



**Forest Practices Application/Notification
Office Checklist Page 1
Northwest Region**

FPA/N #: 2815963
 Received Date: 8-4-17
 WDFW Concurrence Due Date: —
 WDFW Concurrence Review Completed: —
 Comments Due Date: 8-18-17
 Decision Due Date: 9-3-17
 FP Forester: SK430
 Shutdown Zone: —
 RMAP #: —

FPA/N CLASSIFICATION: [] II [] VIII [] IVG [] IVS		Biomass []	FFFPP []	20-acre exempt []
Landowner Name:	<u>SP1</u>	Project Name:	<u>Camp 2 Spray</u>	
WRIA:	<u>Snohomish</u>	WAU:	<u>Olney Creek</u>	
WRIA:		WAU:	<u>Upper-Wallock River</u>	
WRIA:		WAU:		
Legal Description:	<u>29,30-28-9E</u>	County:	<u>Snohomish</u>	
Activity Type:	Harvest _____ ac	Spray <u>84</u>	ac	Stream Crossing(s) _____
	Road _____	Road _____		Rock Pit _____ ac
	Construction _____ ft	Abandonment _____ ft		Spoils _____ cy

ALTERNATIVE PRESCRIPTIONS

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

RESOURCE REVIEW

- Unstable Slopes (Risk: Highway, Water; _____)
 - Soils Map (Highly Erodible & Very Unstable)
 - SLPSTAB
 - Landslide Hazard Zonation
 - Landslide Inventory Polygon
- Rain-on-Snow and Outside Approved WA
- Hydric Soils
 - Wetland [] Forested, [] A, [] B
- In WMZ of [] A, or [] B Wetland
- In RMZ/ELZ of Type [] S, [] F, [] N water
- Water Verification
- Bull Trout Overlay
- HCP Bull Trout Population
- Bald Eagle nest or roost within 660 feet
- Group A or B Water Supply
- Hatchery (Name: _____)
- Even-Aged Harvest greater than 120 Acres
- Ground-based Equipment on Slopes greater than 40%
- Road Construction on Slopes greater than 65%
- Saltwater Islands (Name: _____)
- In or Over Typed Water
- 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
- FPHP Plans & Specifications
- Qualified Expert Report; Type: _____
- Natural Regeneration Plan
- Shoreline Permit
- Marbled Murrelet Form
- FPBM Appendix(s) _____
- Small Landowner RMAP Checklist
- CMZ Assessment Form
- Hardwood Conversion Form
- Wetland Mitigation Plan
- Water Protocol Surveys
- Modification Form# _____
- Water Classification Worksheet
- Shade Documentation (Stream Shade Assessment Worksheet)
- Watershed Analysis Worksheet
- DFC Printout
- Slope Stability Informational Form

