NOTICE OF INTENT TO CUT, BURN, OR DESTROY TREES
BY OTHER MEANS, PURSUANT TO
THE REGION OF HAMILTON-WENTWORTH
WOODLAND CONSERVATION BY-LAW NO. R00-054

The landowner and contractor must complete this form and deliver it to the Planning Department of the City of Hamilton. A completed form must be received at least five (5) business days* before any trees are to be cut, burned or destroyed by other means. The purpose of this application is to inform the municipality of the extent and nature of cutting, burning or destruction of trees by other means, before it occurs.

1. What is the reason for tree removal? Please circle the reason(s).
   - silvicultural improvement
   - commercial timber harvest
   - firewood removal
   - wildlife habitat
   - other (please specify) _____________________________________________
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

2. What is the expected start date for cutting, burning or destruction of trees by other means?
   ______________________________________________________________

3. What is the expected finish date?
   ______________________________________________________________

4. What is the size of the woodland on your property where trees are to be cut, burned or destroyed by other means in acres (hectares)?
   ______________________________________________________________

5. What is the size of the harvest area in that woodland?
   ______________________________________________________________
6. **Landowner Information:**

Name: ______________________________________________________

Mailing Address: ______________________________________________

Street Address: _________________________________________________

Emergency # (911): _____________________________________________

Lot(s): ______________________ Concession(s):_____________________

Township: _____________________________________________________

City/Town: _________________________ Postal Code: ________________

Telephone: Home: (         ) ___________________
            Work: (         ) ___________________

Fax: (         ) ________________________

7. **Contractor Information:**

Contractor:_____________________________________________________

Mailing Address: ______________________________________________

Street Address: _________________________________________________

City/Town: _________________________ Postal Code: ________________

Telephone: Home: (         ) ___________________
            Work: (         ) ___________________

Fax: (         ) ________________________

Name of person in charge of tree destruction:

_____________________________________________________________
8. Who has marked the woodland for cutting?

Name: _______________________________________________________

Qualifications:__________________________________________________

Mailing Address:________________________________________________

Street Address: _________________________________________________

City/Town: _________________________ Postal Code:_______________

Telephone: (       ) __________________

Fax: (       ) __________________

9. Location of Woodland:

Lot: _______________________    Concession:_______________________

Former Township: _______________________________________________

Former Area Municipality (Example: Flamborough, Dundas, Ancaster, Hamilton, Glanbrook, Stoney Creek):____________________________

10. Using the attached blank sketch map (last page), show the location of your property in relation to nearby roads, the location of the woodland on your property, and the area in the woodland where trees are to be cut, burned or destroyed by other means.

11. Describe the type of forest management treatment you are proposing.

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

12. What is the residual basal area?
13. Complete the table below to describe the trees selected to be destroyed. Please refer to Schedule A in the by-law. If more space is needed, this list may be placed on the back of this form or attached to it.

<table>
<thead>
<tr>
<th>Tree Species</th>
<th>Number of Trees</th>
<th><strong>Range of Circumference OR Diameter at DBH (1.37 m)</strong></th>
<th>Condition of Trees</th>
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<td>Circumference (cm or inches)</td>
<td>Diameter (cm or inches)</td>
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</table>

I agree that operations will be conducted in accordance with the provisions of the Woodland Conservation By-law No. R00-054 of the Regional Municipality of Hamilton-Wentworth.

DATED at ___________________ this _____ day of ___________________, year of ______.

_____________________________ _______________ _______________  
Signature of Landowner  Signature of Contractor
When you have completed this application, please deliver, fax, or mail to:

Forest Conservation By-law Enforcement Officer  
City of Hamilton  
Licensing & Bylaw Services Division  
E-mail: MLETREES@hamilton.ca  
Fax: 905-546-2764

PLEASE NOTE:

* Excluding weekends and statutory holidays.  
** It is only necessary to enter a measurement for circumference or diameter, not both.

This information is collected pursuant to the Forestry Act and/or the Municipal Freedom of Information and Protection of Privacy Act and will be used for the sole purpose of administering this by-law including compiling and publishing summaries of woodland harvest.

If this application is signed by a person on behalf of the owner of the trees affected, the owner’s written authorization must accompany this application.

NOIC1-2004
Map of Woodlot

Assessment number for the property where trees are to be destroyed: