



2816355

FPA/N #:

Received Date:

WDFW Concurrence Due Date:

WDFW Concurrence Review Completed:

Comments Due Date:

Decision Due Date:

FP Forester:

Shutdown Zone:

RMAP #:

4-26-18
-
-
5-10-18
5-26-18
SKY30
656
-

Forest Practices Application/Notification
Office Checklist Page 1
Northwest Region

FPA/N CLASSIFICATION: [] II [X] III [] IVG [] IVS Biomass [] FFFPP [] 20-acre exempt []
Landowner Name: Layson Project Name:
WRIA: Snohomish WAU: Woods Creek
WRIA: WAU:
WRIA: WAU:
Legal Description: SE 1/4 15-28-7E County: Snohomish
Activity Type: Harvest 15 ac Spray ac Stream Crossing(s)
Road Road Rock Pit ac
Construction ft Abandonment ft Spoils cy

ALTERNATIVE PRESCRIPTIONS

- [] Alternate Plan [] Habitat Conservation Plan
- [] Ten-Year Forest Management Plan [] Landowner Option Plan for Northern Spotted Owl
- [] Columbia River Gorge National Scenic Area [] Cooperative Habitat Enhancement Agreement
- [X] Watershed Analysis: Woods Creek

RESOURCE REVIEW

- [X] Unstable Slopes (Risk: Highway, Water;) [] Bull Trout Overlay
- [] Soils Map (Highly Erodible & Very Unstable) [] HCP Bull Trout Population
- [X] SLPSTAB [] Bald Eagle nest or roost within 660 feet
- [] Landslide Hazard Zonation [] Group A or B Water Supply
- [] Landslide Inventory Polygon [] Hatchery (Name:)
- [] Rain-on-Snow and Outside Approved WA [] Even-Aged Harvest greater than 120 Acres
- [] Hydric Soils [] Ground-based Equipment on Slopes greater than 40%
- [] Wetland [] Forested, [] A, [] B [] Road Construction on Slopes greater than 65%
- [] In WMZ of [] A, or [] B Wetland [] Saltwater Islands (Name:)
- [X] In RMZ/ELZ of Type [] S, [] F, [] N water [] In or Over Typed Water
- [] Water Verification [] Volume greater than 5 mbf per acre

ASSOCIATED NON-SCANNED DOCUMENTS - On file with the FPA/N at the Region office.

- [] SEPA Checklist/Documents [] Large Landowner Road Maintenance and Abandonment Plan

ASSOCIATED SCANNED DOCUMENTS

- [] Conversion Option Harvest Plan [] Hardwood Conversion Form
- [] FPHP Plans & Specifications [] Wetland Mitigation Plan
- [] Qualified Expert Report; Type: [] Water Protocol Surveys
- [] Natural Regeneration Plan [] Modification Form#
- [] Shoreline Permit [X] Water Classification Worksheet
- [] Marbled Murrelet Form [X] Shade Documentation (Stream Shade Assessment Worksheet)
- [] FPBM Appendix(s) [X] Watershed Analysis Worksheet
- [] Small Landowner RMAP Checklist [] DFC Printout
- [] CMZ Assessment Form [] Slope Stability Informational Form

EARR Tax Credit [X] Yes [] No
ADDITIONAL COMMENTS:

Form completed by J.L.
October, 2016 Version



For DNR Region Office Use Only	
FPA/N #:	2816355
Region:	NW
Received Date:	4-26-2018

Forest Practices Application/Notification Western Washington

PLEASE USE THE INSTRUCTIONS TO COMPLETE THIS APPLICATION. TYPE OR PRINT IN INK.

1. Landowner, Timber Owner and Operator

Legal Name of LANDOWNER	Legal Name of TIMBER OWNER (if different than Landowner)	Legal Name of OPERATOR (if different than Landowner)
Donald C and Deborah R Layson	same	Northwest Logging Company
Mailing Address: 25306 99th PI SE	Mailing Address:	Mailing Address: 2522 N. Proctor St. #15
City, State, Zip Monroe, WA 98272	City, State, Zip	City, State, Zip Tacoma, WA 98406
Phone (425)810.2268	Phone ()	Phone (253)722.4366
Email:	Email:	Email: nwlogging@gmail.com

2. Contact Person

Contact Person: Damon Gustafson	Phone (253)722.4366 Email: nwlogging@gmail.com
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3. Landownership information: See instructions

- a. No Yes Are you a small forest landowner per RCW 76.09.450?
If yes, continue to b.

