| **PROGRAM TIMBER HARVESTING PLAN** | | | |
| --- | --- | --- | --- |
| FOR ADMIN. USE ONLY | | **STATE OF CALIFORNIA** | FOR ADMIN. USE ONLY |
| 1.\_\_\_\_\_\_\_\_\_ | 8.\_\_\_\_\_\_\_\_\_\_ | **DEPARTMENT OF FORESTRY** |  |
| 2.\_\_\_\_\_\_\_\_\_ | 9.\_\_\_\_\_\_\_\_\_\_ | **AND FIRE PROTECTION** | **PTHP No**. ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_  **Date Rec’d**:\_\_\_\_\_\_\_\_\_\_\_ |
| 3. \_\_\_\_\_\_\_\_\_ | 10.\_\_\_\_\_\_\_\_\_ | RM-64 (06-2018) |
| 4\_\_\_\_\_\_\_\_\_\_ | 11.\_\_\_\_\_\_\_\_\_ |  | **Date Filed** \_\_\_\_\_\_\_\_\_\_\_\_ |
| 5.\_\_\_\_\_\_\_\_\_ | 12.\_\_\_\_\_\_\_\_\_ | Filed in accordance with | **Date Approved**\_\_\_\_\_\_\_\_ |
| 6.\_\_\_\_\_\_\_\_\_ | 13.\_\_\_\_\_\_\_\_\_ | **PROGRAM TIMBERLAND ENVIRONMENTAL IMPACT REPORT** | **Date Expires** \_\_\_\_\_\_\_\_\_\_ |
|  |  | Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Located at: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Extensions 1) [] 2) [] |

This Program Timber Harvesting Plan (PTHP) form, when properly completed, is designed to comply with the Forest Practice Act (FPA), Board of Forestry rules, and the above listed Program Timberland Environmental Impact Report (PTEIR). See separate instructions for information on completing this form. **NOTE: The form must be printed legibly in ink or typewritten, an online version is available at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.** The PTHP is composed of this form, required maps, completed checklist, required verifying documents and a confidential archaeological section, if required. If more space is necessary to answer a question, continue the answer in an attachment to the PTHP form. If writing an electronic version, insert additional space for your answer. Please distinguish answers from questions by *font change*, **bold** or underline.

This PTHP conforms to my/our plan and upon approval; I/we agree to conduct harvesting in accordance therewith. Consent is hereby given to the Director of Forestry and Fire Protection, and his or her agents and employees, to enter the premises to inspect timber operations for compliance with the Forest Practice Act, Forest Practice Rules and the PTEIR.

1. REGISTERED PROFESSIONAL FORESTER:

RPF Signature: Lic. No. Date

RPF Printed Name: Phone

Address City State Zip

Email:

1. LICENSED TIMBER OPERATOR(S):

(If unknown, so state. You must notify CDF of LTO prior to start of timber operations.)

Name: Lic. No. Phone

Address City State Zip

Email:

Signature:

**Note: The RPF must provide verification that the LTO has been briefed by the RPF or his/her supervised designee on the contents and operational requirements of the PTHP prior to the start of timber operations. Ref. Title 14 CCR 1092.09(k).**

1. TIMBERLAND OWNER(S) OF RECORD:

Name: Phone

Address City State Zip

Email:

Signature:

1. TIMBER OWNER(S) OF RECORD:

Name: Phone

Address City State Zip

Email:

Signature:

**NOTE: The Timber Owner is responsible for payment of a yield tax. Per State of California Revenue and Taxation Code sections 38104 and 38115. Timber Yield Tax information may be obtained at: Timber Tax Section, MIC: 60, California Department of Tax and Fee Administration, P.O. Box 942879, Sacramento, California 94279-0060. Phone 1-800-400-7115 OR 1-916-274-3330. For Timber Tax information, please see our website at:** [www.boe.ca.gov/proptaxes/timbertax.htm](http://www.boe.ca.gov/proptaxes/timbertax.htm)**.**

1. PLAN SUBMITTER(S): Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Submitter must be from the 2, 3, or 4 above. He/she must sign below per 14 CCR 1092.04(a))**

Address City State Zip

Email:

Signature:

1. ON-SITE CONTACT: Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List person to contact on-site who is responsible for the conduct of the operations. If unknown, so state; name must be provided for inclusion in the PTHP prior to start of timber operations.

