

## WORCESTER COUNTY DEPARTMENT OF ENVIRONMENTAL PROGRAMS

One West Market Street, Suite 1306, Snow Hill, MD, 21863, 410-632-1220

## TIMBER HARVEST PERMIT

				Permit #	Rec. Date:	
				Permit fee:	C.A. fee:	
					Issue Date:	
PROPERTY INI	FORMATION					
Property Address:	:					
Tax Map:	Parcel:	Section:	Block:	Lot:	Tax ID #:	
Total Tract Area:		(Acres or Sq	. Ft.)	Harvest Area :	( Acres or Sq. Ft.)	
Description of Ac	tivity:					
OFFICE USE (	<u> </u>					
Atlantic/Chesapo	eake Bay Critical A	Area:	Desi	Designation:		
Forest Conserva	tion:					
Timber Harvest	Plan:		Expi	Expiration:		
SEC Approval:				Expi	Expiration:	
Other Approvals	3:					
for the purpose of hereby acknowled the presence of no Maryland Departr Timber Harvest P permits have be Owner/Applicant Federal, State or O Owner/Applicant, County permits n	f inspection and delges that this propon-tidal wetlands. ment of Natural R Permit is issued for en obtained, are understands that County law, regular. I assume all liablecessary to imple	etermination of compli- erty may contain soils, If such is the case, a pesources and those ago r County regulatory punecessary, or may this permit does not pution, construction, or to fility and responsibility ment this Timber Har	ance with the vegetation of permit may be dencies should be urposes only even be not presume to go the performancy to determit evest Permit	is permit. NON-TIDAL or hydrological condition he required from the U. So he contacted prior to it and does not indicate or ecessary. RESPONSIE ive authority to violate face of construction. OB ne, request and obtain a	went a right of entry onto this property WETLANDS. The Owner/Applicans which, in combination, may indicated. Army Corps of Engineers and/or the ditiation of construction activity. This imply that any such Federal or States of Engineers and or the or nullify the provisions of any othe FAINING OTHER PERMITS. As the large and accept that any construction of and sole risk.	
Property Owner:		A	ddress:			
Applicant:		Address				
Phone:	Er	nail:		Signature:		
ID #:						
Forester:		Ac	ldress:			
Phone:	Er	nail:	F	orester License #:		