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APR 26 2018

- b. No Yes Is your entire proposed harvest area on a single contiguous ownership consisting of one or more parcel?

4. If you are harvesting timber, enter the Forest Tax Reporting Account Number of the Timber Owner:

800076747

For tax reporting information or to receive a tax number, call the Department of Revenue at 1-800-548-8829.

5. Are you substituting prescriptions from an approved state or federal conservation agreement or watershed analysis?

- No Yes Write 'HCP' or 'Using Prescriptions' in tables that apply. Attach or reference prescriptions and/or crosswalks on file at the Region office.

6. What is the legal description of your forest practices?

Section	Township	Range	E/W	Tax Parcel Number	County
15	28	7	E	28071500400600	Snohomish

7. When are you planning to begin work on the proposed activity? June 2018

8. Is the taxpayer eligible for the EARR Tax Credit?

No Yes

9. Have you reviewed this forest practices activity area to determine whether it may involve historic sites and/or Native American cultural resources? Read the instructions before answering this question.

No Yes

10. Do you have a DNR approved Road Maintenance and Abandonment Plan (RMAP)?

a. No Yes List the RMAP number: _____

If no, continue to b.

b. No Yes Is a Checklist RMAP required (see instructions)?

11. Are there potentially unstable slopes or landforms in the area of your forest practices activity?

No Yes – attach Slope Stability Informational Form. If applicable, attach geotechnical report, the SEPA Environmental Checklist, HCP, or Watershed Analysis prescriptions.

12. Are there potentially unstable slopes or landforms around the area of your forest practices activity?

No Yes – attach Slope Stability Informational Form. If applicable, attach geotechnical report, HCP, or Watershed Analysis prescriptions.

13. Is this forest practice application/notification (answer every question):

a. No Yes Within city limits or inside an urban growth area? If yes, see instructions for additional required documents.

b. No Yes For road work that is included in an approved Road Maintenance and Abandonment Plan (RMAP)?

c. No Yes Within a public park? If yes, include SEPA Environmental Checklist or SEPA Determination - except for harvest/salvage of less than 5,000 board feet within a developed public park.

d. No Yes Within 500 feet of a public park? Park name: _____

e. No Yes In an approved Conversion Option Harvest Plan (COHP) from the local government? If yes, include a copy. This only applies to proposals within urban growth areas.

f. No Yes Within 200' of the Ordinary High Water Mark (OHWM) or floodway of Type S water? If yes, check with the county or city to determine whether a substantial development permit is required under the local shorelines master plan.

g. No Yes A request for a multi-year permit? If yes, length requested: 4 years or 5 years. Not everyone qualifies for a multi-year permit. See instructions for details.

- h. No Yes An Alternate Plan? If yes, include a copy.
- i. No Yes Within 50 miles of saltwater and do you own more than 500 acres of forest land in Washington State? If yes, include Marbled Murrelet Form or attach/reference HCP prescriptions.
- j. No Yes In or directly adjacent to a potential Channel Migration Zone (CMZ)? If yes, include CMZ Assessment Form. Attach/reference applicable HCP and/or Watershed Analysis prescriptions.

* * * * * **If not working in or over typed waters, skip to Question 18** * * * * *

You are required to verify Type Np and Ns water types within 200 feet of your proposed forest practices activities prior to submitting a Forest Practices Application / Notification. Use the Additional Information section, additional pages, the Water Type Classification Worksheet, and/or a Water Type Modification form to explain how you verified water types. See Water Typing Requirements in the instructions.

Prior to answering Questions 14-17 in this section please refer to the Forest Practices Application Instructions and Forest Practices Board Manual Section 5.

14. Are you proposing any of the following projects NOT permitted by current HPAs from WDFW?

- a. No Yes Installing, replacing, or repairing a culvert at or below the bankfull width of Type S or F water(s) that exceeds a five percent gradient?
- b. No Yes Constructing, replacing, or repairing a bridge at or below the bankfull width of unconfined streams in Type S or F water(s)?
- c. No Yes Placing fill material within the 100-year flood level of unconfined streams in Type S or F water(s)?

15. Have you consulted with DNR and/or WDFW about the proposed hydraulic project(s) in or over Type S or F water? No Yes

16. If installing, replacing, removing, or maintaining structures in or over any typed water, complete the table below. Type S and F waters require detailed plan information. Provide plan details in Question 31 or attach plan to the FPA/N. Provide crossing locations and identifiers on your Activity Map. A detailed plan with profiles may also be required for more complex hydraulic projects in Type N Waters per WAC 222-24-042(2).

Crossing Identifier (letter and/or number)	Water Type (S, F, Np, Ns)	*Existing HPA Number (if applicable)	HPA Expiration Date (if applicable)	Planned Activity (install, replace, remove, temporary, structure maintenance)	Structure (culvert, bridge, ford**, punchoon, arch, other)	Proposed Size (dimensions of structure)	Culvert Design Method (No-slope, Stream-sim, Hydraulic, Other (F and S only)	Channel Bed Width (ft) (F and S only)	Stream Gradient (%) (F and S only)	RMAP Project (Y or N)	FFFPP Project (Y or N)

*Existing HPAs issued by WDFW will be complied and enforced by WDFW until expiration. Plan details are not required for hydraulic projects permitted with an existing HPA (see instructions).

** Fords and equipment crossings on Type S and F Waters may result in an unauthorized incidental take of certain endangered or threatened fish species. For more information, see 'Background for the State's Incidental Take Permits for certain endangered and threatened fish species' following Question 24 of the FPA/N Instructions.

17. If conducting any of the following activities in or over typed water, complete the table below. Some activities will require identifiers on the Activity map and/or more information in Question 31. See instructions.

*Activity	Type S Water	Type F Water	Type Np Water	Type Ns Water
Equipment Crossing**				
Suspending Cables				
Cable Yarding				
LWD Placement/Removal				
Beaver Dam Removal				
Felling and Bucking				
Other (describe in Question 31)				

*Existing HPAs issued by WDFW will be complied and enforced by WDFW until expiration. Plan details are not required for hydraulic projects permitted with an existing HPA (see instructions).

** Fords and equipment crossings on Type S and F Waters may result in an unauthorized incidental take of certain endangered or threatened fish species. For more information, see 'Background for the State's Incidental Take Permits for certain endangered and threatened fish species' following Question 24 of the FPA/N Instructions.

18. If constructing or abandoning forest roads, complete the table below. Show the road locations and identifiers on the Activity Map. Include abandonment plans for temporary roads and abandonment projects.

Road Identifier (name, number)	Road Construction		Road Abandonment	
	Length (feet)	Steepest Side-slope (%)	Length (feet)	Abandonment Date

19. If depositing spoils and/or expanding or developing a rock pit for forestry use, complete the table below. Show locations and identifiers on the Activity Map.

Spoil Area Identifier (letter, number)	Amount of Spoils Deposited (cubic yards)	Rock Pit Identifier (name, number or letter)	Acres of New Rock Pit Developed	Acres of Existing Rock Pit Expanded

20. If operating in or within 200 feet of a wetland, complete the table below. Show the boundaries of each wetland, along with its identifier, and WMZ on the Activity Map. See instructions for information.

Wetland Identifier (number, letter)	Wetland Type (A, B, or Forested)	Planned Activities in Wetland	Planned Activities in Maximum Width WMZ	Total Wetland Area (acres)	How many acres will be drained?	How many acres will be filled?

***** **If not harvesting or salvaging timber, skip to Question 29** *****

21. If harvesting or salvaging timber, complete the table below. Show all harvest areas and unit numbers on the Activity Map. For even-aged harvest units, also show surrounding stand information on the Activity Map.

Unit Number	Harvest Type (Even-aged, Uneven-aged, Salvage, Right-of-Way)	Biomass Harvest (Y/N)	Harvest Method (Rubber Tired Skidder, Tracked Skidder, Dozer, Shovel, Full Suspension Cable, Lead-end Suspension Cable, Helicopter, Animal, Chipper-forwarder, Slash Bundler)	Acres to be Harvested	Volume to be Harvested (mbf)	Volume to be Harvested (biomass tonnage)	Volume to be Harvested (%)	Steepest Slope in Harvest Unit (%)
1	Even-aged	N	Shovel/ RTS	15	65	N/A	95	20

22. Reforestation. Check the appropriate box(es).

- Planting. Tree Species: Doug fir
- Natural. Include a Natural Regeneration Plan
- Not required because of one or more of the following:
 - I am converting some or all of this land to non-forest land in the next 3 years or lands are exempted under WAC 222-34-050.
 - Individual dead, dying, down, or wind-thrown trees will be salvaged.
 - Trees are removed under a thinning program reasonably expected to maximize the long-term productivity of commercial timber.
 - I am leaving at least 100 vigorous, undamaged, and well-distributed saplings or merchantable trees per acre.
 - An average of 190 tree seedlings per acre are established on the harvest area and my harvest will not damage it.
 - Road right-of-way or rock pit development harvest only.

