

American Forest Foundation

Tree Farm Inspection Record

AFF Form 004 Revised 3/10

State _____ Tree Farm Number _____



Reinspection Only: Recertification Pioneer Decertification
Select a reason below

Initial Inspection Only: Pioneer Certified Deceased Sold No Interest Substandard Missing Owner

*Field Inspection Date ____/____/____
 *Tree Farmer Interview Date ____/____/____ Type: Field Phone Email

Tree Farmer

Owner _____
 Last or Organization Name _____ First Name _____ MI _____

Address _____

City _____ ST _____ Zip _____

Phone _____ E-Mail _____

Tree Farm

Ownership Private (Non-Industrial) Other _____

Acreage _____ County _____

Property Legal Address* _____

Directions to Property _____

GPS Coordinates _____

Absentee landowner? Yes No

Inspecting Forester

Name _____
 Last Name _____ First Name _____ MI _____

ID # _____ Phone _____

Email _____

Recommendations

Harvest Method.....

Stand Improvement.....

Reforestation.....

Protection.....

Wildlife.....

Recreation/Access

Management Plan Location:

Notes:

Recent Forest Management Activity *

| Harvest Method | Acres | Comments |
|---|-------|----------|
| <input type="checkbox"/> Coppice..... | _____ | _____ |
| <input type="checkbox"/> Even-Aged..... | _____ | _____ |
| <input type="checkbox"/> Uneven-Aged..... | _____ | _____ |
| <input type="checkbox"/> Other..... | _____ | _____ |
| Total Volume MBF | _____ | _____ |
| Stand Improvement | | |
| <input type="checkbox"/> Thinning..... | _____ | _____ |
| <input type="checkbox"/> Pruning..... | _____ | _____ |
| <input type="checkbox"/> Fertilization..... | _____ | _____ |
| <input type="checkbox"/> Vegetation Control | _____ | _____ |
| <input type="checkbox"/> Other..... | _____ | _____ |
| Reforestation | | |
| <input type="checkbox"/> Natural..... | _____ | _____ |
| <input type="checkbox"/> Seeded/Planted..... | _____ | _____ |
| <input type="checkbox"/> Other..... | _____ | _____ |
| Protection | | |
| <input type="checkbox"/> Fire..... | _____ | _____ |
| <input type="checkbox"/> Insect..... | _____ | _____ |
| <input type="checkbox"/> Disease..... | _____ | _____ |
| <input type="checkbox"/> Erosion Control..... | _____ | _____ |
| <input type="checkbox"/> Other..... | _____ | _____ |
| Wildlife | | |
| <input type="checkbox"/> Food Plots..... | _____ | _____ |
| <input type="checkbox"/> Shelter/Habitat..... | _____ | _____ |
| <input type="checkbox"/> Other..... | _____ | _____ |
| Recreation/Access..... | | |
| <input type="checkbox"/> Trails/Roads..... | _____ | _____ |
| <input type="checkbox"/> Scenic Value..... | _____ | _____ |
| <input type="checkbox"/> Other..... | _____ | _____ |

Authorization

* State Approval _____ Date ____/____/____ Certification Approved: Yes No

Regional Approval _____ Date ____/____/____ Certification Recommended: Yes No

* Inspecting Forester¹ _____ Date ____/____/____ Certification Recommended: Yes No

Tree Farmer² _____ Date ____/____/____

1. See last page for AFF Standards of Sustainability Standards Checklist.
 2. Signature affirms compliance with all relevant laws/regulations and permits agents of ATFS ingress and egress for inspection/verification purposes.
 + = Optional Info * **Must fill out for required sample inspections**

American Forest Foundation Standards of Sustainability - Standards Checklist

| Performance Measure / Indicator | Y | N | N/A |
|---|--------------------------|--------------------------|--------------------------|
| PM 1.1: Forest owner must have and implement a written forest management plan consistent with the size of the forest and the scale and intensity of the forest activities. | <input type="checkbox"/> | <input type="checkbox"/> | |
| I 1.1.1: Management plan must be active, adaptive, and embody the landowner's current objectives, remain appropriate for the land certified, and reflect the current state of knowledge about forestry and natural resource management. | <input type="checkbox"/> | <input type="checkbox"/> | |
| I 1.1.2: Management plans must include: clearly state landowner's objectives, describe desired forest condition, include management activities aimed at reaching the desired forest condition and landowner's objectives, document a feasible strategy for activity implementation, and include a tract map accurately depicting significant forest related resources. | <input type="checkbox"/> | <input type="checkbox"/> | |
| REQUIRED: Where present, and relevant to the property, the plan must address the following resource elements: forest health, soil, water, wood and fiber production, threatened and endangered species, special sites, invasive species, integrated pest management, and high conservation value forests. | <input type="checkbox"/> | <input type="checkbox"/> | |
| SUGGESTED: Where present, relevant to the property, and consistent with landowner's objectives, the plan preparer may consider, describe and evaluate the following resource elements: fire, wetlands, desired species (fish, wildlife and plant), recreation, aesthetic quality, biomass and carbon. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 1.1.3: Forest owner should monitor for changes that could interfere with the management objectives as stated in management plan (e.g., presence of invasive species, pest outbreaks, and indications of trespass). When problems are found, reasonable actions are taken. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments _____ | | | |

