



Notice of Withdrawal of Management Commitment

Managed Forest #:

PART 1: Registered Owner

Name:		Agent:			
Contact Person:		Contact Person:			
Telephone #:	Facsimile #:	Telephone #:	Facsimile #:		
Email:		Email:			
Address:		Address:			
City:	Province:	Postal Code:	City:	Province:	Postal Code:

PART 2a: Identification of Land(s) to be Withdrawn from Management Commitment

Local government (nearest municipality or regional district):					
Legal Description	Assessment Roll Number	Parcel Identifier PID	Area (hectares)		
Total					

PART 2b: Location of Land (Identify location and attach a map of the land(s) to be withdrawn)

Signature of Owner or Authorized Agent	Printed Name	Date (dd/mm/yyyy)

Submit completed Notice of Withdrawal to: office@MFCouncil.ca

Enquiries: 250.386.5737