*** If you own MORE than 80 forested acres in Washington, skip to Question 27 ***

23. Are you using the exempt 20-acre parcel riparian management zone (RMZ) rule on type S, F, or Np waters?

- No If no, continue to Question 27.
- Yes If yes, continue to Question 24. See instructions for qualifications and information.

24. Choose the answer below that best fits your situation. Show all RMZs on the Activity Map.

- a. ALL of the following apply to me and my land: (If no, answer b.)
 - Between June 5, 2006 and today's date I have always owned less than 80 acres of forestland in Washington.
 - Between June 5, 2006 and today's date this parcel has always been 20 acres or less of contiguous ownership. See RCW 76.09.020 for definition of 'contiguous'.
 - Between June 5, 2006 and today's date this parcel has always been owned by me or someone else that has owned less than 80 acres of forestland in Washington.

b. ONE OR MORE of the following apply to me and/or my land (check all that apply):

- I currently own more than 80 acres of forestland in Washington.
- Between June 5, 2006 and today's date I have owned more than 80 acres of forestland in Washington.
- Between June 5, 2006 and today's date this parcel has been a part of more than 20 acres of contiguous ownership. See RCW 76.09.020 for definition of 'contiguous'.
- Between June 5, 2006 and today's date this parcel has been owned by someone that has owned more than 80 forested acres in Washington.

If any of the statements in (b) above apply AND you use the 20-acre exempt RMZ rule, you are NOT authorized under the State's Incidental Take Permits (see explanation in FPA instructions under Questions 24).

25. If harvesting within 115 feet of a Type S or F water on an exempt 20-acre parcel, complete the table below. Show RMZs and stream segment identifiers on the Activity Map. If you are harvesting within 75 feet or within the maximum RMZ (whichever is less), stream shade must be assessed and met following harvest. Describe how stream shade was determined to be met, using the 'Stream Shade Assessment Worksheet' if necessary.

Stream Segment Identifier (letter)	Water Type (S, F)	Segment Length (feet)	Bankfull Width (feet)	Maximum RMZ Width (feet)	Are you harvesting within the maximum RMZ? (Y or N)

26. Are you harvesting within 29 feet of a Type Np water on a 20-acre exempt parcel?

- No Continue to Question 29.
- Yes See instructions and describe leave tree strategy in Question 31. Then continue to Question 29.

27. If harvesting within 200 feet of any of Type S or F water, complete the table below. Include DFC for all inner zone harvests unless you have an HCP prescription. Show RMZs, CMZs, and stream segment identifiers on the Activity Map. If you are harvesting within 75 feet or within the maximum RMZ (whichever is less), stream shade must be assessed and met following harvest. Describe how stream shade was determined to be met, using the 'Stream Shade Assessment Worksheet' if necessary.

Stream Segment Identifier (letter)	Water Type (S or F)	Site Class (I - V)	Stream Width (feet)	Is there a CMZ? (Y/N)	RMZ Harvest Code(s) (see instructions)	DFC Run Number	Total width of RMZ (feet)
A	S	II	25	N/A	B,L		170

28. If harvesting within 50 feet of Type Np water, complete the table(s) below. Show RMZs and stream segment identifiers on the Activity Map.

Stream Segment Identifier (letter)	Total Stream Length in Harvest Unit (feet)	Length of No-Harvest, 50-foot Buffers in Harvest Unit (feet)

Stream Segment Identifier (letter)	Total Stream Length in Harvest Unit (feet)	Length of No-Harvest, 50-foot Buffers in Harvest Unit (feet)

29. How are the following marked on the ground? (Flagging, paint, road, fence, etc.)

Harvest Boundaries: Orange flagging

Clumped Wildlife Reserve Trees/Green Recruitment Trees: Scattered

Right-of-way limits/road centerlines: N/A

Stream Crossing Work: N/A

Riparian Management Zone Boundaries and Leave/Take Trees: Blue and White striped flagging

Channel Migration Zone: N/A

Wetland Management Zone Boundaries and Leave/Take Trees: N/A

30. Are you converting the land to non-forestry use within 3 years of harvest?

No Yes If yes, include your SEPA Determination and/or SEPA checklist.



