Allow a minimum of two weeks for processing your request.

Request for Forest Product Permit

An acceptable for 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.

Name of Permittee:	Phone:						
Address:							
To facilitate the processing	of your request, please	fill in the product	quantity, and a	rea descrip	otion.		
Product/Type(s):	Quantity:						
Check One:	Commercial Use	Personal Use					
Check Applicable: Cuttin	gs Cut Flowers	Fiddleheads	Greenery	Roots	Seeds	Transplants	
Area description*:							-
*It is recommended that the permitee 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:		Offic	e: Waldport	Reed	Isport	Corvallis	Hebo
Comments or special conditions:							
Termination date:	30 Days	60 Days	Oth	er			
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 b	у			Date:			
(Circle one)	Signature of SA/SFP C	Coordinator					