

City of Fort Payne
<i>Department of Inspections and Zoning</i>
100 Alabama Avenue NW
Fort Payne, AL 35967
256-845-5180/Fax 256-845-5157
Email: inspections@fortpayne.org

Permit: _____

Date: _____

Logging Permit Application

Logging Company		Property Owner	
Name:		Name:	
Address:		Address	
City:		City:	
State:	Zip:	State:	Zip:
Phone:		Phone:	
Cell:		Cell:	
Email:		Email:	

Address of proposed logging:

Parcel Numbers and acres in each:	

Total Acres to be clear cut:	Total Acres to be select cut:
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Plat and Legal description provided: <input type="checkbox"/>	Proof of Trucking Liability: <input type="checkbox"/>
Proof of General Liability: <input type="checkbox"/>	Proof of PLM certified: <input type="checkbox"/>
Forester Inspections: <input type="checkbox"/>	

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Part 2 of 2

Amount of Road Bond Received:

**Contact Tim Williams, Director of
Public Works, for ingress/egress
inspection PRIOR to any activity at the
site.**

256-630-5058

Applicant Name: _____

Applicant Signature: _____

Date: _____