



United States
Department of
Agriculture

National
Forest
Service

Siuslaw
National
Forest

Central Coast Ranger District
P.O. Box 400
Waldport, OR 97394
tel: (541) 563-8400 / fax : (541) 563-8449

Request for Forest Product Permit

An acceptable form of photo identification is required when purchasing a permit. Examples of acceptable identification are valid Driver's License, State ID, Green Card or Passport. The individual is required to be 18 years or older to purchase a permit.

Allow a minimum of two weeks for processing your request.

Name of Permittee: _____ Phone: _____

Address: _____

To facilitate the processing of your request, please fill in the product, quantity, and area description.

Product/Type(s): _____ Quantity: _____

Circle One: Commercial Use Personal Use

Circle Applicable: Cuttings Cut Flowers Fiddleheads Greenery Roots Seeds Transplants

Area description*: _____

*It is recommended that the permittee know the specific area (including road numbers) where they would like to harvest before purchasing a permit. For more information on available areas, contact the local District office where you plan to harvest.

----- Office use only -----

Date Submitted: _____ Office: Waldport Reedsport Corvallis

Comments or special conditions: _____

Termination date: 30 Days 60 Days Other _____

This form is for information use only and is not an authorization to cut or remove any forest product. Permits and required tags are to be obtained at the office listed above.

Approved/ Disapproved by _____ Date: _____
(Circle one) Signature of SA/SFP Coordinator