31. Additional Information (attach additional pages if necessary): For hydraulic projects in or over Type S, F, or complex N water(s) see instructions for required plan information.

Call Damon Gustafson to set meeting before viewing 253.722.4366

32. We acknowledge the following:

- The information on this application/notification is true.
- We understand this proposed forest practice is subject to:
 - The Forest Practices Act and Rules AND
 - All other federal, state or local regulations.
- Compliance with the Forest Practices Act and Rules does not ensure compliance with the Endangered Species Act or other federal, state or local laws.
- If we said that we would not convert the land to non-forestry use, the county or city may deny development permits on this parcel for the next 6 years.
- The following may result in an unauthorized incidental take of certain endangered or threatened fish species:
 - Conversion of land to non-forestry use.
 - Harvesting within the maximum RMZ on a 20-acre exempt parcel that was acquired after June 5, 2006.
 - Equipment Crossings/Fords in or over Type S and F Waters.
- Inadvertent Discovery – Chapters 27.44, 27.53, 68.50 and 68.60 RCW
 - If you find or suspect you have found an archaeological object or Native American cairn, grave, or glyptic record, immediately cease disturbance activity, protect the area and promptly contact the Department of Archaeology and Historic Preservation at 360 586-3077.
 - If you find or suspect you have found human skeletal remains, immediately cease disturbance activity, protect the area, and contact the County Coroner or Medical Examiner and local law enforcement as soon as possible. Failure to report human remains is a misdemeanor.

The landowner understands that by signing and submitting this FPA, he/she is authorizing the Department of Natural Resources to enter the property in order to review the proposal, inspect harvest operations, and monitor compliance for up to three years after its expiration date. RCW 76.09.150

Signature of LANDOWNER  Print Name: Donald C. Layson Date: 04-09-2018	Signature of TIMBER OWNER* (If different than landowner) Print Name: Date: <i>same</i>	Signature of OPERATOR (If different than landowner)  Print Name: Danson G. Stuber Date: 4/20/18
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* NOTE: If you are a "Perpetual Timber Rights Owner," and are submitting this without the Landowner's Signature, provide written evidence the landowner has been notified.