Address City State Zip

Email:

Signature:

**ITEM #7 LOCATION OF TIMBER OPERATIONS**

| **a. Legal Description** | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| **Meridian** | **Township** | **Range** | **Section** | **Acreage** | **Assessor’s Parcel Number** | **County** |
| - |  |  |  |  |  |  |
| - |  |  |  |  |  |  |
| - |  |  |  |  |  |  |
| - |  |  |  |  |  |  |
|  |  |  | **TOTAL AC** |  |  |  |

NOTE: Total Acreage only includes the logging area

**FOREST DISTRICT:** (Note per 14 CCR 1092.01e PTHPs are limited to one Forest District)

| **b. Forest District** | | | |
| --- | --- | --- | --- |
| [] | COAST FOREST DISTRICT | [] | Tahoe Regional Planning Authority Jurisdiction |
| [] | Southern Sub District of the Coast Forest District | [] | A County with Special Regulations |
| [] | SOUTHERN FOREST DISTRICT | [] | Coastal Zone, no Special Treatment Area (STA) |
| [] | High use Sub District of the Southern Forest District | [] | STA(s):  Type:  Identify: |
| [] | NORTHERN FOREST DISTRICT | [] | Other: |

| **c. CALWATER PLANNING WATERSHED** | | |
| --- | --- | --- |
| Name | Watershed identification Number | CALWATER Version |
| - |  |  |
| - |  |  |
| - |  |  |

| **d. WATERSHED (ASP, 303D)** | | | |
| --- | --- | --- | --- |
| [] | ASP Watersheds | [] | Non ASP Watersheds |
| [] | Upstream of ASP Watersheds | [] | 303d Watersheds   * Reason listed: |
| [] | Exempt from ASP Watershed Rules   * Reason Exempt: |  |

| **e. USGS QUADRANGLE** | |
| --- | --- |
| Name | Date |
| - |  |
| - |  |
| - |  |

| **ITEM #8 Notice of Intent (NOI**) | |
| --- | --- |
| Per 14 CCR 1092.04(c) The RPF preparing the PTHP shall submit to the Director, with the PTHP, a Notice of Intent (NOI) to harvest timber if:   1. Any proposed boundary lies within 300 feet of any property not owned by the timberland owner, or 2. Plan amendments that change plan boundary so that new boundaries are within 300 feet of property not owned by the timberland owner. | |
| 1. []Yes [] No | Is a Notice of Intent necessary for this PTHP?  **If “YES” include the NOI with the PTHP as a separate form with the PTHP** |
| 1. []Yes [] No | I understand the NOI is to be posted prior to submitting the PTHP and I will post the NOI at the conspicuous location near the project location prior to submitting this proposed PTHP. |

| **ITEM #9 Prescribed Maintenance Period** | |
| --- | --- |
| 1. []Yes [] No | Will the Licensed Timber Operator be employed for the construction and maintenance of roads and landings during the conduct of timber operations?  If “NO” identify who will be responsible and provide a contact phone number. |
|  | Contact name: |
|  | Phone number: |
| 1. []Yes [] No | Will the Licensed Timber Operator be responsible for erosion control maintenance after timber operations have ceased and until a work completion report has been certified by the department?  If “NO” include a written agreement per 14 CCR 1050(c). Timberland Owner acknowledgement form contains the necessary information and can be included as the written agreement  **NOTE: Prescribed maintenance periods:**   * **Outside ASP watersheds maintenance period is one year but can be extended 3 years at the Departments discretion.** * **ASP watersheds the maintenance period is three years**   **Other activities such as stocking, that require the use of roads, crossings, or other features requiring erosion control shall be maintained during that activity even after the prescribed maintenance period has ended.** |
| 1. []Yes [] No | Is it anticipated timber operations will commence on the date of PTHP conformance as approved by the Department?  If “NO” provide an expected date of commencement of timber operations: DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. []Yes [] No | Is it anticipated timber operations will be completed within 5 years from the date of PTHP conformance?  If “NO” provide the expected date timber operations will be completed: DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**ITEM #10 – SILVICULTURE**

| 1. **-** Check the Silvicultural methods or treatments allowed by the Forest Practice Rules to be applied under this PTHP.  * If more than one method or treatment will be used identify the boundaries on a map for each * List the approximate acreage for each method identified. |
| --- |

