



Mail to:
Division of Forestry
7 Players Club Dr.
Charleston, WV 25311

APPLICATION FOR CERTIFICATION AS MANAGED TIMBERLAND

THE UNDERSIGNED DOES HEREBY CERTIFY THAT, TO THEIR BEST KNOWLEDGE (BASED ON CURRENT INFORMATION), THE INFORMATION SHOWN WITHIN THIS APPLICATION IS A TRUE AND ACCURATE REPRESENTATION OF THE MANAGED TIMBERLAND ACREAGE AS DEFINED IN W.VA. CODE §11-1C-2-b AND §11-1C-10-d-1, THAT THE VARIOUS PARCELS ARE BEING MANAGED FOR MULTIPLE USE UNDER A MANAGEMENT PLAN THAT IS IN ACCORDANCE WITH THE BEST MANAGEMENT PRACTICES FOR FORESTRY AS OUTLINED IN THE WEST VIRGINIA FOREST PRACTICE STANDARDS AND THE BEST MANAGEMENT PRACTICES FOR WATER QUALITY AS OUTLINED IN THE WEST VIRGINIA NOPOINTSOURCE MANAGEMENT PROGRAM, ACCORDING TO A PLAN THAT WILL MAINTAIN THE PROPERTY AS MANAGED TIMBERLAND.

By* _____
Printed Name

By _____
Printed Name

Signature _____

Signature _____

Title _____

Title _____

Address _____

Address _____

Phone No. _____

Phone No. _____

Date _____

Date _____

Email _____

Email _____

STATE OF _____

COUNTY OF _____, TO WIT

THE FOREGOING APPLICATION FOR CERTIFICATION AS MANAGED TIMBERLAND WAS SIGNED BY _____, AND ACKNOWLEDGED BEFORE ME THIS _____ DAY OF _____, _____.

MY COMMISSION EXPIRES _____

NOTARY PUBLIC

(FOR DIVISION OF FORESTRY USE ONLY)

THE ABOVE APPLICATION AS MANAGED TIMBERLAND FOR THE PROPERTIES INDICATED ON THE REVERSE IS HEREBY APPROVED THIS _____ DAY OF _____

BY _____ OF THE WEST VIRGINIA DIVISION OF

AUTHORIZED SIGNATURE

FORESTRY.

* If there is more than one owner, then all owners must be listed unless one individual has power of attorney privilege or authority to sign on behalf of all others. Use additional sheets if needed

Privacy Notice:

The West Virginia Division of Forestry collects and processes certain personal information as needed for appropriate and customary business purposes. Personal information may be disclosed to other State agencies or third parties as necessary in the normal course of business or to comply with federal or state laws, including Freedom of Information Act requests. If you have questions about our use of personal information, please contact us at 304-558-2788.

TAX YEAR _____

PAGE _____ OF _____

PROPERTIES INVOLVED IN MANAGED TIMBERLAND

COUNTY _____

*OWNER(S) NAME(S) _____

District	Tax Map	Parcel Number	Sub-parcel Number	Managed Timberland Acreage	% of Ownership	+	Residual Acreage**	=	Total Parcel Acreage

(SHADED AREAS FOR OFFICE USE ONLY)

S:\Shared\Managed Timberland\Website Information\MT Application

*If there is more than one owner, then all owners must be listed and must sign on front unless one individual has power of attorney privilege or authority to sign on behalf of all others.

** RESIDUAL ACREAGE IS OTHER ACREAGE NOT INVOLVED IN TIMBER MANAGEMENT PROGRAM, SUCH AS: HOMESITE, PASTURE, TILLABLE, ETC. FOR THOSE PROPERTIES WHERE RESIDUAL ACREAGE IS LISTED, INFORMATION IDENTIFYING THE USE OF THE NON-MANAGED ACREAGE IS REQUIRED.

ALL OF THE ABOVE DATA CAN BE OBTAINED FROM INFORMATION AVAILABLE AT THE COUNTY ASSESSOR'S OFFICE

APPLICATIONS FOR CERTIFICATION MUST BE SUBMITTED TO THIS OFFICE BY SEPTEMBER 1.