Borough of St. Lawrence

135 N PROSPECT ST. Reading
PA 19606-2372 610.779.1430
Fax: 610.779.9148
E-mail: permits@stlawboro.us

Permit #

Forestry/Timber Harvest: Fee Schedule Resolution 908-2025

Application Fee	$ 250.00
Plan Review Fees	Actual Charge by Consultant
Inspection Fees:	
Borough Staff	$ 75.00/inspection
Consultants	Actual Charge by Consultant

ZONING APPLICATION – TIMBER HARVESTING

It is the responsibility of the property owner and the timber harvester to:

1. seek any State Agency approvals required for timber harvesting activities
2. where required, install and maintain all stormwater, sedimentation and erosion controls in compliance with BCCD and DEP approved soil erosion and sedimentation pollution control
3. when required, provide two copies each of the BCCD approved plan and the Forestry Management Plan
4. be liable for damages to adjacent properties

PROPERTY INFORMATION:

Property Location:_____ Tax ID# 81-_____

Property Owner_____ Telephone_____

Address_____ Cell Phone_____

_____ Zoning District_____

Email_____

TIMBER HARVESTER INFORMATION:

Name_____ Telephone _____

Business Name_____ Telephone _____

Address _____ Cell Phone _____

_____ Email _____

☐ Clear cutting of two acres or less ☐ Selective cutting of five acres or less

☐ Other, _____ acreage to be disturbed

Describe work to be completed_____

_____

_____

_____

MUNICIPAL ROADS:

LIST OF MUNICIPAL ROADS TO BE USED TO TRANSPORT HARVESTED MATERIALS (PROVIDE A MAP OF PLANNED ROUTES):_____

_____

_____

TYPE OF VEHICLES (INCLUDE MAXIMUM GROSS WEIGHT) TO BE USED TO TRANSPORT HARVESTED MATERIALS:

_____

INFORMATION MAY BE ATTACHED TO THE APPLICATION

CERTIFICATION:

I hereby certify that I am the owner of record of the named property and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Zoning Officer shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions for the code(s) applicable to such permit.

_____ _____

Signature of PROPERTY OWNER Date

_____

Print Name

DEPARTMENT APPROVALS

Zoning Official _____ **Date Approved** _____ **FEE** _____