**FOREST MANAGEMENT PLAN**

**USE VALUE APPRAISAL**

**FOREST MANAGEMENT PLAN**

**FOR**

***(Landowner(s))***

***(Town)***

For the 10 years beginning April 1, (year)

PREPARED BY: *(plan preparer & company name)*

I (we) certify that my (our) forest land, exclusive of any housesite or other developed portion, is at least 25 acres in size and is under active long-term forest management for the purpose of growing and harvesting repeated forest crops in accordance with minimum acceptable standards for forest management. These management standards include following the practices outlined in the booklet *“Acceptable Management Practices for Maintaining Water Quality on Logging Jobs in Vermont”* in order to control stream siltation and soil erosion.

By signing below, I understand I am signing my forest management plan and by doing so I agree to manage according to the current approved plan.

(Printed Names, Signatures and Dates)

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Approved for Use Value Appraisal by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County Forester Date

**I. PROPERTY SUMMARY**

Name:

Address:

Town Where Land is Located:

Acreage / Grand List Description:

School Property Account Number (SPAN):

Orthophoto [Number, Series 5000 (NAD83 preferred), year]:

Biophysical Region:

**II. PARCEL RESOURCE INFORMATION**

* Soil and Water Resources:
* Recreation/Aesthetics (optional):
* Cultural Resources (optional):
* Wildlife Habitat (optional):

*(Use this version of Section III. for all stands managed for timber)*

**III. STAND DESCRIPTION & TREATMENT PLAN**

**EXISTING STAND DESCRIPTION**

Stand Number:       Acres:

Stand Cover Type:

Age Class Structure:

Site Class:       Site Index or Soil Series:

Significant Wildlife Habitat or Special Places and Sensitive Sites Description *(if applicable)*:

Stand History:

Stand Health *(include insects, disease, invasive plants, etc. & levels)*:

Sampling Method:

Sampling Date:       Number Points/Plots:       BAF/Plot Size:

Quadratic Mean Stand Diameter (inches):

Basal Area (ft2/acre):

Total:       Acceptable Growing Stock:       Unacceptable Growing Stock:

Regeneration Data:

**DESIRED FUTURE STAND CONDITION**

Long Range Silvicultural Objectives: **Even-age Management**

Present Stand Age:       Rotation Age:

*OR*

Long Range Silvicultural Objectives: **Uneven-age Management**

Cutting Cycle:       Diameter Objective for Principal Species:

**PLANNED TREATMENTS**

Treatment Year:

*(For Even-age Management Treatment)*

Treatment:

Residual Basal Area:       Species favored for retention and regeneration:

*OR*

*(For Uneven-age Management Treatment)*

Treatment: **Single Tree Selection Harvest**

Residual Basal Area:       Species favored for retention and regeneration:

Q Factor (optional) Current Q:       Target Q:

*AND/OR*

Diameter Distribution

|  |  |  |  |
| --- | --- | --- | --- |
| Diameter Range  (2-inch D. classes) | Current Total Basal Area (ft2/acre) | Current Acceptable Basal Area (ft2/acre) | Target Total Residual Basal Area (ft2/acre) |
| 6-10 inch |  |  |  |
| 12-14 inch |  |  |  |
| 16 inch plus |  |  |  |

*AND/OR*

Treatment: **Group Selection Harvest**

Species favored for retention and regeneration:

Regeneration Group Sizes:       Percent of stand in regeneration groups:

Residual Basal Area outside the groups:

Treatment and specifications for areas outside the regeneration groups:

*AND/OR*

*(For Crop Tree Release)*

Treatment: **Crop Tree Release**

Crop Trees/Acre:       Crop Trees Description:

*(Use this version of Section III. for stands not necessarily managed for timber)*

**III. STAND DESCRIPTION & TREATMENT PLAN**

Stand Number:       Acres:

UVA Category of Eligible Forest Land *(ex. ESTA: Riparian Area)*

**EXISTING STAND DESCRIPTION**

Stand Cover Type:

Age Class Structure:

Site Class:       Site Index or Soil Series:

Natural Community Type:

Ecologically Significant Feature(s) to be Protected:

Justification / Verification / Documentation for including this stand as an ESTA:

Stand Health *(include threats to the Ecologically Significant Feature)*:

Stand History:

**DESIRED FUTURE STAND CONDITION**

**PLANNED TREATMENTS**

Scheduled Protective/Conservation Treatments:

**Management Schedule**

*Management standards allow for carrying out prescribed activities within three years of the treatment year.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Treatment Year** | **Stand #** | **Management Activity** | **Silvicultural Guide or Tech. Reference,**  **Prescription # or Letter, if appropriate** |
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