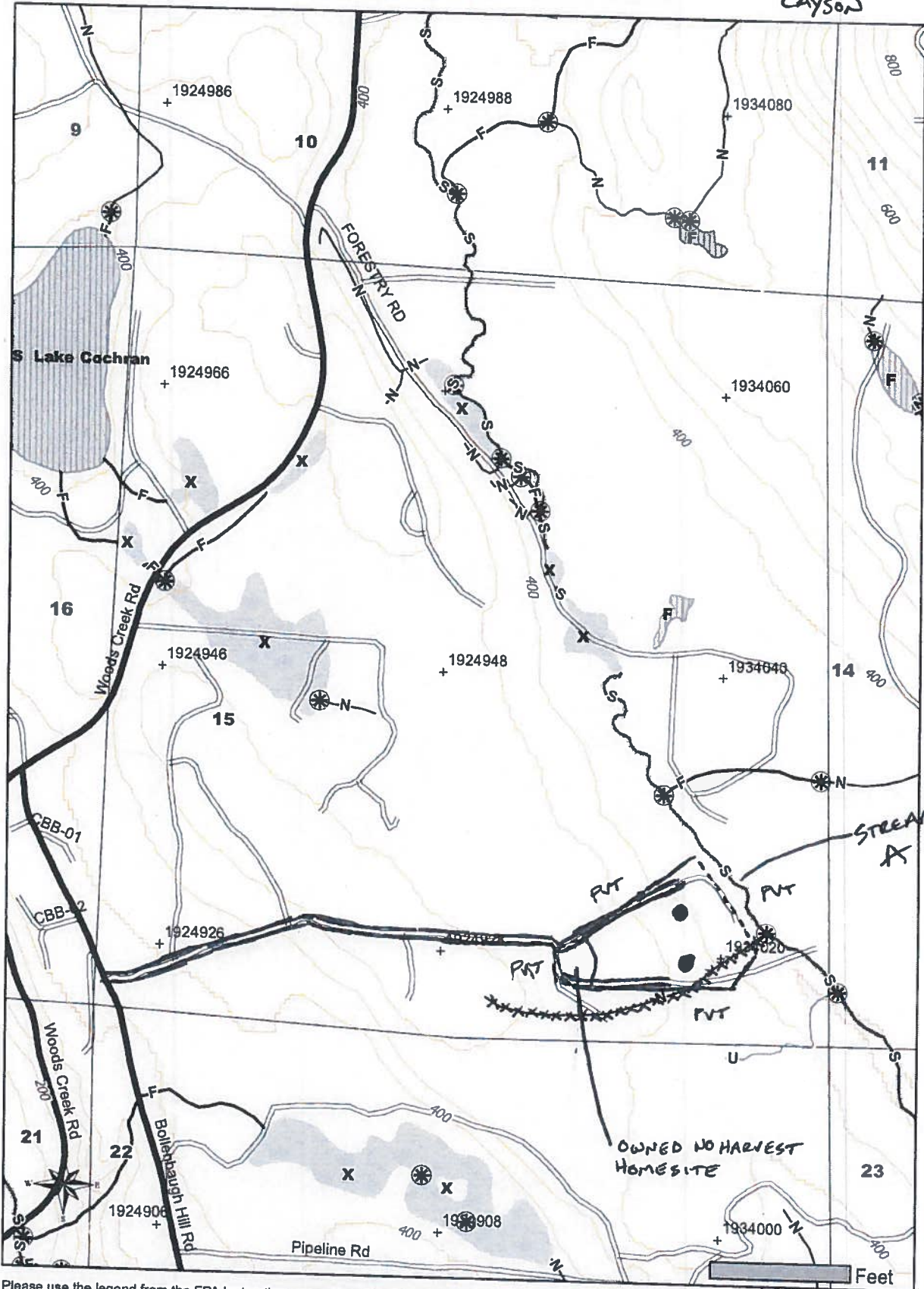
Please make a copy of this FPA/N for your records. If this FPA/N contains a hydraulic project requiring WDFW concurrence review, it will not be available online for public review until after the WDFW concurrence review period.

FOREST PRACTICE ACTIVITY MAP

TOWNSHIP 28 NORTH HALF 0, RANGE 07 EAST (W.M.) HALF 0, SECTION 15

Application #: _____

LAYSON



Please use the legend from the FPA instruction or provide a list of symbols used.

— HARVEST BOUNDARY

~~XXXX~~ NON-EXISTING STREAM

● LANDINGS

--- RMZ BUFFER

== ACCESS ROADS

Date: 4/18/2018

Time: 2:22:17 PM

NAD 83

Contour Interval: 40 Feet

2816355

Appendix I. Watershed Analysis Worksheet

(Use a separate worksheet for each Watershed Analysis)

Watershed Analysis Name: Woods Creek Watershed, Layson Unit

Check all of the following that apply:

I have reviewed the Watershed Analysis Prescription documents. My proposal is not located on or adjacent to any of the described features. Prescriptions do not affect my proposal.

I have reviewed the descriptions and maps for all prescriptions.

My proposal is located on or adjacent to the following prescription areas:

Surface Erosion Prescriptions

Mass Wasting Prescriptions

Hydrology Prescriptions

Water Quality

Water Supply / Public Works

Riparian – applicable to landowners using the 20 acre exempt RMZ rule

Complete the following information for each prescription that affects your proposal or is adjacent to your proposal. Identify the resource sensitivity name and whether or not you are implementing the prescriptions. Attach required reports and additional information as necessary.

