

APPLICATION FOR ENROLLMENT UNDER THE FOREST STEWARDSHIP TAX LAW



Application Nu	mber (NDFS use only)		
To the County (Commission of	Con	unty:
	Print	Name of Owner	_
	An Individual or Corpor	ration or Partnership (circle	one) of,
	Ma	iling Address	
	City,		
	Telephone	E-mail (option	nal)
-	e dedicated to the growing o	of the forestland hereinafter d	
_	=	on to enroll the forestland here x Law (Chapter 57-57, North	
	pt such as are necessarily base	any supplemental sheets attacl sed on estimates, approximation	
`	ignature – President & Sec s of a partnership or by the		Date

For more information and to submit your application, please contact: ND Forest Service

916 E Interstate Ave #4
Bismarck, ND 58503
attn: Liz Smith
or email to: liz.smith@ndsu.edu
701-537-3584

(Please complete next/reverse side)

		legal Description of lands to be enrolled:		
ounty:	Section(S):	Township:		_
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		kimate location of the lar		
		Law. Indicate the best r	oute to reach this forestla	and
nd other pertinent	t information below:			