

Kamloops Forest Region Application to Designate Site of Scale



Pursuant to the <i>Forest Act</i> and the Scali mark scaled at the			nber from tin	
Name of Scaling Site	Site Number	Location	Specie	Vol. or Approx. # of Loads
Mark Holder (Mandatory Information) (Please Print)		Applicant (If Different from Mark Holder) (Please Print)		
Full Name Mark Holder's		Full Name Applicant's		
Address		Address		
Postal Code		Postal Code		
Signature of Mark Holder		Signature	e of Appli	c a n t
Telephone Number of Mark Ho	Telephone Number of Applicant			
I declare that the properties covered by the truck loads) of timber on them. I request ex				`
		Signature of timber	mark holder	
This application must be delivered to the Mi	nistry of Forest	ts District Office from which	ch the timber	originates.
Forest Service Use Only				
Elected final billing:YesNo If yes,	forward to scali	ng clerk. Scale site notifie	ed:	
		Authorizers initia		
Expiry [Date Of Mark:			