

**APPLICATION FOR LOGGING PERMIT  
TOWN OF HILLSDALE, NEW YORK  
COUNTY OF COLUMBIA**

**Property Owners Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Street Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_  
**Telephone #** \_\_\_\_\_

**Tax map parcel id#:** \_\_\_\_\_ **Acreage:** \_\_\_\_\_

**Forest Management Planner**

**Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Telephone #;** \_\_\_\_\_  
**Qualifications:** \_\_\_\_\_

\_\_\_\_\_  
**Estimated Harvest Volume:** \_\_\_\_\_  
**Anticipated Dates of Harvest:** \_\_\_\_\_  
**Name of Individual or Company performing Timber**

**Harvest** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**Telephone #** \_\_\_\_\_

**Required Attachments:**

- |   |   |
|---|---|
| <input type="checkbox"/> Forest Management Plan   | <input type="checkbox"/> Map of Harvest Site      |
| <input type="checkbox"/> Topographic map*   | <input type="checkbox"/> Silvicultural Objectives |
| *(showing property and harvest area boundaries, haul and skid road layout, Planned Best Management Practices identified, landings located, and public road access identified) |   |
| <input type="checkbox"/> Copies of required permits from NYSDEC   |   |
| <input type="checkbox"/> Curb cut permit  | <input type="checkbox"/> \$100.00 fee payment     |

\_\_\_\_ The undersigned property owner certifies that this logging permit application is made for forestry management purposes only, and not for subdivision or development purposes. The applicant understands that the Town of Hillsdale will not subsequently approve any application for the subdivision or change of the use of the property which is the subject of the logging permit for a period of five years from the date of the permit.

\_\_\_\_\_  
Property Owner

\_\_\_\_\_  
Date

**Application Approved:**

\_\_\_\_\_  
Zoning Enforcement Officer

\_\_\_\_\_  
Date