

NOTICE OF TIMBER CUTTING

Notice will expire on December 31st in the year of filing

Date: _____

To: Oconto County Clerk - 301 Washington St., Oconto, WI 54153

Form also be emailed to kim.pytleski@co.oconto.wi.us or faxed to 920-834-6805

Notice is hereby given, pursuant to Section 26.03 of the Wisconsin Statutes, of intent to harvest raw forest products from the following described land(s):

Town of _____:

(REQUIRED)

Description	Section	Township	Range	Parcel ID Number (PIN)

Indicate Approximate Area of Cutting

On Section Map: (also include nearest road)

*each square = 40 acres

NWNW	NENW	NWNE	NENE
SWNW	SENW	SWNE	SENE
NWSW	NESW	NWSE	NESE
SWSW	SESW	SWSE	SESE

Type of Cutting:

___ Logs

___ Pulp

___ Firewood for sale

___ Christmas Trees

___ Other: _____

Remarks: _____

Submitted by: Cutter: _____ Land Owner: _____ Other: _____

Land Owner:

Name: _____

Address: _____

Phone: _____

Cutting Agent:

Name: _____

Address: _____

Phone: _____

***If the filing party is anyone other than the Land Owner, a copy of the CURRENT YEARS CONTRACT to harvest timber must accompany the cutting application.**

*Signature of Filing Party: _____ Date: _____

County Clerk: _____ Date: _____

Taxes Checked by Treasurer: _____ Date: _____

Tax Status: Current: _____ Delinquent: _____

Tax Assessment: Woodland: MFL FCL

Copies: Town Chairperson: _____

DNR Forester: _____