

ADAMS COUNTY TIMBER CUTTING PERMIT

(This Notice expires December 31 of each year)

Notice is hereby given, pursuant to Section 26.03 of the Wisconsin Statutes, that I

Cutter's Name: _____

Address: _____

Phone: _____ FAX: _____

Email: _____

Instructions: Complete one permit form per section. Permit must be filled out completely in order for it to be processed. This is the responsibility of the land owner(s)/cutter.

am going to cut wood products on the following described land:

Land Owner(s) Name: _____

Address: _____

Phone: _____

Submitter's Name: _____

(Print)

(Signature)

Description: _____

Example NE 1/4 NW 1/4

Tax Parcel Number: _____

Example 204-00923-0000

Township: _____

Example Big Flats

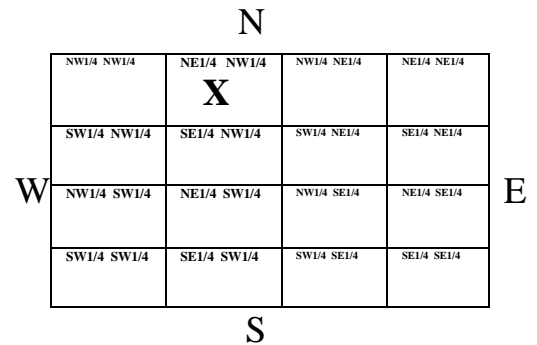
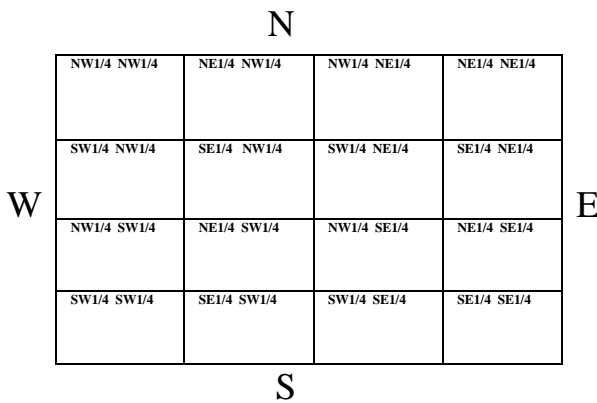
Section-Township-Range: _____

Example 19N-6E-Sec. 29

Acreage of Parcel: _____

Example 40 acres

Example



	Copies forwarded to (Please initial)	Date of forwarding (person/fax/mail/email)
____ LOGS		
____ PULP	To Cutter	_____
____ CHRISTMAS TREES	To Town Clerk	_____
____ MISC	To DNR	_____

Taxes checked by: _____ Date: _____
COUNTY CLERK/DEPUTY CLERK