EARR Tax Credit [] Yes [] No

ADDITIONAL COMMENTS: _____

Form completed by L4
 October, 2016 Version

**KEY FOR EVALUATION OF SITE SPECIFIC
USE OF AERIALY APPLIED PESTICIDES**

Question	Question	Resp	Action
1 (a)	Is the pesticide on the pesticide list (WAC 222-16-070(1))?	<input checked="" type="radio"/> Yes <input type="radio"/> No	go to 2 go to 1(b)
1 (b)	Is the pesticide being used under a Dept of Agriculture Experimental Use Permit (WAC 16-228-1460)?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Class III Class IV Sp
2	Is the toxicity rating for the pesticide to be used "Danger - Poison" as designated in the pesticide list (WAC 222-16-070(1)(b))?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Class IV Sp go to 3(a)
3 (a)	Is <i>Bacillus thuringiensis</i> (BT) the only pesticide being used on this application?	<input type="radio"/> Yes <input checked="" type="radio"/> No	go to 3(b) go to 4(a)
3 (b)	Is there a Threatened or Endangered species or the critical habitat (Federal) or critical habitat (State) of a species within the application area that is susceptible to the BT strain being used?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Class IV Sp Class III
4 (a)	Is this operation occurring over ground water with a high susceptibility to contamination as specified in EPA 910/ 9-87-169 or in documentation provided by the department of ecology?	<input type="radio"/> Yes <input checked="" type="radio"/> No	go to 4(b) go to 5(a)
4 (b)	Is this pesticide a state restricted use pesticide for the protection of ground water under WAC 16-228-1231?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Class IV Sp go to 5(a)
5 (a)	Is the operation adjacent (within 100 ft.) of surface water?	<input checked="" type="radio"/> Yes <input type="radio"/> No	go to 5(b) go to 5(e)
5 (b)	Determine the toxicity rating from the pesticide list: *Is the toxicity rating "Caution" or "Warning"?	<input checked="" type="radio"/> Yes <input type="radio"/> No	go to 5(c) go to 5(d)
5 (c)	*Is the toxicity rating "Danger"?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Class IV Sp go to 5(e)
5 (d)	Is there a Group A or B water surface water system (WAC 246-290-020) intake OR a fish hatchery intake within one half mile downstream of the operation?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Class IV Sp go to 5(e)
5 (e)	Is there a Group A or B water surface system intake OR a fish hatchery intake within 1 mile downstream of the operation?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Class IV Sp go to 5(f)
5 (f)	Is the operation within 200 feet of the intake of a Group A or B spring water system?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Class IV Sp go to 5(f)
5 (g)	Is the operation applying a pesticide in a Type A or B wetland?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Class IV Sp go to 6(a)
6 (a)	Does any portion of the planned operation cover 240 or more contiguous acres? Pesticide treatment units will be considered contiguous if they are separated by less than 300 feet or treatment dates of adjacent units are less than 90 days apart.	<input type="radio"/> Yes <input checked="" type="radio"/> No	Class IV Sp go to 6(b)
6 (b)	Is there a Threatened or Endangered species or the critical habitat (Federal) or critical habitat (State) of a species within the application area?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Class IV Sp go to 6(c)
6 (c)	If there is a special concern identified for this pesticide in the Board manual, does it apply to this application?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Class IV Sp Class III

- (1) Special concerns (see WAC 222-16-070 (2)6(c)) shall be evaluated by the department of agriculture. Information regarding special concerns shall be presented to the board for review. Approved special concerns shall be included in the board manual. Special concerns shall include situations where use of pesticides has the potential for a substantial impact on the environment, beyond those covered specifically in the key in subsection (2) of this section.

Camp 2



WASHINGTON STATE DEPT OF
**NATURAL
RESOURCES**

Forest Practices Application/Notification For Aerial Chemicals

For DNR Region Office Use Only	
FPA/N #:	2815963
Region:	NW
Received Date:	8-4-2017

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	Legal Name of OPERATOR
Sierra Pacific Industries	Sierra Pacific Industries	Sierra Pacific Industries
Mailing Address: 14353 McFarland Road	Mailing Address: 14353 McFarland Road	Mailing Address: 14353 McFarland Road
City, State, Zip Mt. Vernon, WA 98273	City, State, Zip Mt. Vernon, WA 98273	City, State, Zip Mt. Vernon, WA 98273
Phone (360) 424-7619	Phone (360) 424-7619	Phone (360) 424-7619
Email:	Email:	Email:

2. Contact person.

Contact Person: Doug Sand	Phone (360) 424-7619 Email:
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3. Are you substituting prescriptions from an approved state or federal conservation agreement or watershed analysis?

No. Yes. Write "Using prescriptions" in tables that apply. Attach or reference prescriptions/crosswalk on file.

4. Complete the following property description:

Unit Number	Acres	Section	Township	Range	East/West	County
1	84	29, 30	28	9	East	Snohomish

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5. Chemical Information - Show all buffers on your Activity Map**

Unit Identifier (Must Match map)	Acres Treated	*Active Ingredient	*List associated EPA Number by Active Ingredient	Are you spraying within:			Site Prep (Anticipated year)	Spring Conifer Release (Anticipated year)	Fall Conifer Release (Anticipated year)
				100 feet of agricultural land?	200 feet of a residence?	100 feet of surface water?			
1	84	glyphosate	81927-8	No	No	Yes		2017	
1	84	glyphosate	62719-324	No	No	Yes		2017	
1	84	Non-Ionic Surfactant	34704-04008	No	No	Yes		2017	
1	84	Mod Veg Oil/Silicone Surfactant	AW 2935-00004	No	No	Yes		2017	
1	84	Modified Vegetable Oil Drift Control	2935-11001	No	No	Yes		2017	

*Most active ingredients are sold under multiple brand names. Each brand has a different EPA number. One brand of each active ingredient is generally used at a time and brands may be substituted if listed above.

