

# Interior Stumpage Rate Request Form (short form)

SOUTH:(RSI Procedures and current Short Form found [here](#))NORTH:(RNI Procedures and current Short Form found [here](#))

BCTS Funded ☐ Advertising stumpage rate: Yes ☐ Advertising works contract: Yes ☐ FESBC or WRR Funded ☐

## Rate Calculation Method

| IAM Sec.                       | <i>Non-adjusting - redetermined annually</i>                                                                                                              | IAM Sec.                                 | <i>Fixed for term and all extensions</i>                                                                                                                                                                                                                                                                                                     |
|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 6.1.1 <input type="checkbox"/> | <b>Community Forest Agreement - May 1 &amp; Nov 1</b><br>(all cutting authorities) Table 6-2                                                              | 5.1.1(2) <input type="checkbox"/>        | <b>BCTS Decked or Partially Harvested Timber</b><br>Requested rate \$/m <sup>3</sup> <b>OR</b> Upset Value \$                                                                                                                                                                                                                                |
| 6.1.2 <input type="checkbox"/> | <b>Woodlot Licences – May 1 &amp; Nov 1</b> (CP, BSP or RP)<br>Table 6-2                                                                                  | 6.2(1) <input type="checkbox"/>          | <b>Cutting Authorities With 5000 m<sup>3</sup> or Less Volume</b><br>≤2000m <sup>3</sup> , licence with ≤3000m <sup>3</sup> AAC or no coniferous AAC<br>Table 6-1                                                                                                                                                                            |
| 6.1.3 <input type="checkbox"/> | <b>Incidental Conifer in Deciduous Leading Stands</b><br><b>May 1 &amp; Nov 1</b> Table 6-3 ( <i>average rate</i> )                                       | 6.2(2) <input type="checkbox"/>          | Competitive cutting authorities with ≤5000m <sup>3</sup><br>Scale based (70% of Table 6-1) <b>OR</b><br>Regional Manager Requested Rate Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                                                                                             |
| 6.3 <input type="checkbox"/>   | <b>Road Permit Stumpage Rates – May 1</b><br>(Including Woodlot Road Timber Marks with an eligible ERA)<br>If Sec. 6.3(7) -Associated Licence is required |                                          | <b>FLTC for Specific Purposes (No Volume Limit)</b>                                                                                                                                                                                                                                                                                          |
| 6.4.2 <input type="checkbox"/> | <b>Blanket Salvage Cutting Authorities – Licences with an AAC (Scale Based) - May 1 &amp; Nov 1</b> Table 6-4                                             | 6.2.1(1)(a) <input type="checkbox"/>     | Awards to the highest bidder: Scale Based*                                                                                                                                                                                                                                                                                                   |
| 6.4.2 <input type="checkbox"/> | <b>≥ 80% Burnt – May 1 &amp; Nov 1</b> Table 6-4a                                                                                                         | 6.2.1(1)(b) <input type="checkbox"/>     | Awards to the highest bidder: Cruise Based*<br>*Include a completed <a href="#">Variable Cost Update Rate calculation form</a> with the submission.                                                                                                                                                                                          |
| 6.4.3 <input type="checkbox"/> | <b>Cruise Based Salvage Cutting Authorities – redetermine per IAM 6.4.3(7)</b> Table 6-6<br>attach Cruise Based Salvage CP Data Sheet                     |                                          | Direct award FLTC for community wildfire protection, <b>or</b> , for FLTC issued to lowest bidder on a contract for community wildfire protection                                                                                                                                                                                            |
| 6.7 <input type="checkbox"/>   | <b>Licences to Cut-Non-Forestry Tenures – May 1 &amp; Nov 1</b> Table 6-3 ( <i>ESC rate</i> )<br>Specific:                                                | 6.2.1(1)(c)(i) <input type="checkbox"/>  | (i) Table 6-1 rates                                                                                                                                                                                                                                                                                                                          |
|                                |                                                                                                                                                           | 6.2.1(1)(c)(ii) <input type="checkbox"/> | (ii) Damaged Timber (> 1/3 of volume damaged by blow down, fire, disease, snow press, or pest) Table 6-4<br>Rate required for advertising? Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                                                                                          |
| 6.8 <input type="checkbox"/>   | <b>Controlled Recreation Areas (CRAs)</b><br>Coniferous sawlog average rate for controlled recreation areas                                               | 6.2.1(1)(d) <input type="checkbox"/>     | Direct award FLTC issued to the lowest bidder on a contract for removing damaged timber from natural stands or plantations                                                                                                                                                                                                                   |
