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 _____

Address (Street or PO Box) _____

City _____ State _____ Zip Code _____

Telephone Number _____

Number of cords _____ (3 minimum, 12 maximum) at $7.50 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:

3 cords - $22.50 minimum	8 cords - $60.00
4 cords - $30.00	9 cords - $67.50
5 cords - $37.50	10 cords - $75.00
6 cords - $45.00	11 cords - $82.50
7 cords - $52.50	12 cords - $90.00 maximum

Your signature on this document is an acknowledgement 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 <u>will not be issued</u> 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 2nd St.
Sheridan, WY 82801
Phone: (307) 674-2600

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

MEDICINE WHEEL/PAINTROCK RANGER DISTRICT
604 E. Main
Lovell, WY 82431
Phone: (307) 548-6541

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