**Additional information may be added on separate pages as needed

H: 2 8 1 5 9 6 3

6. Is this proposal: (Answer every question)

- a. No. Yes. Within the city limits or an urban growth area? *If Yes, include SEPA Environmental Checklist or SEPA Determination or approved 10-year management plan*
- b. No. Yes. Within a public park? *If Yes, include SEPA Environmental Checklist or SEPA Determination*
- c. No. Yes. Within 500 feet of a public park? Park name: _____
- d. No. Yes. For an Alternate Plan? *If yes, include a copy of the Alternate Plan*
- e. No. Yes. Using a chemical that is not registered or for a use that is not allowed under the label? *If yes, include a copy of your Experimental Use Permit and a SEPA Environmental Checklist*
- f. No. Yes. Applying a pesticide in a Type A or Type B Wetland? *If Yes, include a SEPA Environmental Checklist or SEPA Determination*

7. Are you spraying 240 or more contiguous acres? If Yes, include a SEPA Environmental Checklist.

No. Yes.

8. 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.


9. Additional Information (Attach additional pages if necessary):

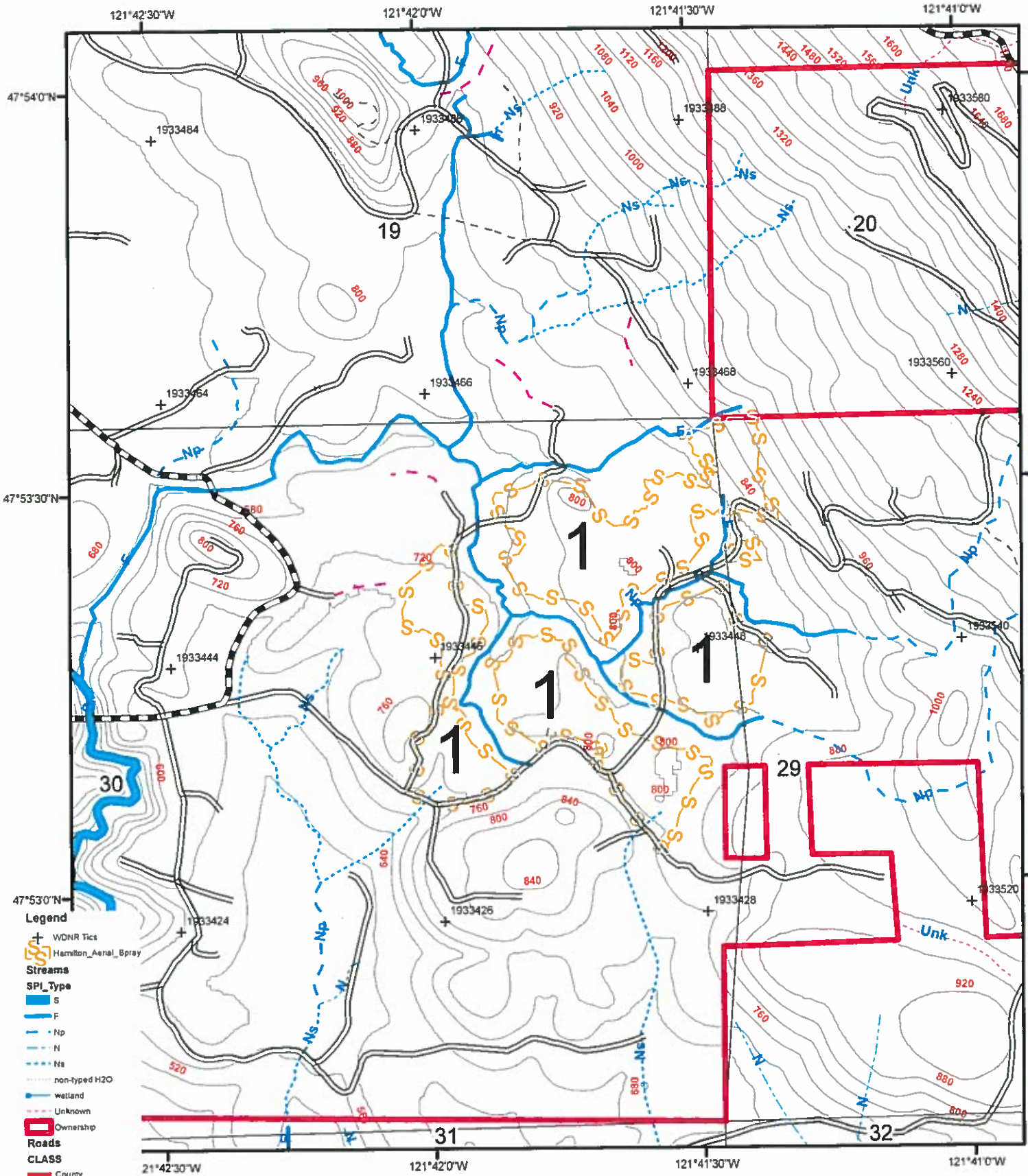
10. We acknowledge the following:

