

# FOREST STEWARDSHIP PLAN PROGRAM APPLICATION

Application No. \_\_\_\_\_

<b>1) Name and Address of Applicant</b>  	<b>2) Type Applicant</b> Individual <input type="checkbox"/> *Joint Owner <input type="checkbox"/> Group <input type="checkbox"/> Association <input type="checkbox"/>	<b>3) Tract Name</b>  Lat. _____  Long. _____	<b>4) NCDNR District</b>  <b>6) Program Year</b>	<b>5) County</b>  <b>7) Soc. Sec./Tax No.</b>	<b>Distribution</b>  Pink: Final Payment - CO Blue: NCDNR District Office Green: CO for funding Yellow: Landowner
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PRACTICE NEEDED				PERFORMANCE REPORT				
8) Description of Practice	9) Plan Acres Needing Funding	10) Expected Prevailing Rate	14) Date Plan Submitted	15) Plan Acres Actually Completed	16) Final Prevailing Rate to be Used	17b) GIS Shapefile Bonus if Applicable (See Box 17a Below)	18) Total Cost Assistance to be Paid to Landowner (the sum of columns 16 & 17b)	19) NCDNR Forester: "I certify that the submitted Forest Stewardship Plan meets the minimum requirements of the Forest Stewardship Program."
Forest Stewardship Plan Development								

11. This certifies (a) I am an eligible landowner and understand this means a private individual, group or association owning non-industrial land suitable for forestry purposes. When forest land is owned jointly by tenants in common or another type of joint ownership, the joint owners shall be considered as one eligible landowner (only one tax form #1099 will be generated for jointly-owned tracts);

(b) I intend to carry out and maintain for ten years the recommendations outlined in my Forest Stewardship Plan. I understand I may be dropped from the Forest Stewardship Program if I do not utilize the appropriate/reasonable best management practices found in the Plan that are intended to result in forest conservation and natural resource protection on my property;

(c) I understand the cost assistance that I will likely receive is indicated by the prevailing rate in Column 10 above. However, I also understand that funds originally allotted to me may be modified to reflect the actual acres involved if fewer or greater acres are present in the final Forest Stewardship Plan (refer to prevailing rate structure in the box to the right); or if the submitted invoice is for an amount less than the original allotted amount.

(d) I agree this contract may be terminated if the Forest Stewardship Plan is not submitted to the NC Division of Forest Resources for approval within twelve months of the date when written cost assistance approval is given;

(e) I understand a GIS boundary shapefile is required for all Forest Stewardship Plans, and if my approved Forest Stewardship Plan writer or I provide a qualified (refer to DFR staff for clarification) GIS boundary shapefile, five percent (5%) will be added to the above-mentioned cost assistance figure; and

(f) I understand I am entitled to a maximum of three cost-assisted Forest Stewardship Plans during any one fiscal year (July 1 - June 30), whether it be as a sole or joint owner of a tract. This is with the understanding that the total combined maximum Stewardship Plan cost assistance any landowner can receive in a fiscal year is \$2,100. I do not yet have a Forest Stewardship Plan for the tract in question, and I understand that if I have a Forest Stewardship Plan written before receiving written approval to do so, I will be denied funding. I further understand that any statement certified by me or my Agent with Power-of-Attorney in this application and later found to be false will result in forfeiture of all cost assistance funds to which I am entitled and repayment of any funds received under terms of this agreement.

Plan Acres:	Prevailing rate for new Forest Stewardship Plans:
<b>10-50</b>	<b>\$500</b>
<b>51-100</b>	<b>\$750</b>
<b>101-200</b>	<b>\$1000</b>
<b>201-400</b>	<b>\$1250</b>
<b>401-600</b>	<b>\$1600</b>
<b>601-1000+</b>	<b>\$2100 (Max.)</b>

**17a) GIS Shapefile Provided By:**

(A) Approved Plan Writer or Landowner  
 (B) NCDNR Personnel or  
 (C) Other \_\_\_\_\_

If (A) is checked in box 17a (only when a qualified GIS shapefile has been provided) multiply value in column 16 by 5% and enter into column 17b above.

\_\_\_\_\_  
 Signature of Landowner or Company Representative and Title

\_\_\_\_\_  
 Date

13) I certify that the Forest Stewardship Plan and acres shown above is needed and practical on this tract.

\_\_\_\_\_  
 Signature of NCDNR Representative

\_\_\_\_\_  
 Date

12) As Agent with Power-of-Attorney for the owner shown in 1), I certify that this is an eligible landowner described above and said landowner agrees to the conditions of this program as stated in item 11.

\_\_\_\_\_  
 Signature of Agent

\_\_\_\_\_  
 Date

\*If joint ownership, identify other owners:  
 \_\_\_\_\_  
 \_\_\_\_\_

**Individual Ownership:** A single and clearly identifiable person.

**Joint ownership:** Two or more persons to carry on as co-owners. Joint owners are treated as one landowner and will receive one tax form 1099. Joint ownership must be clearly identifiable as a distinct entity and may consist of relatives owning property in common or a partnership in a business for profit.

**Association:** The act of a number of persons in uniting together for some special purpose of business.