



## APPLICATION FOR A LICENSE TO CUT IN A CONTROLLED RECREATION AREA

*Mountain Resorts Branch  
Ministry of Tourism, Arts, Culture and Sport*

**DATE:**

**TYPE OF LICENCE APPLYING FOR:**

☐ Occupant License to Cut and Remove → ☐ Occupant license to Cut Only

or

☐ Forestry License to Cut

License to Occupy File # (Lands): \_\_\_\_\_

Volume Estimate \_\_\_\_\_ m<sup>3</sup>

Expected harvest start date: \_\_\_\_\_

Electronic Submission Framework (ESF) completed? ☐ Yes ☐ No

(If yes, provide License to Cut # and ESF ID #) LTC# \_\_\_\_\_ ESF ID# \_\_\_\_\_

ECAS submission done (if Full Appraisal): ECAS ID # \_\_\_\_\_

Harvesting will occur in: \_\_\_\_\_ Natural Resource District

Name of Resort/CRA/Municipality: \_\_\_\_\_

Specific Geographic Area of Mountain: \_\_\_\_\_

This application must include a color map (1:10,000 or 1:5,000) as well as an overview map (1:30,000). Map should be in digital format. The harvest plan map must clearly identify the proposed harvest area and the harvest plan ie) bladed trails, skid direction, landings, treatment units, riparian, MFZ, leave areas etc where applicable to clearly detail the plan. Please include a shapefile or KMZ/KML file of the area of interest with this application.

**Purpose of Timber Harvesting: (i.e. ski run development, maintenance, forest health, etc.)** \_\_\_\_\_

**Referrals:**

Has applicant referred Harvesting Plan to Applicable First Nation? ☐ Yes ☐ No.

If yes please detail FN referral information in the Consultation and First Nation section on page 8.

**Applicant Information:**

Applicant Name: _____	
Address (include postal code): _____	
Phone# _____	
Applicants Signature: _____	Date: _____
If applicant is a registered corporation, indicate corporation registration #: _____	



HARVEST PLAN						
<i>must be signed by a forest professional see page 9.</i>						
PROJECT ID:						
AREA						
VOLUME						
BEC/SUBZONE						
HARVEST SYSTEM	GROUND	CABLE	Steep Slope/Tethered	HOE CHUCK		
SILVICULTURE SYSTEM	CLEAR CUT	PARTIAL CUT				
TIMBER QUALITY AND CONSIDERATIONS						
FOREST TYPE	AREA (ha)	VOLUME/ha	HEIGHT(m)	PIECE SIZE (m3)	STEMS/HA	SLOPE
RATIONALE FOR BLOCK BOUNDARY						



Is the proposed cutting, modification or removal of trees, or site preparation, in an area that contains streams, lakes or wetlands?			
STREAM, LAKE, WETLAND ID	RRZ (m)	RMZ (m)	SPECIFICATIONS FOR RIPARIAN OR LAKESHORE MANAGEMENT AREAS
Are there temperature sensitive streams or direct tributaries to temperature sensitive streams within or adjacent to the proposed treatment area?			
Is road construction proposed in riparian management areas within the treatment area or an associated road permit (RP)?			
Will stream crossings be constructed within the proposed treatment area or a road permit road providing access to the treatment area?			
Is the proposed treatment in the RMZ of an S4, S5 or S6 stream that is directly			



tributary to an S1, S2 or S3 stream and the activity is likely to contribute significantly to the destabilization of the stream bank or the stream channel?	
Does the proposed treatment area contain water sources that are diverted for human consumption by a licensed waterworks?	
Does the proposed treatment include areas that are within 100 m of a licensed waterworks?	
Are any activities proposed within a fisheries sensitive watershed?	
Does the proposed treatment area include areas that are within a community watershed?	
Will this project require road construction or deactivation within a community watershed?	



Treatment Unit	Proposed Max. Soil Disturbance for Roadside Work Areas (%)	Proposed Max. Permanent Access Structures (%)	Comments
Do the proposed Permanent Access Structures exceed 7% of the total area?			
Does the proposed treatment area include areas where terrain stability is a concern?			
Does the proposed treatment plan prevent and mitigate sediment transport			
Does the proposed treatment area include a "targeted pine leading stand"?			



Does the proposed treatment area include areas within an Ungulate Winter Range?	
Does the proposed treatment area include any wildlife habitat areas (WHA)?	

Does the proposed treatment area include areas to which objectives for wildlife under FPPR section 7 apply?	
<b>MIGRATORY BIRD /ACTIVE NESTING</b>	
Does the proposed treatment overlap Migratory Bird nesting zones	

Does the proposed treatment area include areas to which objectives for landscape level biodiversity under FPPR section 9 apply?	
Are considerations for maintaining stand structure (wildlife trees, wildlife tree reserves, etc.), coarse woody debris, and maintaining tree and vegetation species composition incorporated into this prescription?	
<b>OGMA/OGDA</b>	



Does the proposed treatment area contain interpretive sites, recreation trails, recreation sites, recreation facilities that are of significant recreation value and are designated a resource feature?	
Is the proposed treatment within a scenic area?	
Are there any known archaeological sites or cultural heritage resources that are important to First Nations within the proposed area?	

Is the introduction and spread of invasive plants likely as a result of the proposed treatment?	
Are there natural range barriers within the proposed treatment area that are likely to be removed or rendered ineffective?	
Are there land use objectives (higher level plans or objectives under the <i>Land Act</i> ) that apply to the proposed treatment area or a Road Permit necessary to provide access to the treatment area?	
Do the proposed activities conflict with land use objectives (higher level plans or objectives under the <i>Land Act</i> )?	



OTHER CONSIDERATIONS AND REQUIREMENTS		
CONSULTATION – FIRST NATIONS		
FIRST NATION	CONCERNS IDENTIFIED AND MEASURES TO ADDRESS	
First Nations consultation complete?		
CONSULTATION – GENERAL COMMENTS		
OVERLAPPING TENURE (Forest, Range, Guide Outfitters, Trappers)		
Tenure Holder	Concerns	Measures proposed to address licensee's concerns
PRIVATE PROPERTY		
Does private property border the proposed treatment area?		
SAFETY		
Have any specific safety concerns been identified in or adjacent to the proposed treatment area?		
UTILITIES		
Are utilities located in or adjacent to the proposed treatment area? i.e. power lines, gas lines, etc.		





<b>ACCESS/HAUL ROUTE</b>			
Identify roads being utilized ie) MOTI/Resource roads			
<b>PERMITS/AGREEMENTS (Junction/SRMA)</b>			
<b>TRAFFIC CONTROL</b>			
Is traffic control required at any point during operations?			
<b>ASSESSMENTS</b>	Yes	No	*If required: assessments are to be completed by a qualified professional and submitted with the Harvest Plan or provide a plan for submission
Riparian			
Terrain			
Visuals			
Windthrow			
Forest Health			
Erosion and sediment control			

<b>RPF/RFT PRINTED NAME</b>	<b>RPF/RFT SIGNATURE and SEAL</b>
<b>DATE SIGNED</b>	
<input type="checkbox"/> I certify that the work described herein fulfils standards expected of a member of the Association of British Columbia Forest Professionals, and that I did personally supervise the work. <input type="checkbox"/> I certify that the work described herein fulfills the standards expected of a member of the Association of British Columbia Forest Professionals and that I did personally supervise the work <input type="checkbox"/> I certify that I have reviewed this document and, while I did not personally supervise the work described, I have determined that this work has been done to standards acceptable of a Registered Forest Professional	