space Program. If unsure, please contact the Conservation Easement Program Manager for the Department of Natural Resources, Forest Practices Division, see contact information below.

Please provide complete and accurate information in this application to help DNR staff evaluate whether the proposed easement area may qualify for this program. This application must include the following items:

- Completed and signed application form found on the following pages
- Map(s) of the proposed qualifying Channel Migration Zone (CMZ) land(s) showing:
 - the approximate location of the unconfined CMZ
 - the property boundaries of the parcel(s) occupied by the CMZ
 - o locations of all roads and/or trails to access the CMZ.
- Any other documents required as indicated in the application.

Please send the completed application packet to:

Washington State Department of Natural Resources Forest Practices Division Rivers and Habitat Open Space Program P.O. Box 47012 Olympia, WA 98504-7012

Incomplete or illegible applications will not be accepted and will be returned to the applicant. If you have questions about eligibility, the application, or the ranking process, please contact the Forest Practices Conservation Easement Program Manager, KelliAnne Ricks at phone 360-480-9702 or e-mail: kellianne.ricks@dnr.wa.gov.

Information About Qualifying Land		
1.	Applicant name Legal name of owner(s) of the land in the application.	
2.	Applicant's Contact Information Mailing address, phone number(s), email address	
3.	Primary Contact Person Name and contact information for the land owners or a representative familiar with the proposed lands.	
4.	List Tax Parcel Identification Number(s) Include all parcels containing proposed lands, include county where the parcel is located.	Tax Parcel ID # County
5.	Verify Parcel Eligibility The parcels containing qualifying CMZ lands must be classified in county assessor's records as "forest land" under chapter 84.33 RCW or "current use timber land" under chapter 84.34 RCW.	Do all the tax parcels listed above meet the stated requirements for forest land as described in the box to the left? Yes, all parcels meet stated requirements. No, the following parcels do not meet all stated requirements:
6.	Estimated Acreage of the Project Note: this is only the acreage for the area within the proposed CMZ lands.	

7. Location of Land(s) by Legal Description	Section(s)	Township	Range	(East or West)
		1	1	1

La	ndowner's Intent and Valu	uation Information
8.	List of Other Interest Holders List all persons, banks, trusts, corporations or other entities having any rights or interests in the land(s) covered by this application (other than the applicant) and provide an accurate description of such rights or interests. (See Application Instructions for examples of typical rights or interests in property.)	Name #1:
9.	Readiness to Proceed Has every holder of a right or interest in the land(s) covered by the application been contacted by the applicant, and do they unanimously agree to encumber the lands covered by this application with a perpetual conservation easement?	Yes, all holders have been contacted and agree to proceed. No, not all holders have been contacted. Date anticipated when all holders will be contacted is: No, all holders have been contacted and not all agree to proceed.

10. Access Assurance Describe the legal access by which DNR can physically enter onto the proposed easement premises for assessment, acquisition, and compliance purposes only. If necessary, indicate the access easement(s) you desire to convey as part of this application. (Attach additional sheets of paper if necessary)	
11. Permission to Place Application on Waiting List Should DNR keep this application on file pending future funding availability, if adequate funding is not currently available to acquire this easement?	Yes, keep application on file for future funding. No, do not keep application on file.
12. Declaration of Hazardous Substances Are you aware of the presence of any hazardous substances, conditions or practices on the proposed lands?	No Yes if Yes, please describe:
13. Type of Interest to Convey What level of interest do you wish to convey as part of the conservation easement?	Interest in the trees only Interest in both the land and trees

Description of Land Values	
14. Importance to Salmon Describe the importance to salmonids of the land(s) you propose to convey.	
15. Water Quality Describe the water quality benefits of the land(s) you propose to convey.	
16. Habitat Quality Describe the quality of habitat found on the land(s) you propose to convey.	
17. Site Significance Describe any special significance of the area within your project.	
18. CMZ Designation Process Describe the methods you used to determine the land qualifies as an unconfined Channel Migration Zone. Attach any reports.	
19. Landowner Management Options Describe the likelihood of the site remaining viable over the long-term and why conserve now.	

State of Washington Department of Natural Resources

Certification and Signature
My signature below certifies that the information contained in this application or submitted in conjunction with this application is correct. I also certify that I own, am part owner, or have egal right to convey encumbrances to the property subject to the application. I understand he department reserves the right to reprioritize or deny applications based upon significant factual inaccuracies. I desire that this application be processed by DNR under the rules and procedures currently in effect for the Rivers and Habitat Open Space Program. I understand that this is a competitive program with limited funding and that my project ultimately may or may not be selected for participation in the program.
Applicant's signature Date