



Activity Inspection Form (CFWC-FM-10)

Use this form for reporting one or more harvesting, silvicultural, infra-structure or management activities, on-going or final. **Use a separate form for each activity.**

1. **Group Member Name:** _____ **Cert. #:** _____

2. **Who is Inspecting:** ___ Group Member ___ Cooperating Forester name: _____

3. **Date:** _____

4. **Stand/Tract Name:** _____

5. **Activity or Activities being inspected (please \checkmark all that apply):**

- Timber Harvest
 - Silvicultural Operation - non-harvest
 - Non-silvicultural Operation (ex. infra-structure)
- Describe harvest or operation: _____

6. _____ **On-Going Activity**
 _____ **Final Inspection**

CHECK and PROVIDE INFORMATION FOR ALL THAT APPLY

TIMBER HARVEST

7. **BMP use** - Must have a copy of BMPs guidelines were used. **NOTE:** appropriate monitoring documentation, state/industry inspection form or self-inspection form (example: **CFWC-FM-8 "Harvest BMP Evaluation Form"**) is required to be kept and available for audit.

- a. use of _____ state BMPs and/or FSC SMZs
- b. (check one) ___ adequate ___ partial compliance with harvest BMPs required at time of inspection
 If partial - indicate practices needed: _____

8. **Contract Provisions** (check all that apply)

- a. ___ adequate ___ partial adherence to timber marking or cutting guidelines
- b. ___ adequate ___ partial adherence to boundaries
- c. ___ adequate ___ partial adherence to other contract stipulations (weather, retention, etc.)

If partial was checked on any item in C then describe practices needed or used to address issue:

d. **Changes:** If there were any changes were made in contract or harvest/sale agreement describe here:

9. Check All That Apply as ADEQUATELY or PARTIALLY meeting objectives in forest management plan and/or stand or prescription goals.

a. Retention Goals ___ adequate ___ partial Check all retention types that apply SMZ

- residual trees in harvested area trees in drainage channels trees in non-merchantable areas
 other - describe: _____

b. Regeneration Goals – condition will result in or has resulted in appropriate regeneration (ex. enough residual stand removed to encourage regeneration in appropriate places, advance regen. or seed present).

___ natural ___ artificial ___ combination

___ adequate ___ partial

If partial describe issue: _____

c. Residual Stand Goals ___ adequate ___ partial (residual trees meet desired conditions)

If partial describe issue: _____

d. Special Site Protection ___ adequate ___ partial ___ not applicable

If partial describe issue: _____

SILVICULTURAL OPERATION – non-harvest

10.a. Operation Type (check all that apply) mechanical chemical site preparation mid-story
 crop tree release thinning invasive removal prescribe burn other

describe operation: _____

b. Prescription adequately detailed in (check one): ___ FM Plan ___ stand/tract - other documentation

___ prescription not described elsewhere or was altered **If other documentation what is it OR if not described or has been altered describe here:** _____

c. Implementation ___ adequate ___ partial If partial describe issue: _____

Note: Chemical Use - All pesticides use must be described and logged appropriately. For ownerships or foresters that are state regulated and inspected, regulatory documentation will suffice. For ownerships or foresters that are not typically inspected documentation including pesticide used, amount, date of application, and location of application must be maintained see **CFWC-FM-09 “Chemical Usage Form”**.

NON-SILVICUTURE OPERATION

These include infra-structure projects. Examples include road building, crossing construction, fire lane construction and other operations that could have stand or forest impacts. Activities such as boundary painting, normal road maintenance and other operations that will not have direct forest impacts do not apply.

11. Describe Operation: _____

12. Implementation ___ adequate to meet expectation and consistent with FM plan
 ___ partial – implementation did not meet FM plan objectives

13. Impacts ___ operation did not negatively impact forest/stand attributes or require altering or adding to FM plan
 ___ operation negatively impacted attributes or required change in FM plan – **describe:**

OTHER DISTURBANCE

14. Please provide information on other issues or disturbance that was noted when monitoring activities. This includes finding new and significant forest damage, trespass, invasive species, problems with special sites, etc. Note these and include plans to further monitor, assess, and take action if necessary.

a. Description

b. Recommended Course of Action (check all that apply) monitor periodically monitor annually
 alter FM plan to address alter stand planning to address
 other - describe: _____

Use Additional Space or Add Documentation As Necessary