| **a.** | **Evenaged** | | **ACRES** | **EVENAGED REGENERATION METHODS**  **(14 CCR § 913.1 [933.1, 953.1]) (All Districts)**  **NOTE: variation by District in (a)(4)(A) and (d)(3) Shelterwood Removal Step** |
| --- | --- | --- | --- | --- |
| [] | Clearcutting | |  |
| [] | Seed Tree | |  |
| [] | Seed Tree Seed Step | |  |
| [] | Seed Tree Removal Step | |  |
| [] | Shelterwood | |  |
| [] | Shelterwood Preparatory Step | |  |
| [] | Shelterwood Seed Step | |  |
| [] | Shelterwood Removal Step | |  |
|  | | **Un-evenaged** |  | **UNEVENAGED REGENERATION METHODS**  **(14 CCR § 913.2 [933.2, 953.2]) (All Districts)**  **NOTE: variation by District in (a)(2)(A)(1)** |
| [] | | Selection |  |
| [] | | Group Selection |  |
| [] | | Transition |  |
|  | | **Intermediate Treatments** |  | **INTERMEDIATE TREATEMENTS**  **(14 CCR §** **913.3 [933.3, 953.3])** |
| [] | | Commercial Thinning |  |
| [] | | Sanitation Salvage |  |
|  | | **Alternative** |  | **ALTERNATIVE PRESCRIPTIONS (ALL DISTRICTS)**  **(14 CCR §** **913.6 [933.6, 953.6])** |
| [] | | Alternative Prescription |  |
|  | | **Special Prescriptions** |  | **SPECIAL PRESCRIPTIONS**  **(14 CCR §** **913.4 [933.4, 953.4])**  RPF is required to include specific information when Restoration or Oak woodland management is selected. The FPR element forms are provided at the end. Indicate the specific acreage for each type of restoration or oak area on these forms. |
| [] | | Special Treatment Area Prescription |  |
| [] | | Rehabilitation of Understocked Area Prescription |  |
| [] | | Fuel Break / Defensible Space |  |
| [] | | Variable Retention |  |
| [] | | Restoration – Aspen, Meadow, & Wet Area |  |
| [] | | Ca. Black and Oregon White oak woodland Management |  |
|  | | **Non-regeneration** |  | **NON REGENERATION HARVESTING** |
| [] | | Conversion |  |
| [] | | Road Right-of-way |  |
| [] | | No Harvest |  |

| **TOTAL ACREAGE:** | **If acreage is different than acreage listed in the legal description provide explanation:** |
| --- | --- |
|  | - |

If Selection, Group Selection, Commercial Thinning, Sanitation Salvage or Alternative methods are selected the post-harvest stocking levels must be stated. If Site class varies then state the post-harvest stocking standard to be meet by each applicable Site Class.

NOTE: Location of boundaries of timber-site classes needed for the determination of stocking standards to be applied, down to 20-acres minimum or as specified in district rules shall be mapped per 14 CCR § 1092.09(l)(2)

| **b. POST-HARVEST STOCKING TO BE MEET AT THE COMPLETION OF OPERATIONS** | | |
| --- | --- | --- |
| **Silvicultural Prescription** | **Site Class**  **(I, II, III, IV, V)** | **Post-harvest stocking standard** |
| - |  |  |
| - |  |  |
| - |  |  |
| - |  |  |

**HARVESTING PRACTICES**

| **ITEM #11 YARDING SYSTEM AND EQUIPMENT TO BE USED** | | | | | |
| --- | --- | --- | --- | --- | --- |
|  | **GROUND BASED**  (Tractor, skidder, Forwarder) |  | **CABLE** |  | **OTHER (Special)** |
| [] | Tractor, including end/long lining | [] | Cable, ground lead | [] | Helicopter |
| [] | Rubber tire skidder, forwarder | [] | Cable, High lead | [] | Animal |
| [] | Feller buncher | [] | Cable, skyline | [] | Other (describe below) |
| [] | Shovel yarding |  |  |  |  |
| \*\* All Tractor operations restrictions apply to ground based equipment Reference 14 CCR 914.2 [934.2, 954.2] (All Districts) | | | | | |

**EROSION HAZARD RATING**

| **ITEM #12 EROSION HAZARD RATING (EHR)** | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| [] | LOW | [] | MODERATE | [] | HIGH | [] | EXTREME |
| **NOTE:**   * If more than one rating is checked, areas must be identified on a PTHP map down to 20 acres in size. * COASTAL DISTRICT with a High or extreme EHR(s) must be mapped to 10 acres. * If ratings checked do not match the EHR Worksheet clarify the discrepancy: | | | | | | | |
| **EHR rating discrepancy:** | | | | | | | |