Resource Sensitivity Name/No: Medium soil erosion Implementing Prescription: Yes No

Describe harvest techniques proposed	Most of the logs will yarded with tracked equipment. No RTS will be used in ME areas
Describe road techniques proposed	Hauling will be done in dry weather and only existing roads to be used
Describe other techniques proposed	

Resource Sensitivity Name/No: _____ Implementing Prescription: Yes No

Describe harvest techniques proposed	
Describe road techniques proposed	
Describe other techniques proposed	

Resource Sensitivity Name/No: _____ Implementing Prescription: Yes No

Describe harvest techniques proposed	
Describe road techniques proposed	
Describe other techniques proposed	

DNR USE ONLY

Reviewed by: _____

Date: _____

Appendix A. Western Washington Water Type Classification Worksheet

Stream/Segment ID: A Stream/Segment ID: _____ Stream/Segment ID: _____

Date Observed: 4/18/2018 Date Observed: _____ Date Observed: _____

1. Do you have a protocol survey? (See the Board Manual Section 13) Or, does the stream have waiver characteristics? (See WAC 222-16-031(3) (b) (ii))

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> No. Continue. | <input type="checkbox"/> No. Continue. | <input type="checkbox"/> No. Continue. |
| <input type="checkbox"/> Yes. Attach documentation or approved WTMF number: _____ | <input type="checkbox"/> Yes. Attach documentation or approved WTMF number: _____ | <input type="checkbox"/> Yes. Attach documentation or approved WTMF number: _____ |
| <input type="checkbox"/> Fish found. Stop. | <input type="checkbox"/> Fish found. Stop. | <input type="checkbox"/> Fish found. Stop. |
| <input type="checkbox"/> No fish found. Go to 6. | <input type="checkbox"/> No fish found. Go to 6. | <input type="checkbox"/> No fish found. Go to 6. |

2. Were fish observed or are fish known to use the stream any time of the year?

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Yes. Type F water. Stop. | <input type="checkbox"/> Yes. Type F water. Stop. | <input type="checkbox"/> Yes. Type F water. Stop. |
| <input type="checkbox"/> No. Continue. | <input type="checkbox"/> No. Continue. | <input type="checkbox"/> No. Continue. |

3. Is there an impoundment (ponded water) upstream of the assessed segment, that is greater than .5 acres?

- | | | |
|---|---|---|
| <input type="checkbox"/> Yes. Type F water. Stop. | <input type="checkbox"/> Yes. Type F water. Stop. | <input type="checkbox"/> Yes. Type F water. Stop. |
| <input type="checkbox"/> No. Continue. | <input type="checkbox"/> No. Continue. | <input type="checkbox"/> No. Continue. |

4. Are there segments within or above the assessed portion of the stream where the average BFW is two feet or greater? AND the average stream gradient is less than or equal to 16%?

- | | | |
|---|---|---|
| <input type="checkbox"/> Yes. Type F water. Stop. | <input type="checkbox"/> Yes. Type F water. Stop. | <input type="checkbox"/> Yes. Type F water. Stop. |
| <input type="checkbox"/> No. Continue. | <input type="checkbox"/> No. Continue. | <input type="checkbox"/> No. Continue. |

5. Are there segments within or above the assessed portion of the stream where the average BFW is two feet or greater? AND the average stream gradient is between 16% and 20%? AND, the contributing basin to the stream is greater than 50 acres?

- | | | |
|---|---|---|
| <input type="checkbox"/> Yes. Type F water. Stop. | <input type="checkbox"/> Yes. Type F water. Stop. | <input type="checkbox"/> Yes. Type F water. Stop. |
| <input type="checkbox"/> No. Continue. | <input type="checkbox"/> No. Continue. | <input type="checkbox"/> No. Continue. |

6. Does the stream segment contain water at all times during a normal rainfall year?

- | | | |
|---|---|---|
| <input type="checkbox"/> Yes. Type Np water. Go to 9. | <input type="checkbox"/> Yes. Type Np water. Go to 9. | <input type="checkbox"/> Yes. Type Np water. Go to 9. |
| <input type="checkbox"/> No. Continue. | <input type="checkbox"/> No. Continue. | <input type="checkbox"/> No. Continue. |

7. Is the stream segment downstream of a perennial source of water?

- | | | |
|---|---|---|
| <input type="checkbox"/> Yes. Type Np water. Go to 9. | <input type="checkbox"/> Yes. Type Np water. Go to 9. | <input type="checkbox"/> Yes. Type Np water. Go to 9. |
| <input type="checkbox"/> No. Continue. | <input type="checkbox"/> No. Continue. | <input type="checkbox"/> No. Continue. |

8. Is the stream physically connected by an above-ground channel to Type S, F, or Np water?

- | | | |
|--|--|--|
| <input type="checkbox"/> Yes, Type Ns water. Stop. | <input type="checkbox"/> Yes, Type Ns water. Stop. | <input type="checkbox"/> Yes, Type Ns water. Stop. |
| <input type="checkbox"/> No, non-typed water. | <input type="checkbox"/> No, non-typed water. | <input type="checkbox"/> No, non-typed water. |

9. Describe how you determined the uppermost point of perennial flow. Include a description of its location and show the point on a map (Use a separate piece of paper if necessary).

