



DEM
RHODE ISLAND

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DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

235 Promenade Street
Providence, RI 02908

Office: 401.222.4700

Application for Forestland Designation

Name: _____

Date: _____

Mailing Address: _____

Phone: _____

Email: _____

Property Location: _____

Town(s): _____

Plat(s): _____ Lot(s): _____

Forest Acreage: _____

Submissions

- Forest Management Plan
- Map
- Check for \$10.00 is payable to RI DEM

Signatures

I hereby certify that the acreage listed above is in agreement with the City or Town Tax Assessment.

Records Assessing Official: _____ Date: _____

I hereby certify that all information in this application is to the best of my knowledge true and correct.

Landowner: _____ Date: _____

For RI DEM Official Use Only

Approving Official (Initials):	Date Approved:
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