**DOMESTIC WATER NOTIFICATIONS**

| **ITEM #13 DOMESTIC WATER NOTIFICATIONS** | |
| --- | --- |
| Per 14 CCR 1032.10 – The PTHP submitter shall provide notice by letter to all other landowners within 1,000 feet downstream of the PTHP boundary whose ownership adjoins or includes a Class I, II, or IV watercourse(s) which receives surface drainage from the proposed timber operations.  The notice shall request that the PTHP submitter be advised of surface domestic water use from the watercourse, within the PTHP or within 1,000 feet downstream of the PTHP boundary.  When required to notice by letter, publication shall also be given one time by the PTHP submitter in a newspaper of general circulation in the area affected by the proposed project.  Such letter and publication shall notify the adjoining party:   * of the proposed timber operation * describe its legal location * identify the name, if any, of the watercourse it may affect * request a response by the property owner within ten days of the post-marked date on the letter or the date of publication as appropriate   The RPF may propose, with justification and explanation, an exemption to such notification requirements, and the Director may agree.  Copies of either notice, proof of service and publication, and any responses shall be attached to the PTHP when submitted.  If domestic use is noted, the PTHP shall contain mitigations necessary to protect domestic water use.  **THE PTHP SHALL NOT BE SUBMITTED UNTIL TEN DAYS AFTER THE ABOVE NOTIFICATION(s) HAVE BEEN COMPLETED** | |
| 1. []Yes [] No | Are there any landowners with 1,000 feet downstream of the PTHP boundary whose ownership adjoins or includes a class I, II or IV watercourse(s) which receive surface drainage from the proposed timber operations?  **If YES, the requirement of 1092.07 apply. Proof of letter notification shall be included in PTHP.**  **If NO, notification exemption request below need not be answered.** |
| 1. []Yes [] No   []  []  [] | Is an exemption to the notification requirements requested? (check notification requesting to be exempted)  Letter  Newspaper  Both  **If YES, provide the explanation and justification for the exemption request in the PTHP.** |
| 1. []Yes [] No | Was any information received in response to domestic water notifications indicating domestic water supplies may be present within or downstream of the project area? |
| 1. []Yes [] No | If YES, are there any additional mitigation measures needed beyond that required by standard watercourse and Lake protection rules?  **If YES, provide the site-specific instruction to the LTO.** |

**ARCHAEOLOGICAL AND HISTORICAL**

| **ITEM #14 - ARCHAEOLOGICAL / HISTORICAL** | |
| --- | --- |
| **Per 14 CCR 1092.09(f)(1) & (2): A PTHP shall include contain**  **(1) A confidential Archaeological Addendum as defined in 895.1, if the PTHP covers 3.0 acres or more, OR,**  **(2) A statement by the RPF that the area covered by the PTHP has been surveyed in accord with current Forest Practice Rules, and a Confidential Archaeological Addendum was filed and approved as part of the PTEIR associated with the PTHP, or the area covered by the PTHP is less than 3.0 acres.** | |
| 1. []Yes [] No | Was a confidential archaeological addendum filed and approved as part of the PTEIR? |
| 1. []Yes [] No | Is the proposed PTHP area included and associated with the confidential archaeological addendum for the PTEIR?  **If “NO” complete question “c.” or “d.” below.**  **If “YES” then the RPF shall sign the statement below Per 14 CCR 1092.09(f)(2)**  The area covered by the PTHP has been surveyed in accordance with the current Forest Practice Rules, and a Confidential Archaeological Addendum was filled and approved as part of the PTEIR associated with the PTHP, or the area covered by the PTHP. |
| 1. []Yes [] No | Is the proposed PTHP area less than 3 acres?  **If “NO” complete question “d.” below** |
| 1. []Yes [] No | Is a confidential archaeological addendum as defined by 14 CCR 895.1 attached to this PTHP? |
| 1. []Yes [] No | Have any archaeological or historical sites been identified within the PTHP area?  **If “YES” provide instructions to the LTO specific to site protection.** |

