

APPLICATION FOR
STATE FOREST AUTHORIZATION - STATE FOREST PERMISSION



NEW APPLICATION

Application No: GFC/Div/SF/

Application Fee

Part 1: (To be completed by Applicant)

1. Name of applicant

2. If application is made by individual or Registered Business –

(a) Residential Address

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(b) Contact Details

Home Mobile

E-mail

(c) Postal Address (if different)

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(d) Nationality

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(e) National Identity Number

(f) If registered as a business:

Date registered Expiration date

3. If application is made by a body corporate-

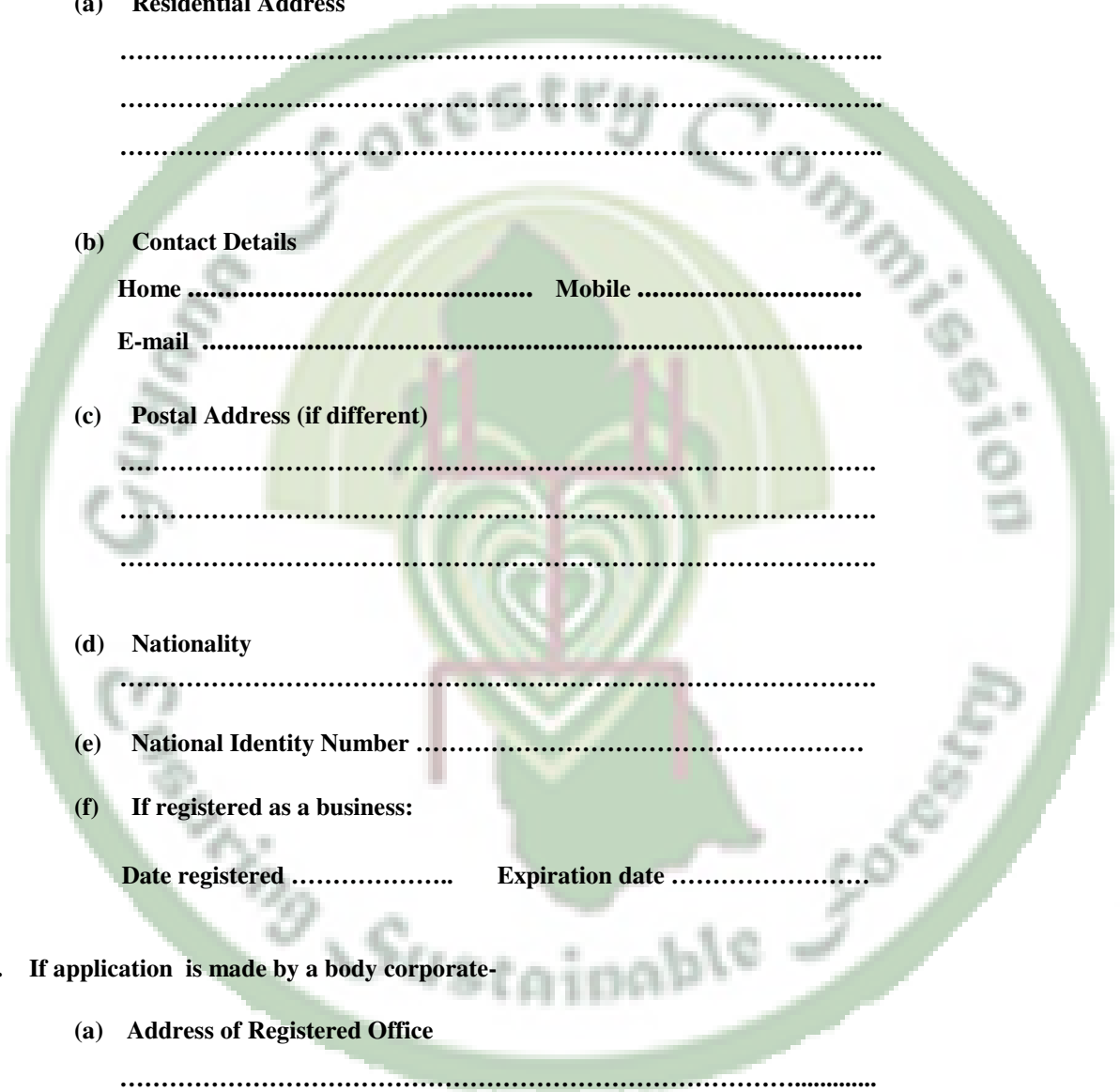
(a) Address of Registered Office

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(b) Office # Fax#

E-mail

(d) Date & Place of Incorporation (Applicant are required to provide a copy of Certificate of Incorporation of equivalent)



