MISSISSIPPI FOREST STEWARDSHIP

CERTIFICATION FORM

Property Information

County Name _____ 40# _____ Section _____ Township _____ Range _____

Additional property information:

Total acres to be certified _____ | Ownership Category: Private _____ State/Public _____ (Attach Demonstration Plan)

Landowner Information

First Name _____ Last Name _____

Agency/Business Name _____

In Care Of _____

Address _____

City _____ State _____ Zip Code _____

Phone (_____) _____-_____ E-mail _____

Enter additional landowners on supplemental form

Name(s) as they are to appear on certificate(s):

Number of certificates to print _____ Special instructions _____

Nominated By

First Name _____ Last Name _____

Agency/Business Name _____

In Care Of _____

Address _____

City _____ State _____ Zip Code _____

Phone (_____) _____-_____ E-mail _____

Certification Criteria

Does landowner have a current 10-year forest mgt. plan that includes all required Stewardship plan components?

Y _____ N _____ If yes, list years covered by plan _____ - _____

Does forest management plan cover all forested acres in this contiguous ownership block? Y _____ N _____

Landowner Objectives: *(Insert appropriate objective #)*

Primary _____Secondary _____Other _____

1. Timber Production
2. Wildlife
3. Recreation
4. Aesthetics
5. Environmental Education
6. Ecological/Site Restoration
7. Water Quality
8. Air Quality

Description of Forest Stewardship accomplishments within last five (5) years:

Has landowner carried out management activities in accordance with the spirit of Forest Stewardship? Y ___ N ___

Recommendation

I certify that this property meets the requirements for:

Certification _____ Recertification _____

Decertification *(select reason(s))*

_____ Fails to meet minimum criteria

_____ Landowner requests removal

_____ Property sold

_____ Death of landowner

_____ Other(explain) _____

Certification transferred? Y _____ N _____ If yes, provide name of original/new owner _____

Remarks:

MISSISSIPPI FOREST STEWARDSHIP

SUPPLEMENTAL FORM

Property Information

County Name _____ 40# _____ Section _____ Township _____ Range _____

Landowner Information

First Name _____ Last Name _____
Agency/Business Name _____
In Care Of _____
Address _____
City _____ State _____ Zip Code _____
Phone ( ) _____ E-mail _____

Landowner Information

First Name _____ Last Name _____
Agency/Business Name _____
In Care Of _____
Address _____
City _____ State _____ Zip Code _____
Phone ( ) _____ E-mail _____

Landowner Information

First Name _____ Last Name _____
Agency/Business Name _____
In Care Of _____
Address _____
City _____ State _____ Zip Code _____
Phone ( ) _____ E-mail _____

Landowner Information

First Name _____ Last Name _____
Agency/Business Name _____
In Care Of _____
Address _____
City _____ State _____ Zip Code _____
Phone ( ) _____ E-mail _____

Landowner Information

First Name _____ Last Name _____
Agency/Business Name _____
In Care Of _____
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