

Logging Permit Application

□ Lump Sum Sale □ Per Unit Sale □ Owner Harvest		Date: / Approx. Comp. Date: Approx. Acreage Being Cu	/	/	
JOB SITE ADDRESS:		ZIP CODE:		SUITE:	
Job Description:					
Property Owner	Name: Address:				
	City:	State:	Zip:	Phone:	
Logging Company	Name:	Address:			
	City:	State:	Zip:	Phone:	
Company posting bond or	Name:	Addre	Address:		
letter of credit		State:	Zip:	Phone:	
I hereby certify that I have and examined this application and know the same to be true and correct. All provision of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating the logging industry. I hereby certify that I have received and read a copy of the Baldwin County timber harvesting and removal requirements.					
Signature of Applicant or Permittee:			***************************************	Date:	
Tax Assessors Office:				Date:	
Special Comments:					