|                                |                                                                                                                                                           | 6.2.1(1)(e) <input type="checkbox"/>     | Timber on the cutting authority area will be scaled as chips or hogged tree Material                                                                                                                                                                                                                                                         |
|                                |                                                                                                                                                           |                                          | <b>Salvage Timber Stumpage Rates</b> –Licences without an AAC<br>*Clear cuts must not exceed 5.00ha*                                                                                                                                                                                                                                         |
|                                |                                                                                                                                                           | 6.4.1(5)(a) <input type="checkbox"/>     | <b>Damaged Timber</b> (>1/3 of volume damaged by blow down, fire, disease, snow press, or pest) Table 6-4                                                                                                                                                                                                                                    |
|                                |                                                                                                                                                           | 6.4.1(5)(a)(i) <input type="checkbox"/>  | <b>≥ 80% Burnt</b> Table 6-4a                                                                                                                                                                                                                                                                                                                |
|                                |                                                                                                                                                           | 6.4.1(6) <input type="checkbox"/>        | <b>Post Harvest Material</b> (wood culverts and bridges, or post logging residue) *incl'd sawlog component* Table 6-5                                                                                                                                                                                                                        |
|                                |                                                                                                                                                           | 6.4.4 <input type="checkbox"/>           | <b>BCTS Salvage TSL</b> attach prorated Table 6-4 or Table 6-4a data sheet                                                                                                                                                                                                                                                                   |
|                                |                                                                                                                                                           | 6.5 <input type="checkbox"/>             | <b>Decked and Partially Harvested Timber for a non-BCTS Cutting Authority</b><br>Competitive Yes <input type="checkbox"/> No <input type="checkbox"/><br><b>Decked</b> > 3 yrs <input type="checkbox"/> ≤ 3yrs <input type="checkbox"/><br><b>Partially Harvested Timber</b> > 3yrs <input type="checkbox"/> ≤ 3yrs <input type="checkbox"/> |
|                                |                                                                                                                                                           | 6.5(5)(b) <input type="checkbox"/>       | <b>Regional Manager approved rate</b>                                                                                                                                                                                                                                                                                                        |
|                                |                                                                                                                                                           | 6.6 <input type="checkbox"/>             | <b>Miscellaneous Stumpage Rates</b> Table 6-7<br>Species: _____ Product: _____                                                                                                                                                                                                                                                               |
|                                |                                                                                                                                                           | 6.7 <input type="checkbox"/>             | <b>Licences to Cut FLTC</b> issued under section 47.6(3) of <i>The Act</i> in conjunction with a BCTS contract.<br>Table 6-3 ( <i>ESC rate</i> )                                                                                                                                                                                             |
|                                |                                                                                                                                                           | 6.7.1 <input type="checkbox"/>           | <b>Area Based Stumpage Rate</b><br><input type="checkbox"/> < than 10 hectares. Table 6-8<br><input type="checkbox"/> > than 10 hectares. Table 6-3 ( <i>ESC rate</i> )<br><input type="checkbox"/> Category 2 <input type="checkbox"/> Category 3                                                                                           |