(e) Nature of business

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(f) Names, addresses and nationality of directors or equivalent officers –

<u>Name</u>	<u>Address</u>	<u>Equity</u>
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(g) Financial Status [Applicants may be required to provide proof of Corporation Tax Registration and payment over the previous year or for such other period as the Commissioner of Forest may determine]

(h) Name(s) of Signatory or Signatories

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4. Identify the area in respect of which the application is made (map or plan to be attached)

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5. Full particulars of technical competence and previous experience in forest exploration and production operations [Applicants are required to provide a record of their exploration and production experience in Guyana]

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6. Description of proposed Operations(Please specify the number of people to be employed and the quantity and type of equipment to be used)

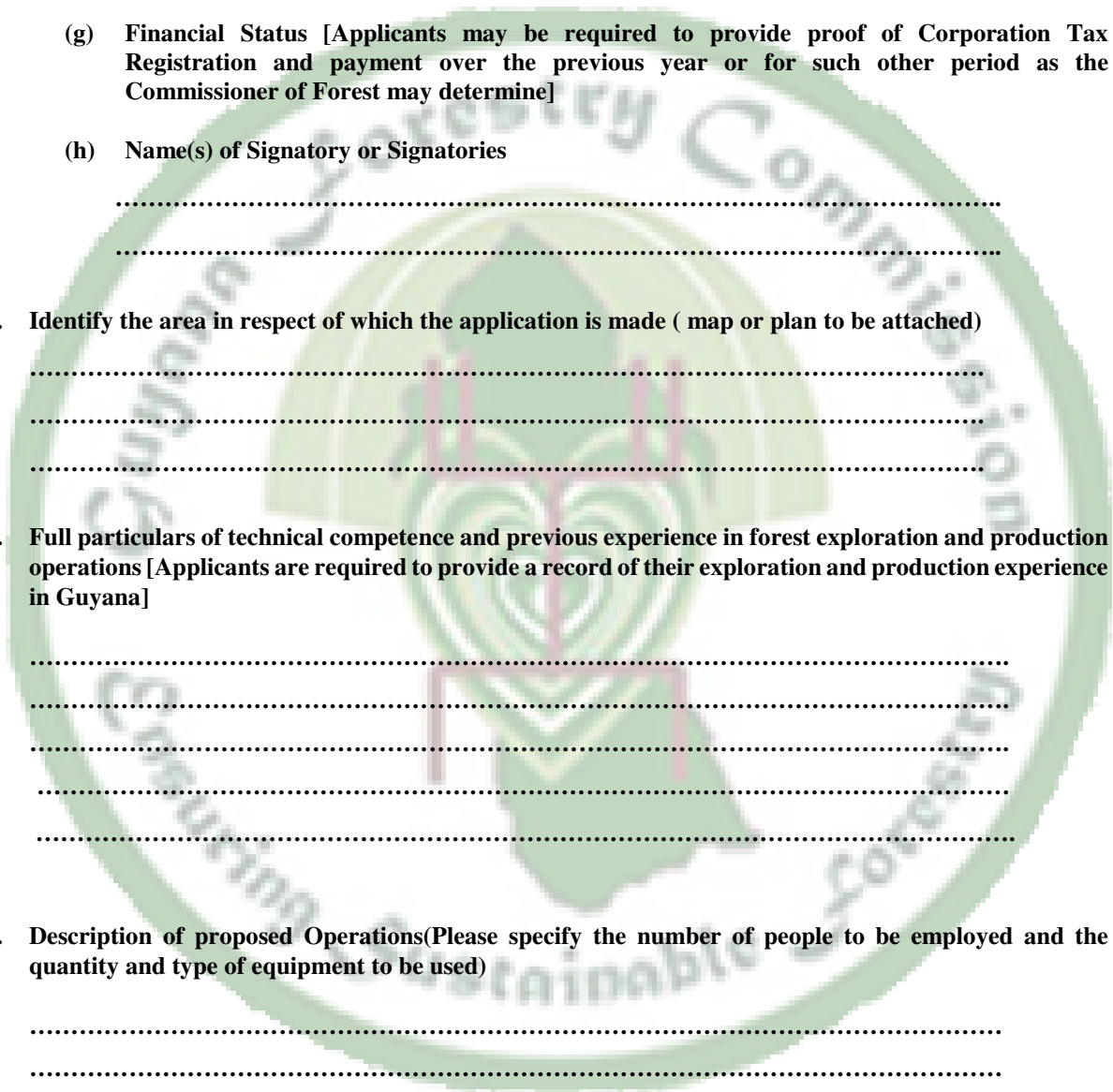
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7. Give details of forest produce required.

