



Timber Harvesting Permit Application

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Updated **SEPT 2023**

OFFICE USE ONLY

Date Received: _____ Permit Number: _____

Applicant Information

Name Company

Address

Email Phone

Owner Information

Name Phone

Address

Project Information

Project Name & Description

Location

Tax Map Parcel

Affidavit

I hereby certify that I fully understand the provisions of the City of Pooler Erosion and Sediment Control Ordinance and Program, and that I accept the responsibility for carrying out the Erosion and Sediment Control Plan for the above referenced project as approved by the City of Pooler.

I further grant the right-of-entry onto this property, as described above, to the designated personnel of the City of Pooler for the purpose of inspecting and monitoring for compliance with the aforesaid Ordinance.

Applicant Name Applicant Signature Date