| | | | |
|---|--------------------------|--------------------------|--------------------------|
| PM 2.1: Forest owner must comply with all relevant federal, state, county, and municipal laws, regulations, and ordinances. | <input type="checkbox"/> | <input type="checkbox"/> | |
| I 2.1.1: Forest owner must comply with all relevant laws, regulations and ordinances and will correct conditions that led to adverse regulatory actions, if any. | <input type="checkbox"/> | <input type="checkbox"/> | |
| I 2.1.2: Forest owner should obtain advice from appropriate professionals, or contractors who are trained in, and familiar with, relevant laws, regulations and ordinances. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments _____ | | | |

| | | | |
|--|--------------------------|--------------------------|--------------------------|
| PM 3.1: Reforestation or afforestation must be achieved by a suitable process that ensures adequate stocking levels. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 3.1.1: Harvested forest land must achieve adequate stocking of desired species reflecting the forest owner's management objectives, within five years after harvest, or within a time interval as specified by applicable regulation. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments _____ | | | |

| | | | |
|---|--------------------------|--------------------------|--------------------------|
| PM 4.1: Forest owner must meet or exceed practices prescribed by State Forestry Best Management Practices (BMPs) that are applicable to the property. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 4.1.1: Forest owner must implement specific BMPs that are applicable to the property. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 4.1.2: Forest owner must minimize road construction and other disturbances within riparian zones and wetlands. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments _____ | | | |

| | | | |
|---|--------------------------|--------------------------|--------------------------|
| PM 4.2: Forest owner must consider integrated pest management to control pests, pathogens and unwanted vegetation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 4.2.1: Forest owner should evaluate alternatives to manage pest, pathogens and unwanted vegetation to achieve specific management objectives. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 4.2.2: Pesticides used must be EPA-approved. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 4.2.3: Pesticides must be applied, stored and disposed of in accordance with EPA-approved labels and by persons appropriately trained, licensed and supervised. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments _____ | | | |

| | | | |
|---|--------------------------|--------------------------|--------------------------|
| PM 4.3: When used, prescribed fire must conform with forest owner's objectives, the forest management plan and pre-fire planning. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 4.3.1: Prescribed fire must conform with the management plan and state and local laws and regulations. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments _____ | | | |

| | | | |
|-----------------------------|------------------------|----------------------------|--|
| <i>Required Information</i> | | | |
| Landowner's Last Name _____ | | | |
| State _____ | Tree Farm Number _____ | Inspector's Initials _____ | |

American Forest Foundation Standards of Sustainability - Standards Checklist

| Performance Measure / Indicator | Y | N | N/A |
|--|--------------------------|--------------------------|--------------------------|
| PM 5.1: Forest management activities must maintain or enhance habitat for threatened or endangered communities and species. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 5.1.1: Forest owner must confer with natural resource agencies, state natural resource heritage programs or review other sources of information to determine occurrences of threatened and endangered species on the property and their habitat requirements. | <input type="checkbox"/> | <input type="checkbox"/> | |
| I 5.1.2: Forest management activities must incorporate measures to protect identified threatened and endangered species. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments _____ | | | |
| PM 5.2: Forest owner should address the desired species (fish, aquatic, wildlife, and plant) and/or desired forest communities in the management plan and forest management activities. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 5.2.1: Forest owner should consult available and accessible information on management of the forest for desired species (fish, aquatic, wildlife, and plant) and/or forest communities and integrate it into forest management. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments _____ | | | |
| PM 5.3: Forest owner should make practical efforts to prevent, eradicate or otherwise control invasive species. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 5.3.1: Forest owner should make practical efforts to prevent, eradicate or otherwise control invasive species using a range of integrated pest management methods | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments _____ | | | |
| PM 5.4: Forest management activities should maintain or enhance rare species and high conservation value forests. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 5.4.1: Appropriate to the scale and intensity of the situation, forest management activities should incorporate measures to protect or mitigate impacts on rare species and identified high conservation value forests. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments _____ | | | |
| PM 6.1: Forest owner should manage the visual impacts of forest management activities consistent with the size of the forest, the scale and intensity of forest management activities and the location of the property. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 6.1.1: Forest management activities should apply visual quality measures compatible with appropriate silvicultural practices. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments _____ | | | |
| PM 7.1: Forest management activities must maintain special sites. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 7.1.1: Forest owner must make a reasonable effort to locate and protect special sites appropriate for the size of the forest and the scale and intensity of forest management activities. | <input type="checkbox"/> | <input type="checkbox"/> | |
| Comments _____ | | | |
| PM 8.1: Forest owner should use qualified natural resource professionals and qualified contractors when contracting for services. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 8.1.1: Forest owner should seek qualified natural resource professionals and qualified contractors. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 8.1.2: Forest owner should engage contractors that carry appropriate insurance and comply with appropriate federal, state and local safety and fair labor rules, regulations and standard practices. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I 8.1.3: Forest owner should retain appropriate contracts for forest product harvests and other management activities to demonstrate conformance to the AFF Standards. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments _____ | | | |
| PM 8.2: Forest owner must monitor forest product harvests and other management activities to ensure they conform to the management plan objectives. | <input type="checkbox"/> | <input type="checkbox"/> | |
| I 8.2.1: Harvest, utilization, removal and other management activities must be conducted in compliance with the management plan and maintain the potential of the property to produce forest products and other benefits sustainably. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments _____ | | | |

| |
|--|
| <i>Required Information</i> |
| Landowner's Last Name _____ State _____ Tree Farm Number _____ Inspector's Initials _____ |