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8. State proposed markets for the produce.

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9. Application shall be accompanied by a fee of \$ and such other monies or that the commission may consider.

10. Application will not be accepted if there are any outstanding debts to the GFC by the applicant.

- 1 Active/valid Business Registration (if registered as a business entity)
- 2 TIN certificate
- 3 EPA Permit (or evidence that application has applied for same, including receipt showing that an application was made for same)
- 4 Certificate of Incorporation (if registered as a company)
- 5 Valid form of identification (ID or passport)
- 6 List of equipment/machinery with individual serial and chassis numbers, proof of ownership/legal access to these equipment/machinery (receipts, agreement of sale, valid acceptable rental agreement registration etc.) A current photograph of each piece of equipment must also be submitted and proof of ownership (registration, receipts etc.)
- 7 GRA Compliance (for application)
- 8 Police clearance (for application)
- 9 NIS Compliance (for application)
- 10 List of employees/ list of members with copies of picture ID's

I/WE DECLARE:

- I. That I/WE have inspected the vacant area applied for herein and I/We am/are satisfied that it is adequately stocked with forest produce suitable for my/our purpose.
- II. That I/WE am/are aware that a specified Quota of forest produce and Log Tracking Tags will be associated with the issuance of any SFA-SFP document and I/WE agree to harvest timber within the Quota specified.
- III. That I/WE have the financial capability to pay in a timely manner all monies (issuance, acreage and other fees etc) due on the SFA-SFP document and the (Forest Produce Royalty) due on all Removal Permits received and that I/WE undertake to pay all monies in a timely manner and or upon demand of the GFC.
- IV. That I/We have the technical capabilities to harvest forest produce in a sustainable manner from within the concession area and to do so in accordance with the Forest Act, Forest Regulations and the GFC rules, procedures etc.
- V. That I/We have made other applications for vacant areas under the current vacant list advertised by the GFC.
- VI. That I/We am/are not affiliated with any Individual/Company/Business owner and or Association currently the holding two or more forest concessions.
- VII. I/We am/are affiliated in the manner described above and do hereby provide the details of the Individual/Company/Business owner and or Association I/We am/are affiliated with
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- VIII. That I/We have no relations with or to any forest officer, employee and or other relevant staff currently employed with the GFC.
- IX. I/We am/are related in the manner described above and I/We hereby provide the details of the forest Officer, employee and or member of staff in question.
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- X. That as of the date of this application for a vacant area, I/We am/are not indebted to the GFC.
- XI. I/We have not been previously arrested, charged and or convicted of any serious crimes for which the punishment is imprisonment.
- XII. I/We do hereby acknowledge and declare that all the foregoing particulars/information and accompanying documents are within my knowledge and are true and correct;
- XIII. That I/WE shall abide by the Forest Act, Forest Regulations and any other condition(s) contained in the State Forest Authorizations; GFC codes of practice etc.

XIV. That I/We do hereby recognize the GFC's authority to terminate any contract that maybe awarded to Me/Us as a result of the particulars/information provided herein; where it is later discovered that the said particulars/information was false.

