



For DNR Use Only	
App. #	
<input type="checkbox"/> Application in Prism	<input type="checkbox"/> Harvest data form
<input type="checkbox"/> Tracking form	<input type="checkbox"/> Welcome letter

**Family Forest Fish Passage Program
Application for FISH PASSAGE BARRIER EVALUATION**

The Family Forest Fish Passage Program assists small forest landowners to improve fish passage on their forestlands by removing artificial, or human created fish barrier. If you believe you may have a fish barrier and are interested in having the site evaluated, please complete this application. For a full explanation of this program, please refer to Family Forest Fish Passage Program Guidelines (<http://www.dnr.wa.gov/Publications/fpsfloffppguidelines.pdf>) or call (360) 902-1404 for assistance.

After your application is received, a field representative will contact you to set up a site visit and provide you with a detailed explanation of the program. If the site does not meet the program criteria, your enrollment will be automatically discontinued.

CONTACT INFORMATION

Landowner(s): _____

Company/Corporation Name: _____

Mailing address: _____; City: _____

State: _____; Zip Code: _____; Home/Business Phone: _____

Cell: _____; Email: _____

How did you find out about the program? _____

Landowner representative: _____; Phone: _____

Main contact for project: Landowner Landowner representative

SITE INFORMATION

Address: _____; City: _____

State: _____; Zip Code: _____ County: _____; Parcel number: _____

Legal Description: ¼ Section: _____; Section: _____; Township: _____; Range: _____

Forest Practices Application Number (if applicable): _____

Number of fish barriers you are applying for: _____

Name of stream: _____; Tributary of: _____

Do others have Right-of Way or Easement on crossing: _____; Are there utilities in the roadway: _____

Is there a cost share for the site: _____; Any known barriers upstream or downstream of the site: _____

Driving directions: _____

I certify that the information above is correct; and that I choose to enroll in the Family Forest Fish Passage Program and have my site evaluated for potential barrier/s.

Name: _____; Date: _____

Mail to:
Washington DNR; Small Forest Landowner Office; 1111 Washington St; MS 47012; Olympia, WA 98504-7012