



# Bighorn National Forest

## Firewood Permit By Mail



By requesting a permit by mail you are subject to, and in strict compliance with, all the general and other conditions listed on the Bighorn National Forest website for this permit.

Name (Full name as it appears on the ID)	Driver's License, State-issued or Tribal ID	ID Expiration Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
Address (Street or PO Box)		
<input type="text"/>		
City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone Number		
<input type="text"/>		

Number of cords  (4 minimum, 12 maximum) at \$6.00 per cord.

Total fee (see rates below): \$  . Enclose payment in the form of Personal Check, Money Order, or Cashier's Check, made payable to: USDA Forest Service. Do not send cash.

### Rates:

4 cords - \$24.00 minimum	9 cords - \$54.00
5 cords - \$30.00	10 cords - \$60.00
6 cords - \$36.00	11 cords - \$66.00
7 cords - \$42.00	12 cords - \$72.00 maximum
8 cords - \$48.00	

*Your signature on this document is an acknowledgment of your responsibility to read and comply with all permit requirements. Failure to comply with all requirements therein is a violation of 36 CFR 261.10(k), and carries a maximum penalty of \$5,000 and/or six months in jail.*

**Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**INSTRUCTIONS:** ALL blocks MUST be filled in or the permit will not be issued via the mail.

**Permit will be issued and sent back to you. Please sign where indicated on the permit and display on the dashboard of your vehicle when cutting. Please review the information enclosed with your permit. If you have any questions, call a District Office below.**

**TONGUE RANGER DISTRICT**  
2013 Eastside 2<sup>nd</sup> St.  
Sheridan, WY 82801  
Phone: (307) 674-2600

**POWDER RIVER RANGER DISTRICT**  
1415 Fort St.  
Buffalo, WY 82834  
Phone: (307) 684-7806

**MEDICINE WHEEL RANGER DISTRICT**  
95 Highway 16/20  
Greybull, WY 82426  
Phone: (307) 765-4435

**PERMITTEES:** If applicable, fill in the name of the person you are delegating to use your permit, and sign where it reads "Signature" in Part 1. A Forest Officer will complete the rest of the form and return it to you with your completed permit.

**USDA FOREST SERVICE  
AUTHORIZATION FOR REMOVAL OF FOREST PRODUCTS**

The following information is being collected for the purpose of providing reasonable accommodation in the Bighorn National Forest's Forest Products program under TITLE VI, SECTION 504 OF THE CIVIL RIGHTS ACT OF 1964 and SECTION 502 OF THE REHABILITATION ACT OF 1973.

**PART 1 - PERMITEE:**

I hereby authorize \_\_\_\_\_ to  
(Name)  
cut, gather, and haul Forest Products for me under the terms of Permit Number \_\_\_\_\_  
dated \_\_\_\_\_, tag numbers: \_\_\_\_\_.

As Permittee, I understand that I remain responsible for adherence to the terms of the above-named permit, and am not relieved of responsibilities or liabilities assumed hereunder.

Signature: \_\_\_\_\_

**PART 2 – FOREST OFFICER:**

I approve this authorization.

**SIGNATURE:** \_\_\_\_\_ **DATE** \_\_\_\_\_  
(Forest Officer)

Attach Original to Permit  
Attach Copy to Office Copy of Permit