Date

Signature 1

Signature 2

Witnesses

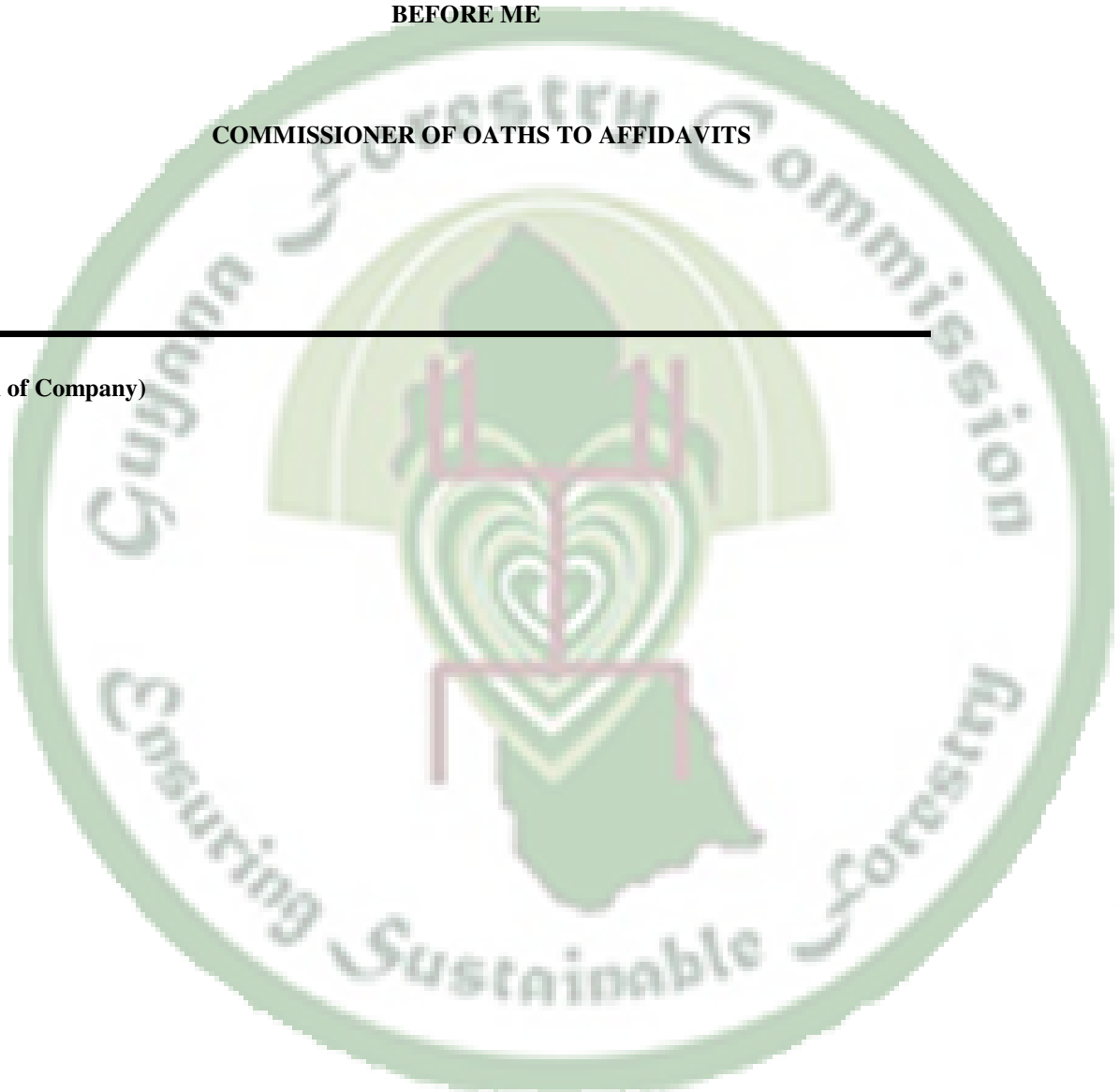
1.

2.

BEFORE ME

COMMISSIONER OF OATHS TO AFFIDAVITS

(Seal of Company)



Part 8: Decision by commissioner of Forest

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Date Signature

Part 9: to be completed by ACF, Forest Resource Planning

Folio Number / / Date of Issue / / Date of Expiry / /
Quota Volume (m³) Number of Tags
Date dispatched to Forest Monitoring Division
Signature of ACF, Forest Resource Planning Date

Part 10: to be completed by Forest Monitoring Division

Folio Number / / Date of Issue / / Date of Expiry / /
Tag Numbers Allocated Quota Volume
Comments
Signature of ACF, Monitoring Date

Annual Management Charge \$

Volume Charges \$

Issue Fees \$

Part 11: Information to be supplied from Forest Monitoring Division

Permission Fees \$

Area Management Charges paid vide Receipt No

Volume Charges paid:

	Amount G\$	Receipt No.	Date
1 st Installment			
2 nd Installment			
3 rd Installment			
4 th Installment			

Signature of Officer Date

Notes

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