Mt. Hood National Forest

Special Forest Products Request Form

Please allow t	wo weeks befo	re checking status	s of your Special l	Forest	Product (SFP) request.	
Date: Phone Number:			Name:			
Request (desc	cribe product ar	d quantity):				
Location (Roa	nd Number(s), d	istance from neare	est junction, T/R/S,	GPS,	etc.):	
	drop off requ	est to one of the		S :		
Westside			Eastside			
Clackamas River Ranger District Attn: SFP Coordinator 16400 Champion Way Sandy, OR 97055			Barlow Ranger District Attn: SFP Coordinator 780 NE Court Street Dufur, OR 97021			
Email: cara.lewis@usda.gov Fax: 503-668-1641 Phone: 971-333-4100			Email: mark.terhune@usda.gov Fax: 541-467-2271 Phone: 541-467-2291			
	STOP! The I	pelow information	n is to be comple	eted by	y Forest Service <u>only</u> .	
					roduct/Species: Term Length:	
Comments:			-oud rugs. 103		Tom Longui.	
Reviewing Officer Signature:						
Notification D	ate:	Notes:				