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| **Original** |  |
| **Amendment** |  |
| **Replace Original** |  |

**April 1, 20**Click or tap here to enter text. **– March 31, 20**Click or tap here to enter text.

Name of Cutting Right Holder:

Address: E-Mail:

THIS SCALING PLAN IS FOR TIMBER CUT UNDER THE FOLLOWING AUTHORITY:

Timber Sale # or Timber Permit Quota #:

**The timber will be delivered to the locations identified below and scaled using the methods indicated below:**

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| **Source/****Location**(Cut block #,indicate if **On-Hand Wood**) | **Final****Destination**(Mill/facility name & town, rail siding, approved stockpile etc.) | **Commodity/****Product**(eg. Kraft, Newsprint, OSB, SWL, HWL, Biomass, Fuelwood, Post & Rails) | **Estimated****Volume**(m3) | **Species**(enter appropriate species or species combination-see abbreviations in Instructions) | **Scaling** **Method**(use codes, see below) | **Scaling****Location**(use codes, see below) | **Licenced Scaler**Licence #(Not required for weigh scale operations) |
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|  |  | **Total** | **0** |  | 1 – Mass a) Roundwood b) Chips 2 – Stack3 – Solid4 – Piece/linear | 1 – Mill gate 2 – In bush3 – Stockpile4 – Other |  |
|  |  | To update **Volume Total** right click and select **“Update field”** |  |  |  |  |

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| SCALING PLAN CONDITIONS: All provisions and requirements of *the Forest Act* and *Regulation* as well as the current *Scaling Manual* must be adhered to.      |

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, DECLARE THAT THE ABOVE INFORMATION IS CORRECT AND AGREE TO THE CONDITIONS THIS APPROVAL SETS OUT.  IF AT ANY TIME THERE IS A CHANGE REQUIRED TO THE ABOVE INFORMATION, I WILL SEND AN AMENDMENT/REPLACEMENT SCALING PLAN TO THE REGIONAL FORESTRY OFFICE.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cutting Right Holder or Designate Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Forestry Office Forestry Signature Date

**INSTRUCTIONS for Completing the electronic version of the Scaling Plan**

1. Open the Scaling Plan form and save it to another location and under an appropriate name.
2. Complete the form, moving between the shaded boxes using the tab or mouse, do not use the *enter key*. Instructions (eg. type in information or select from drop down lists) are shown on the Status bar, at the bottom of the screen, just above the Task bar.
3. Save, print, sign and date the completed form.

The Scaling Plan must be submitted and approved prior to receiving the Work Permit and Operating Permit.

Check the appropriate box to indicate if this is an **original** Scaling Plan, an **amendment** to the original, or a **replacement** for the original.

**E-MAIL**

Please provide an e-mail address to receive future updates and communication.

**SOURCE/LOCATION**

Indicate the cut block or location where the timber will be cut On hand wood from the previous year’s harvest that will be delivered in the new operating year should be included on the Scaling Plan and identified as on hand.

**FINAL DESTINATION**

List the name of the final destination mill/facility. If wood will be transported to an approved stockpile/rail siding prior to delivery to the final destination, indicate this on the Scaling Plan (eg. Baden Stockpile/CKP). Destinations must be reported on an approved Scaling Plan prior to delivery of wood.

**COMMODITY/PRODUCT**

Indicate the commodity/product that the timber will be used for. If timber that is sent to a destination will be used for more than one product, report each on a separate line.

**ESTIMATED VOLUME m3**

Indicate the estimated volume that is expected to be delivered to each destination. The total must not exceed the authorized annual harvest volume for the authority, unless approval for a forward cut has been received.

**SPECIES**

Species listed should be appropriate for the destination. For example, Conifer-ALL can be used for CKP. Abbreviations can be used.

**WS** – White Spruce **TA** – Trembling Aspen

**BS** – Black Spruce **BP** – Balsam Poplar

**JP** – Jack Pine **WB** – White Birch

**BF** – Balsam Fir Poplar-ALL

**TAM** – Tamarack

Spruce – ALL

Conifer - ALL

**CERTIFIED CORRECT BY**

The cutting right holder or designate must print, sign and date the form.

Forestry staff staff must review the Scaling Plan and, if approved, fill in the office location and then sign and date the form. Additional conditions can be typed or written in the SCALING PLAN CONDITIONS box, if required.