



ACCREDITATION  
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 Forest Stewardship Council A.C.  
 FSC-ACC-003

# Application Form

FSC Forest Management Application  
 V3-0



Certification for a sustainable world™

## GENERAL COMPANY INFORMATION

1. <b>Legal company name:</b> <i>(as it would appear on the FSC Forest Management report/certificate)</i>	
2. <b>Primary company address:</b> Street: City, State/Province, Zip/Postal Code: Country: Website:	
3. <b>Primary company contact person:</b>  Name: Phone: Cell: E-mail: Fax:	4. <b>Billing contact person (if different from primary contact):</b>  Name: Phone: Cell: E-mail: Fax:

## CERTIFICATION INFORMATION

5. **Type of services required:** *(check all that apply)*

- FSC Forest Management Pre-Evaluation<sup>1</sup>
- FSC Forest Management Full Evaluation
- FSC FM Controlled Wood Audit
- SCS LegalHarvest (verification that forest management is meeting legal requirements)
- Transfer of FSC Forest Management Certificate from another certifier to SCS
- Other *(please describe)*
- Not sure

<sup>1</sup> Per FSC requirements, pre-evaluation audits are required under some circumstances. Your application will be reviewed and you will be notified in your proposal if you must undergo a mandatory pre-evaluation.

6. **How would you assess your company's level of preparedness for the FSC assessment?**

- New to this process
- Previously certified

**Comments:**

7. **Desired date/time frame for forest management certification assessment:**

8. **Desired date/time frame for certification decision and award of certification (if warranted):**

## FOREST MANAGEMENT INFORMATION

### 9. Type of Forest Management Operation: (check all that apply)

- Private Company / Landowner
- Public Agency / Land Manager
- Group Certification<sup>2</sup> / Consulting Forester/ Resource Manager (Number of group members:        )
- Community Forest
- Other (please describe)

<sup>2</sup> **Group Certification:** An arrangement by which forest management units managed by a number of distinct legal entities (group members) may be evaluated and subsequently certified within the scope of a single certificate. Requires application from a **Group Entity (or Group Manager)** who is responsible to the certification body for ensuring that the FSC requirements are met on all group member properties.

### 10. Description of Operations:

- a. Size of forest management unit: (select acres  or hectares )

Total forest area:

Productive forest area:

Approximate area actively managed in a typical year:

- b. Forest landscape characteristics:

Forest type:

Species harvested:

Contiguousness of Forest Management Unit (e.g., 10,000 acres divided into 3 large units):

Travel Time between Units or Areas:

- c. Employee base:

Number of employees:

Number of contract workers:

- d. Forest management history:

Year most forestlands acquired:

Year timber harvesting began:

Is there a forest management plan?

- e. Silvicultural regimes and harvesting:

Approximately what percentage of active timber management is:

Even-aged?                      Uneven-aged?

Is there a forest management plan?

What is the annual allowable cut?

What is the average annual harvest?

- f. Additional project information (e.g., history, background, structure of group management, etc.):

- g. Does the property contain any High Conservation Value Forests<sup>3</sup> as defined by the FSC?

Yes                      Comments:

No

<sup>3</sup> **High Conservation Value Forests** possess one or more of the following attributes: a) forest areas containing globally, regionally or nationally significant: concentrations of biodiversity values (e.g. endemism, endangered species, refugia); and/or large landscape level forests, contained within, or containing the management unit, where viable populations of most if not all naturally occurring species exist in natural patterns of distribution and abundance b) forest areas that are in or contain rare, threatened or endangered ecosystems c) forest areas that provide basic services of nature in critical situations (e.g. watershed protection, erosion control) d) forest areas fundamental to meeting basic needs of local communities (e.g. subsistence, health) and/or critical to local communities' traditional cultural identity (areas of cultural, ecological, economic or religious significance identified in cooperation with such local communities). Also see Principle 9, in the FSC Principles and Criteria. See also Principle 9 and High Conservation Value Forest Network <http://www.hcvnetwork.org/>.

## CERTIFICATION SERVICES

11. Nearest major airport (and distance to your facility from airport):

12. How did you find out about Scientific Certification Systems (SCS)?

- SCS website  
 Referral from:  
 Heard SCS speak at a conference:  
 Other:

13. Are there **additional SCS certification services or environmental claims** your company may wish to pursue? (e.g. forest carbon/Greenhouse Gas Verification, FSC Chain-of-Custody(CoC), recycled content claims, indoor air quality, salvaged wood, environmentally preferable product, etc.)

14. Additional information or comments:

## AFFIRMATION

I affirm that the information provided herein is true and correct to the best of my knowledge, and that I am duly authorized to sign this application. Should our company decide to pursue certification, I agree to supply any information that is deemed necessary for the audit of the operation and/or products to be certified, as well as to comply with all relevant standards.

Name:

Signature:

Title:

Date:

Please return this application to:  
**Dave Wager, Director, Forest Management Program**  
E-mail: [dwager@scscertified.com](mailto:dwager@scscertified.com)  
or via fax to: 510.236.8598  
Phone: 406.251.7049

As soon as we process your application, we will provide you with our proposal via e-mail.

**Thank you for choosing SCS.**