**THREATENED OR ENDANGERED SPECIES**

| **ITEM #15 THREATENED / ENDANGERED PLANTS OR ANIMALS** | |
| --- | --- |
| **Per 14 CCR 1092.09(g): A PTHP shall contain a statement that no significant adverse impacts would occur to any threatened or endangered plant or animal species in the area of the PTHP or that if timber operations are being conducted in compliance with an accepted "no take" or authorized incidental "take" procedure, either of which has authorization or concurrence of a wildlife agency acting within its authority under state or federal endangered species acts for a listed species, the PTHP shall so state.** | |
| **a**. []Yes [] No | Will timber operations cause any significant adverse impacts to occur to any threatened or endangered plant or animal species in the area of the PTHP? |
| **b**. []Yes [] No  []  [] | Will timber operations be conducted in compliance with an accepted (check below if any apply)  "No take"  Authorized incidental "take" procedure  Which has authorization or concurrence of a wildlife agency acting within its authority under state or federal endangered species acts for listed species?  **If “YES” then describe the species and applicable permit procedure.** |

**NOTE: See the CDF Mass mailing, 07/02/1999, section on “CDF Guidelines for Species Surveys and Mitigation” to complete these questions.**

**OPERATIONAL PRACTICES AND UNIQUE AREAS OF OPERATIONS**

| **ITEM #16 UNIQUE AREAS OF OPERATION (SPECIAL PROVISIONS)** | |
| --- | --- |
| **Per 14 CCR 1092.09(i): The PTHP shall contain and identify any special provisions, if any, to protect any unique area within the area of timber operations.** | |
| 1. []Yes [] No | Have any “Unique Areas” within the PTHP area been identified requiring special provisions?  **If “YES” Please provide as instruction to the LTO the special provisions to be applied.** |

| **ITEM #17 OPERATION PRACTICES** | |
| --- | --- |
| **Per 14 CCR 1092.09(n): The PTHP shall contain a completed checklist from the certified PTEIR and shall be attached to the PTHP containing a listing of the practices which deviate from standard operational rules of the Board as presented in the PTEIR.** | |
| 1. []Yes [] No | Are there any operational practices that are deviations from the standard operational rules which **WERE REVIEWED** under the certified PTEIR?  **If “YES” the deviations and required practices must be listed in the attached checklist.** |
| **Per 14 CCR 1092.09(o): The PTHP shall contain an explanation and justification of any operational practices which are not specified in the certified PTEIR and which are allowed by the rules with explanation and justification.** | |
| 1. []Yes [] No | Are there any operational practice that are deviations from the standard operational rules which **WERE NOT REVIEWED** under the PTEIR but are allowed under the Forest Practice Rules with an explanation and justification?  **If “YES” provide a description, location, explanation and justification** (see table below) |

| **Standard operational Forest Practice Rules requiring explanation and justification** | | |
| --- | --- | --- |
| Location | Description | Explanation and Justification |
| - |  |  |
| - |  |  |
| - |  |  |

**RPF AND TIMBERLAND OWNER RESPONSIBILITIES**

| **ITEM #18 Responsibilities / Notifications** | |
| --- | --- |
| 1. []Yes [] No | RPF has notified the Plan Submitter, in writing, of their responsibilities pursuant to 14 CCR 11092.11 of the Forest Practice Act and Rules.  **Plan submitter acknowledgement form may be attached at the end of this section.** |
| 1. []Yes [] No | RPF has notified the timberland owner of their responsibilities for compliance with the Forest Practice Act and Rules and, where applicable, Board of Forestry rules, regarding site preparation, stocking, and maintenance of roads, landings, and erosion control facilities.  **Timberland owner acknowledgment forms may be attached at the end of this section.** |
| RPF has the following authority and responsibilities for preparation and administration of the PTHP and timber operations (including both work completed and work remaining to be done):  List any additional work the RPF is assuming responsibility for:  **RPF acknowledgment form may be attached at the end of this section.** | |
| Describe additional required work requiring an RPF, which the RPF submitting this proposed PTHP does not have the authority or responsibility to perform: | |

| **Registered Professional Foresters Certification:** | |
| --- | --- |
| [] | I certify that I, or my supervised designee, personally inspected the PTHP area and that the proposed timber operations are within the scope of the environmental analysis contained in the PTEIR and therefore will not result in any significant environmental impacts beyond those addressed in the PTEIR. |
| [] | There have been no physical environmental changes in the PTHP area that are so significant as to require any addendum or supplement to the PTEIR. |

DIRECTOR OF FORESTRY AND FIRE PROTECTION

This program Timber Harvesting Plan (PTHP) conforms to the rules and regulations of the Board of Forestry, the Forest Practice Act, and the PTEIR:

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature) (Date)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Printed Name) (Date)