Stream/Segment ID _____ Description: _____



Forest Practices Application/Notification
Notice of Decision

FPA/N No: 2816355
Effective Date: 5/21/2018
Expiration Date: 5/21/2021
Shut Down Zone: 656
EARR Tax Credit: Eligible Non-eligible
Reference: Layson

Decision

- Notification Operations shall not begin before the effective date.
- Approved This Forest Practices Application is subject to the conditions listed below.
- Disapproved This Forest Practices Application is disapproved for the reasons listed below.
- Closed Applicant has withdrawn FPA/N.

FPA/N Classification

Number of Years Granted on Multi-Year Request

Class II Class III Class IVG Class IVS 4 years 5 years

Conditions on Approval / Reasons for Disapproval

No additional conditions.

FOR YOUR INFORMATION:

Please notify DNR Northwest Region Office (360-856-3500) 48 business hours before commencing timber harvest operations. Please provide the application number and legal description for your operation.

Issued By: Steven Huang *S. H.* Region: Northwest

Title: Skykomish Forest Practice Forester Date: 5/21/2018

Copies to: Landowner, Timber Owner and Operator.

Issued in person: Landowner Timber Owner Operator By: _____

Appeal Information

You have thirty (30) days to appeal this Decision and any related State Environmental Policy Act determinations to the Pollution Control Hearings Board in writing at the following addresses:

Physical address: 1111 Israel Rd. SW, Ste 301, Tumwater, WA 98501

Mailing address: P.O. BOX 40903, OLYMPIA, WA 98504-0903

Information regarding the Pollution Control Hearings Board can be found at: <http://www.eluho.wa.gov/>

At the same time you file an appeal with the Pollution Control Hearings Board, also send a copy of the appeal to the Department of Natural Resources' region office and the Office of the Attorney General at the following addresses:

Office of the Attorney General
Natural Resources Division
1125 Washington Street SE
PO Box 40100
Olympia, WA 98504-0100

And

Department Of Natural Resources
Northwest Region
919 N Township St
Sedro-Woolley WA 98284

Other Applicable Laws

Operating as described in this application/notification does not ensure compliance with the Endangered Species Act, or other federal, state, or local laws.

Transfer of Forest Practices Application/Notification (WAC 222-20-010)

Use the "Notice of Transfer of Approved Forest Practices Application/Notification" form. This form is available at region offices and on the Forest Practices website: <http://www.dnr.wa.gov/businesspermits/forestpractices>. Notify DNR of new Operators within 48 hours.

Continuing Forest Land Obligations (RCW 76.09.060, RCW 76.09.070, RCW 76.09.390, and WAC 222-20-055)

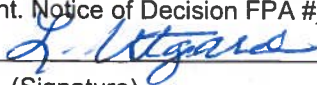
Obligations include reforestation, road maintenance and abandonment plans, conversions of forest land to non-forestry use and/or harvest strategies on perennial non-fish habitat (Type Np) waters in Eastern Washington.

Before the sale or transfer of land or perpetual timber rights subject to continuing forest land obligations, the seller must notify the buyer of such an obligation on a form titled "Notice of Continuing Forest Land Obligation". The seller and buyer must both sign the "Notice of Continuing Forest Land Obligation" form and send it to the DNR Region Office for retention. This form is available at DNR region offices.

If the seller fails to notify the buyer about the continuing forest land obligation, the seller must pay the buyer's costs related to continuing forest land obligations, including all legal costs and reasonable attorneys' fees incurred by the buyer in enforcing the continuing forest land obligation against the seller.

Failure by the seller to send the required notice to the DNR at the time of sale will be prima facie evidence in an action by the buyer against the seller for costs related to the continuing forest land obligation prior to sale.

DNR affidavit of mailing:

On this day <u>5/22/2018</u>	, I placed in the United States mail at <u>Sedro-Woolley</u>	, WA,
(date)	(post office location)	
postage paid, a true and accurate copy of this document. Notice of Decision FPA # <u>2816355</u>		
<u>L Utgard</u>		
(Printed name)	(Signature)	