

TIMBER MANAGEMENT PLAN

FOR USE WITH APPLICATION OR CONTINUANCE FOR DESIGNATED FOREST LAND, RCW 84.33

PARCEL(S): _____

OWNER(S): _____

ADDRESS: _____

LEGAL DESCRIPTION: _____

NUMBER OF ACRES: _____

DESCRIPTION OF CURRENT TIMBER: _____

PLANS FOR HARVEST AND RESTOCKING: _____

IS LAND IN COMPLIANCE WITH RESTOCKING, FOREST MANAGEMENT, FIRE PROTECTION AND
INSECT DISEASE CONTROL? ____ YES ____ NO

IS LAND USED FOR GRAZING? ____ YES ____ NO

As owner(s) or purchaser(s) of the land described in this plan, I hereby indicate by my signature
that I am aware of the potential tax liability involved when the land ceases to be designated
under the provisions of RCW 84.33.

OWNER SIGNATURE

DATE

OWNER SIGNATURE

DATE