## APPLICATION FOR PERMIT FOR TIMBER OPERATIONS IN PIERCE COUNTY

	Date	
1 Name of Timber Applie	oont/Durchasar/Onar	atow
Address:	and Purchaser/Opera	ator:
Telephone Number		
1	Business	Mobile/Cell Fax
	is not the Timber Ha	arvester, provide the following regarding the
Timber Harvester:		
Name:		Address:
Telephone No :		-
Telephone No.:  Business		Mobile/Cell
Address:		
4. Property Location:	·	
Tax Map & Parcel:		
<ol><li>Roads upon which timb</li></ol>	er and equipment w	rill be transported in the County:
County Road Name(s):		
State/Federal Road Nar	ne(s):	
6. Expected Date Cutting	Will Begin:	Expected Ending Date:
7. Type of Harvest: Lump	Owner Harvest	
day of If a Corporation Limited Liability Company or Parti	-or- nership:	n contained herein is true and correct this  If an individual
Name:		G: CA 1:
By:		Signature of Applicant
Title:		
Blackshear, GA 31516, 0: ************************************	r fax to (912) 449-80 ********** *************************	of Tax Assessors, 312 Nichols Street 071 or e-mail to bill.rozier@piercecountyga.gov ***************** ATIONS: PERMIT NO.: and Applicant is authorized to conduct the n above.
This day	of	
ims day	O1	<del></del> -
		<b>Chief Tax Appraiser, Pierce County</b>
Pierce County Board of Tax Assessors		or Designee
P O Box 589		
Blackshear, GA 31516	_	
Telephone: (912)449-202	5	Permit Expires