

WOODLAND DATA FORM (WD-1)

MUNICIPALITY _____ COUNTY Warren
(File one copy for each municipality where woodland is located.)

SECTION I – IDENTIFICATION INFORMATION

Owner(s): _____ Phone: _____

Mailing Address: _____

Location of Property (nearest road etc.): _____

Block(s) and Lot(s): _____

Forestry Number: A- _____

If portions of the property are in more than one municipality, give the municipality and acreage in each. _____

How are property boundaries marked, i.e., fence, paint, blazes, etc. _____

SECTION II – WOODLAND MANAGEMENT INFORMATION

Woodland Management Plan prepared by: Warren County SCD

Date plan prepared: _____ Plan developed for years _____ to _____ Plan acres: _____

Status of Woodland Management Plan (check appropriate statement):

- This is a new application by new owner. Previous owner was: _____
- Revisions or new plan are being filed with this form.
- Plan previously filed continues to be followed.

***Note – A Woodland Management Plan must be submitted the first time this form is filed.**

SECTION III – FOREST MANAGEMENT PRACTICES COMPLETED DURING THE PAST YEAR

Practice	Acres	Products	Income	Practice	Acres	Comments
Timber Stand				Reforestation		
Improvement (TSI)				Natural Regeneration		
Commercial Harvest				Weed Control		
Firewood/Pulpwood				Insect Control		
Sawtimber/Veneer				Prescribed Burning		
Other Products				Site Preparation		

Comments or description of other activities: _____

SECTION IV – CERTIFICATION STATEMENT (Owner and Forester Must Sign)

I certify that the above property is actively devoted to an agriculture use and I am following the approved woodland management plan and program as evidenced by the forest management practices completed this year.

I certify that I have reviewed this woodland data form and the landowner is in compliance with the provisions of the filed woodland management plan. I hereby attest that the forest management practices as cited on this form have been completed.

Landowner Signature Date

Approved Forester (print):

Approved Forester Signature Date

File this Form (WD-1), Farmland Assessment Form (FA-1), and Scaled Activity Map with:

**LOCAL TAX ASSESSOR
AND
NEW JERSEY FOREST SERVICE
240 MAIN STREET, ROUTE 206 NORTH
ANDOVER, NJ 07821**