The **Interior Appraisal Manual Chapter 6 Procedures** document saved [here](#) provides additional details specific to completing this form.

The default colour for **checkboxes** is **blue** and the default colours for text input boxes is **orange for optional** and **red for mandatory**. If the document colours are displaying differently, it could be related to your "Forms" highlight settings in your Acrobat preferences. These settings are accessed through the Edit menu under Preferences and the Forms category.

| Submission Details                                                                                                                                                                             |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|------------|
| Licensee Name:                                                                                                                                                                                 | Licence #:   | Timber Mark:                                                                                                                                                                                                                                                                                                                                                                                                                 | CP#:                | RP#:       |
| Forest District:                                                                                                                                                                               | Forest Zone: | Area (ha):                                                                                                                                                                                                                                                                                                                                                                                                                   | Timber Supply Area: |            |
| Effective Date:                                                                                                                                                                                | Expiry Date: | TSA Block:                                                                                                                                                                                                                                                                                                                                                                                                                   |                     |            |
| Additional Requirements                                                                                                                                                                        |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Volume Estimates                                                                                                                                                                               |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Total Coniferous Volume:                                                                                                                                                                       |              | m³                                                                                                                                                                                                                                                                                                                                                                                                                           |                     |            |
| Total Deciduous Volume:                                                                                                                                                                        |              | m³                                                                                                                                                                                                                                                                                                                                                                                                                           |                     |            |
| Silviculture                                                                                                                                                                                   |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Silviculture Responsibility: (For Sec. 6.5: If no Silviculture obligations exist, enter \$0.00 in Silviculture Levy field)<br>Crown <input type="checkbox"/> Licensee <input type="checkbox"/> |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Apply Silviculture Levy for the following Grades:<br>1 & 2: <input type="checkbox"/> 4: <input type="checkbox"/> 6: <input type="checkbox"/> Deciduous: <input type="checkbox"/>               |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Silviculture Levy: \$          per m³                                                                                                                                                          |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Bonus Section                                                                                                                                                                                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Bonus Offer : <input type="checkbox"/><br>Amount: \$                                                                                                                                           |              | Bonus Bid: <input type="checkbox"/><br>\$/m³                                                                                                                                                                                                                                                                                                                                                                                 |                     |            |
| Apply bonus bid to the following Grades:<br>1 & 2: <input type="checkbox"/> , 4: <input type="checkbox"/> , 6: <input type="checkbox"/> Deciduous: <input type="checkbox"/>                    |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Re-advertised <input type="checkbox"/>                                                                                                                                                         |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Comments (Submitter & District)                                                                                                                                                                |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
|                                                                                                                                                                                                |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
|                                                                                                                                                                                                |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Comments (Region)                                                                                                                                                                              |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
|                                                                                                                                                                                                |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
|                                                                                                                                                                                                |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Authority:                                                                                                                                                                                     |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| This Appraisal Data Submission must be submitted by a forest professional unless appraised under sections 6.1.1, 6.1.2 or 6.3 of the IAM                                                       |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Select who completes the form and takes responsibility for the content of this form:                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Licensee Representative: Yes <input type="checkbox"/>                                                                                                                                          |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| District Review Officer: Yes <input type="checkbox"/>                                                                                                                                          |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Name of Licensee Representative:                                                                                                                                                               |              | Name of District Review Officer:                                                                                                                                                                                                                                                                                                                                                                                             |                     |            |
| Email:                                                                                                                                                                                         |              | Email:                                                                                                                                                                                                                                                                                                                                                                                                                       |                     |            |
| Phone #:<br>Date Acknowledged:<br>Licensee to send submission to District staff or District email address                                                                                      |              | Phone #:<br>Date Acknowledged:<br>Changes Made? Yes <input type="checkbox"/> No <input type="checkbox"/><br>Submitter Notified? Yes <input type="checkbox"/> No <input type="checkbox"/><br>Field Verified? Yes <input type="checkbox"/> No <input type="checkbox"/><br><br>District Review Officer to Email submission to either:<br><b>South:</b> REVSFRMS@gov.bc.ca <b>OR</b><br><b>North:</b> RNIREVShortForms@gov.bc.ca |                     |            |
| RPF: Yes <input type="checkbox"/> Number:                                                                                                                                                      |              | RPF: Yes <input type="checkbox"/> Number:                                                                                                                                                                                                                                                                                                                                                                                    |                     |            |
| RFT: Yes <input type="checkbox"/> Number:                                                                                                                                                      |              | RFT: Yes <input type="checkbox"/> Number:                                                                                                                                                                                                                                                                                                                                                                                    |                     |            |
| Regional Revenue Employee                                                                                                                                                                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Name: <input type="text"/>                                                                                                                                                                     |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Date: <input type="text"/>                                                                                                                                                                     |              |                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |            |
| Attach Files                                                                                                                                                                                   |              | Return/Submit                                                                                                                                                                                                                                                                                                                                                                                                                |                     | Clear Form |