TIMBER DEALER LICENSE APPLICATION



NEW LICENCE RENEWAL OF EXISTING LICENCE # SUPERVISING DISTRICT OFFICE Y		
APPLICANT NAME:		TOTAL -
BUSINESS NAME:		
MAILING ADDRESS:		
CITY/TOWN/COMM	UNITY:	POSTAL CODE:
PHONE: ()	PHONE (CEI	_L): ()
EMAIL ADDRESS:		
ADDRESS/LOCATION	I OF BUSINESS (WHERE WOOD IS STORED)	/PROCESSED):
WILL RAW FOREST P	RODUCTS BE STORED/PROCESSED AT THE	ABOVE LOCATION: YES NO
WHAT PRODUCTS DO	O YOU INTEND TO DEAL (LIST): LUMBER	G OTHER
	CES (CROWN AND/OR PRIVATE) DO YOU P AUCTION PRIVATE CROW	
	S MAY BE REQUIRED TO TRANSPORT RAW TIN LIP BOOKS FROM DISTRICT AND REGIONAL FO	IBER (SEE INSTRUCTIONS). ONLY THE APPLICANT RESTRY OFFICES UNLESS ANOTHER AGENT IS
	THORIZE ANOTHER PERSON(S) TO DO THIS ON SENTS ACTING ON YOUR BEHALF:	I YOUR BEHALF? YES NO NO
SIGNATURE OF APPL	ICANT	APPROVED BY
DATE		DATE
		t Act and Regulations. In signing this application I/wens and the requirements of the Director of Forestry.
FORESTRY OFFICE USE MRO #: DATE RECEIVED:	REVENUE CODE: 2-17-2 INTERIM RECEI AMOUNT RECE	PT #: