

NEMLC

Harvest Integrity System



**A Harvest Planning Tool Provided by the Northeast Master Logger
Certification Program of the Trust to Conserve Northeast Forestlands**



Harvesting Company

Landowner or agent

Date



Master Logger Harvest Plan

Not Sufficient for Category II or III Clearcuts

Date _____
Harvest ID _____

Preparer of Harvest Plan

Name: _____ Occupation: _____ ID#: _____
Address: _____
Telephone #: _____ Fax #: _____ email: _____

Logging Company Information¹

Name: _____ NEMLC #: _____
Address: _____
Telephone #: _____ Fax #: _____ E-mail: _____

Landowner: Agent:

Name: _____
Address: _____
Telephone #: _____ Fax #: _____ email: _____

Landowner Category

Private
 Industry
 State/Fed
 Municipal

Property Information:

Location/Landmark: _____
Town: _____ County: _____
Acreage of: Parcel _____ Harvest Area: _____
GPS of Main Landing: Datum: _____ (default = NAD 83)
Latitude _____ Longitude: _____

Certified Under

FSC
 SFI
 Tree Farm
 Other

Forester Information¹

Name: _____ License #: _____
Address: _____
Telephone #: _____ Fax #: _____ E-mail: _____

Certified Under

FSC
 SAF
 Other

Trucker Information¹

Name: _____ MLC #: _____
Address: _____
Telephone #: _____ Fax #: _____ E-mail: _____

Abutting Neighbors¹

Name: _____ Address: _____ Telephone: _____
Name: _____ Address: _____ Telephone: _____
Name: _____ Address: _____ Telephone: _____

Written **management** plan developed? Yes No If yes, please record the following authorship info.

(required for land certification)

Name: _____

Telephone #: _____ E-mail: _____ Date of Plan: _____

Written **harvest plan** developed by: forester landowner logger other none don't know

(required for land certification)

Name: _____

Telephone #: _____ E-mail: _____ Date of Plan: _____

Landowner Objectives (*e.g. acreage to be harvested, volume to be harvested, desired future condition, special sites, etc.*)

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.



Pre- Harvest Checks

Date _____
Harvest ID _____

Contract signed with landowner boundary lines within 200' of harvest site are clearly visible **Insurance coverage provided to landowner:**
 General Liability Workers comp. or predetermination

property ownership established: harvest notification on landing: **date of harvest** _____ **through** _____

forester involved in harvest yes no
 abutting landowner(s) notified¹ yes no local forester ordinances in town: yes no

written forest mgt. plan: read discussed with landowner/agent **walk site with:** landowner/agent forester other
written harvest mgt. plan: read discussed with landowner/agent **harvest area outlined:** on map on ground

water bodies affecting harvest: brooks/streams rivers lakes/ponds wetlands vernal pools none
permits necessary: yes no **variances necessary:** yes no

sensitive areas affecting harvest: special fauna special flora special habitat special cultural/archeological area none
permits necessary: yes no **variances necessary:** yes no

other forestry activities to be performed: _____	clear cut	yes <input type="checkbox"/>	no <input type="checkbox"/>	Size < 5 acres 5-20 acres: Cat. I 21-75 acres: Cat. II 76-250 acres: Cat. III
_____	partial cut	yes <input type="checkbox"/>	no <input type="checkbox"/>	
_____	forester designates timber	yes <input type="checkbox"/>	no <input type="checkbox"/>	
_____	retain vigorous trees	yes <input type="checkbox"/>	no <input type="checkbox"/>	
_____	retain wildlife trees	yes <input type="checkbox"/>	no <input type="checkbox"/>	
_____	retain course woody material	yes <input type="checkbox"/>	no <input type="checkbox"/>	
	FPA regulations met	yes <input type="checkbox"/>	no <input type="checkbox"/>	

Permits obtained: ² _____ buffers on water bodies identified: ² _____ list other legal restrictions: _____
 (list permits) _____ buffers on special areas identified: ² _____
 _____ areas of visual mgt. identified: ² _____

Harvest system: cut to length feller buncher skidder farm tractor animals other

Truck road construction necessary: stream crossing necessary: new landing necessary: new skid trails necessary:

Describe harvest in general terms (use separate sheet if necessary: see also map on pg. 3)

Other considerations not covered here on attached sheet:
 1. It is good business practice and good advertisement to notify abutting landowners about forestry activities
 2 Please initial and/or date when activity is completed

Please initial copy of this page and send to landowner when harvest starts.



Post Harvest Checks

Date _____

Harvest ID _____

Close-Outs¹

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> all designated trees cut | <input type="checkbox"/> integrity of no-cut zones checked | <input type="checkbox"/> BMPs on trails met | <input type="checkbox"/> scale slips to landowner/agent |
| <input type="checkbox"/> all hazard trees cut | <input type="checkbox"/> integrity of buffer zones checked | <input type="checkbox"/> BMPs on roads checked | <input type="checkbox"/> all payments made |
| <input type="checkbox"/> brush rubbing on tree trunks cut | <input type="checkbox"/> integrity of wildlife areas checked | <input type="checkbox"/> BMPs at water crossings checked | <input type="checkbox"/> harvest report to MFS |
| <input type="checkbox"/> regeneration of clearcuts | <input type="checkbox"/> integrity of special areas | <input type="checkbox"/> BMPs at landings checked | <input type="checkbox"/> persons named for long-term checks |
| <input type="checkbox"/> slash >25' of boundaries | <input type="checkbox"/> excessive flagging removed | | |
| <input type="checkbox"/> cleanup of landing | <input type="checkbox"/> aesthetic specs met | | |

Long-Term Responsibility

Name and Contact Information

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

Master Logger Representative
Guaranteeing the accuracy of all information

Date

Landowner/ Agent
Having read and understood the check sheets

Date

¹Please name the person(s) responsible for long-term checks if other than logging professional