



MUNICIPALITÉ DE LA PÊCHE

1, Route Principale Ouest

La Pêche (Québec)

J0X 2W0

Phone:(819) 456-2161

Fax:(819) 456-4534

Request started on:

Request Completed on:

Re

Entered by:

Permit Type:

**Cert. autorisation - Coupe d'arbres (comm.)**

Nature:

## Identification

### Owner

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_

### Applicant

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_

## Location

Roll No.: \_\_\_\_\_

Address: \_\_\_\_\_

Zone: \_\_\_\_\_

Distinct P. of Land:

Zoning Code: \_\_\_\_\_

Inspection Sector: \_\_\_\_\_

Service: \_\_\_\_\_

Cadastre: \_\_\_\_\_

Use Co

Projecte

Frontage

Depth:

Area:

Number

Year of

Number

Floor Ar

Number

## Work

### Performer of the works

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_

### Responsible Person

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Work Starting Date: \_\_\_\_\_

**Cert. autorisation - Coupe d'arbres (comm.)**

Cutting Type:

Cutting Area:

Location Plan of the Cutting Area:

Stumpage Fee:

**Further Description(s)**

**Forest Stands (Treated Area) :**

- |  |                                      |  |
|--|--------------------------------------|--|
| <input type="checkbox"/> Deciduous<br>(Hardwood) | <input type="checkbox"/> Softwood    | <input type="checkbox"/> Mixed                       |
| <input type="checkbox"/> Poplar (Aspen)          | <input type="checkbox"/> White Birch | <input type="checkbox"/> Poplar-Birch White-Softwood |

**Exceptional Measures (Stand damaged by) :**

- |                               |                                  |                                |
|-------------------------------|----------------------------------|--------------------------------|
| <input type="checkbox"/> Fire | <input type="checkbox"/> Insects | <input type="checkbox"/> Other |
| <input type="checkbox"/> Wind | _____                            |                                |

**Particular Restriction(s)**

\_\_\_\_\_

**Work Description**

**Applicant's Signature**

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_