- 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.
- The following may result in an unauthorized incidental take of certain endangered or threatened fish species:
 - 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.

We understand that applying chemicals is not an activity included as part of the DNR's Incidental Take Permit for aquatic species. We affirm that the information contained herein is true, and understand that this proposed forest practice is subject to the Forest Practices Act and Rules as well as 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.

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

<u>Signature of LANDOWNER</u>	<u>Signature of TIMBER OWNER</u> (If different than landowner)	<u>Signature of OPERATOR</u> (If different than landowner)
		
<u>Print Name:</u> Douglas J. Sand Jr.	<u>Print Name:</u>	<u>Print Name:</u>
<u>Date:</u> 8-4-17	<u>Date:</u>	<u>Date:</u>



Aerial Herbicide Application Release - 2017

Camp 2
84 ac.

28N 09E Sec. 29, 30

1 inch = 1,000 feet

Rt 2815963



Forest Practices Application/Notification
Notice of Decision

FPA/N No: 2815963
Effective Date: 8/31/2017
Expiration Date: 8/31/2020
Shut Down Zone:
EARR Tax Credit: [] Eligible [x] Non-eligible
Reference: Camp 2 spray

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

Notify the Department of Natural Resources at least 48 business hours before beginning operations of each unit to be sprayed. Call (360) 856-3500 for Forest Practices and the Skykomish Forest Practice Forester and provide the application number and legal description of your operation.

FOR YOUR INFORMATION:

Aerial chemical application areas need to be posted by the landowner by signing at significant points of regular access at least 5 days prior to treatment. Posting shall remain at least 15 days after the spraying is complete.

Issued By: Steven Huang *J-ll* Region: Northwest

Title: Skykomish Forest Practice Forester Date:

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>9/1/2017</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>2815963</u>		
<u>L Utgard</u>		
(Printed name)	(Signature)	



Camp 2

WASHINGTON STATE DEPARTMENT OF **Natural Resources**

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Forest Practices Application/Notification NOTICE OF TRANSFER

I/we transfer my/our rights, privileges, and obligations under this approved Forest Practices Application or Notification. I/we affirm that the information contained below is true and agree to comply with the rules authorized by the Forest Practices Act and to be bound by all conditions on the approved application or notification.

FPA/N Number: 2815963 Section(s): 29,30 Township: 28 Range: 9

Original Landowner (Signature): *Douglas J. Sand Jr.*

Original Landowner (Printed): Douglas J. Sand Jr. Date: 09/08/2017

New Operator – Fill out this section <u>only</u> if you are changing or adding an operator	
Legal Name of New Operator: (Print) <u>Wilbur-Ellis Agribusiness Division</u>	Mailing Address: <u>P.O. Box 750</u>
Phone: <u>(360) 262-3197</u>	<u>Napavine, WA 98565</u>
Email:	<u>attn: Corey Fransen</u>
New Operator Signature: <u><i>Corey Fransen</i></u>	Date: <u>9/18/17</u>

New Landowner – Fill out this section <u>only</u> if you are transferring your FPA to a new landowner	
Legal Name of New Landowner: (Print)	Mailing Address:
Phone:	
Email:	
New Landowner Signature:	Date:

New Timber Owner – Fill out this section <u>only</u> if you are transferring your timber rights	
Legal Name of Timber Owner: (Print)	Mailing Address:
Phone:	
Email:	
Forest Tax Reporting Account Number: (Contact Dept. of Revenue to get this number: 1-800-548-8829)	
New Timber Owner Signature:	Date:

<input checked="" type="checkbox"/> Received by: <u><i>L. Utgaard</i></u>	Date: <u>10/9/17</u>
(DNR Forest Practices Staff Signature)	