

LOWER MILFORD TOWNSHIP
7607 Chestnut Hill Church Road
Coopersburg, PA 18036
Phone: (610) 967-4949 Fax: (610) 967-1013



TIMBER HARVEST **PERMIT APPLICATION**

1. PARCEL IDENTIFICATION

Property Address: _____ PIN: _____

Applicant Name: _____ Phone: _____

Applicant Address: _____

Forester Name: _____ Phone: _____

Forester Address: _____

Property Owner Name: _____ Phone: _____

Property Owner Address: _____

2. TRACT INFORMATION

Zoning District: _____ Lot Size: _____ Current Use: _____

Percent of Site Covered in Forest: _____ Area of Proposed Harvesting: _____

Area of Earth Disturbance: _____

Anticipated Start Date: _____ Anticipated Completion: _____

3. ADDITIONAL INFORMATION TO BE SUBMITTED

- Three (3) copies of site plans, prepared in accordance with Article XII, Section 31 of the 2009 Zoning Ordinance
- Certificate of Insurance for Workman's Compensation for Forester
- Application Fee, according to current fee schedule
- Professional Service Agreement
- Site Restoration Agreement
- Township Driveway Permit Application (if applicable)
- A minimum of 45 days prior to commencement of harvesting operations, approvals from any other regulating agency (ie: PennDOT, Lehigh County Conservation District, etc)

NOTE: Submission of this application grants authorized representatives from Lower Milford Township access to this property at any reasonable time to inspect the proposed structure contained in this application.

Date: _____ Signature of Applicant: _____

Date: _____ Signature of Property Owner: _____

FOR OFFICE USE ONLY:

Date Received: _____ Permit Number: _____ Application Number: _____

Total Fees: _____ Receipt Number: _____ Check Number: _____

Date Issued/Denied: _____ Permit Issued/Denied By: _____