



ASSOCIATION FOR SUSTAINABLE FORESTRY

PO Box 696, Truro, N.S. B2N 5E5
 Phone: (902) 895-1179; Fax (902) 893-1197

SILVICULTURE FUNDING REQUEST FORM

APPLICANT NAME: _____

Address: _____
ADDRESS CITY PROVINCE POSTAL CODE

Phone: _____ Fax: _____ Email: _____

FUNDING REQUESTED

Landowner Name	Woodland Location (including county)	Treatment Type	Rate (\$/ha)	Area (ha)	Funding Requested (not including HST)
				TOTAL FUNDING REQUESTED (not including HST)	

Please note the following caps on funding requests:

- 1) The maximum funding that can be requested for one woodland owner is **\$15,000.00**, with exception for Category 6&7 treatments with funding cap of **\$30,000.00** (not including HST).
- 2) The maximum funding that can be requested by one contractor or agent is **\$60,000.00**.

Funding will be allocated based on a percentage of the total **REQUESTS** for program funding. Applicants will be contacted with the amount of funding granted and will have two weeks to submit confirmation (application & fee) to the **Association for Sustainable Forestry**, along with proof of public liability and property insurance (5 million) and Worker's Compensation Insurance or private insurance.

Signature (Applicant): _____ Date: _____