

Renewal

Timbering License Processing Info Sheet

Valid for 2 years starting July 1, 2025

PLEASE ALLOW TWO WEEKS FOR PROCESSING

In order to renew a Timbering License, you will need the following:

1. The attached application completely filled out, signed and dated.
2. A current West Virginia Business Registration Number. An **8-digit number**. **You MUST list the number on application.** (Call Tax Department **304-558-3333** for questions)
3. Worker's Compensation coverage is required for those with employees.

If you have employees, a copy of your **Certificate of Insurance or Certificate of Liability** from a Worker's Compensation Insurance Company or Agent licensed in WV.

If you are from out of state and have permanent non-resident employees working in West Virginia temporarily working more than thirty (30) nonconsecutive days within a 365-day period or employees who live in West Virginia will need to obtain Workers' Compensation Insurance coverage from an insurer licensed in WV. If you have any questions regarding this, you can contact the WV Insurance Commission at **304-414-0539**.

4. **Letter of compliance- REQUIRED** from West Virginia Unemployment Compensation (Workforce WV). The letter required is signed by **Tim Strickland**. (Must be dated 4/1/2025 or after.) If you have questions or need a questionnaire, contact **304-558-2677**. Please make a copy of the original letter, it will not be returned.

Renewal - Without Employees - Complete the Questionnaire received from the Unemployment Compensation Division (Workforce WV), return it, and a Letter of Compliance will be sent once reviewed. It is not necessary to call to request this paperwork.

Renewal - With Employees contact **304-558-2451** to request compliance letter.

5. A check or money order for **\$150** made out to "WVDOF".

ALL INFORMATION REQUESTED MUST BE ATTACHED. IF YOU FAIL TO PROVIDE ANY OF THE INFORMATION REQUESTED YOUR APPLICATION WILL BE RETURNED WITHOUT BEING PROCESSED.

If you have questions regarding Timbering License application, call Robin Black (304) 352-4867.

Due to concerns with identity theft and since we require Social Security numbers on Timber License as verification, we are going to allow those individuals who are currently listed on the last Timber License just to list last four digits as verification.

Any new individuals added to your Timber License all 9 numbers must be listed.

When you provide a check as payment, you authorize the West Virginia State Treasurer's Office (WVSTO) either to use information from your check to make a one-time electronic fund transfer from your account, or to process the payment as an image transaction. For inquiries, please call the WVSTO at 1-866-243-9010.
When the WVSTO uses information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day you make your payment, and you will not receive your check back from your financial institution.

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 Robin Black at 304-558-2788

APPLICATION FOR RENEWAL OF TIMBERING LICENSE**West Virginia Division of Forestry**

(License Valid 2 years starting July 1)

Company Name: _____ Current Timber License No. _____
 Please print or type (USE BLUE INK)

Contact Person*: _____ Soc. Sec. # _____
 (*Must be owner, principal officeholder or other individual who has authority to operate under this license and must sign this form.)

Business Mailing Address: _____
 Street or Route and Box Number

_____ Town or City State Zip

Telephone _____ Email _____

Have you ever been licensed in any other name? If "yes," list: _____
 Name Year

Check the type(s) of operations the company will be performing:
 Timbering operation _____ Timber Buying _____ Log Buying * _____ (*For Log Buying please fill out page 2 as well.)

List current West Virginia Business Registration Account Number _____ (8 digits)

Pursuant to Section 7 of the Privacy Act of 1974, your disclosure of your social security number is mandatory. Social security numbers are required by us for identity purposes. Failure to provide a SSN will result in your application being returned as incomplete. We have authority to solicit your social security number because of W.Va. Code §§19-1B-4,5 and/or 6.

List the names, addresses, social security numbers & telephone numbers of the owner(s), partners and/or officers of said company.

List the names & telephone numbers of all persons who serve as timber buyers and/or log buyers.

For DOF Use Only

Check No. _____

Date: _____

Amount: _____

Date Approved: _____

Authorized signature _____

Date _____

Enclose a check for \$150 made payable to "WVDOF"
 Mail check and application to:

West Virginia Division of Forestry
Logging Program
7 Players Club Dr.
Charleston WV 25311
304-558-2788 Option 3

Locations of Log Yards

*Please list either the physical address or the Lat/Long coordinates of all places where you purchase logs.

Location	Physical Address or Lat/Long		
	Town or City	State	Zip
Location	Physical Address or Lat/Long		
	Town or City	State	Zip
Location	Physical Address or Lat/Long		
	Town or City	State	Zip
Location	Physical Address or Lat/Long		
	Town or City	State	Zip
Location	Physical Address or Lat/Long		
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