

2020 Forest Stewardship Plan Application

Hubbard SWCD

Please return completed form to: *Please see letter enclosed with application and forward application to*

Hubbard SWCD, 603 Central Ave. N, suite 100, Park Rapids MN 56470; 218-732-0121 ext.4

| Applicant Name | | | Home Phone | Cell | Cell Phone | |
|--|--|---|--|--|---|--|
| Email addre | ess | | | | | |
| Mailing Add | dress (Street or E | Box, City, Stat | e, Zip Code) | | | |
| hereby appi | y for a Forest St | ewardship pla | an for the following land(s) tha | it I own <u>within Hubb</u> | pard County: | |
| Section | Township # | Range | Township Name | Estimated To Acres | otal Estimated Wooded Acres | |
| | | | | | | |
| | | | | | | |
| _ | iption of lots or f | - | • | | | |
| Please comp | | re Contract ar | wn) nd Practice Certification Form i River Headwaters Watershed | | re within a watershed Watershed | |
| Please comp | plete a Cost Shar | re Contract ar | nd Practice Certification Form | | | |
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~ January 1, 2020 ~