IDENTIFICATION AND LOCATION OF PARCEL

1.	Parcel ID Owner's name		
	Due to Senate Bill 1985:	Owner's Date of Birth_	

YES			
NO			

- 2. PLEASE ATTACH YOUR DEED, FIELD NOTES, PLAT(S) OR ANY INFORMATION ON THE LOCATION OF YOUR PROPERTY.
 - Please see the reverse side and locate or draw in your property for this application. You can also come in to our office and show us the location of your property.
- 3. GIVE DETAILED DIRECTIONS TO THE PROPERTY IN THE SPACE BELOW.

5. GIVE THE NAMES OF ADJOINING PROPERTY OWNERS IN THE SPACE BELOW, IF KNOWN.

6. LIST ANY EASEMENTS ON YOUR PROPERTY.

7. DESCRIBE ANY IMPROVEMENTS LOCATED ON THE PROPERTY (HOUSES, BARNS, STORAGE, BUILDINGS, ETC.)

8. LIST ANY ADDITION INFORMATION THAT WILL HELP LOCATE YOUR PROPERTY:

FOR 2. IF F 3. HOV 4. HOV 5. HOV 6. If particular 7. WH 8. IF C	USE AND INTENSITY LEVEL QUESTIONAIRE (Answer all that apply to this land) rcel IDOwner's nameOwner's nameOwner's nameOWNERT IS PASTURE LAND: (PLEASE ATTACH ANY RECIEPTS AND/OR DOCUMENTS TO SUPPOR PROPERTY IS PASTURE LAND: (PLEASE ATTACH ANY RECIEPTS AND/OR DOCUMENTS TO SUPPOR W MANY LIVESTOCK DO YOU STOCK? TYPE:OWNANY ACRES OF IMPROVED PASTURE LAND? W MANY ACRES OF IMPROVED PASTURE LAND? W MANY ACRES OF NATIVE PASTURE LAND? W MANY ACRES OF NATIVE PASTURE LAND? HEN WAS IT LAST FERTILIZED? (MONTH/YEAR)			
FOR 2. IF F 3. HOV 4. HOV 5. HOV 6. If particular 7. WH 8. IF C	rcel ID Owner's name PR AGRICULTURAL USE: PROPERTY IS PASTURE LAND: (PLEASE ATTACH ANY RECIEPTS AND/OR DOCUMENTS TO SUPPOR DW MANY LIVESTOCK DO YOU STOCK? TYPE: DW MANY ACRES OF IMPROVED PASTURE LAND? DW MANY ACRES OF NATIVE PASTURE LAND? part of the pasture land is hay meadows, HOW MANY ACRES DO YOU CUT EACH YEAR?			
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7. WH 8. <u>IF C</u>				
8. <u>IF C</u>	HEN WAS IT LAST FERTILIZED? (MONTH/YEAR)			
	. IF CROPLAND: (PLEASE ATTACH ANY RECIEPTS AND/OR DOCUMENTS TO SUPPORT)			
9. WH	HEN WAS IT LAST PLANTED?			
10. WH	10. WHAT TYPE OF CROP WAS PLANTED ON IT?			
11. IS T	THIS LAND RENTED OR LEASED?			
	IF YES, NAME AND ADDRESS OF RENTER OR LEASE HOLDER			
	PHONE#			
FOF	DR TIMBER USE:			

ALL PINE_____MORE THAN 2/3 PINE_____

	MIXED PINE & HARDWOOD						
	ALL HARDWOOD	MORE THAN 2/3 HARDWOOD					
14.	HAS PROPERTY BEEN CUT?	YES WHEN?	NO				
15.	HAS IT BEEN REPLANTED?	YESWHEN?	NO				
	• Did the Texas Forest Service	cost share your planting? YES	NO				
16.	. WHO DO YOU USE FOR DEVELOPING A MANAGEMENT PLAN FOR YOUR LAND?						
	Texas Forest Service						
	Private Consulting Forester	NAME:					
	• Other	NAME:					
	Do NOT have one						

PLEASE INCLUDE A COPY OF YOUR MANAGEMENT PLAN.