

TIMBER HARVESTING PLAN  
STATE OF CALIFORNIA  
DEPARTMENT OF FORESTRY  
AND FIRE PROTECTION  
RM-63 (06-2018)

FOR ADMIN. USE ONLY  
1. \_\_\_\_\_ 8. \_\_\_\_\_  
2. \_\_\_\_\_ 9. \_\_\_\_\_  
3. \_\_\_\_\_ 10. \_\_\_\_\_  
4. \_\_\_\_\_ 11. \_\_\_\_\_  
5. \_\_\_\_\_ 12. \_\_\_\_\_  
6. \_\_\_\_\_ 13. \_\_\_\_\_  
7. \_\_\_\_\_ 14. \_\_\_\_\_

FOR ADMIN. USE ONLY  
THP No. 1-24-00103-MEN  
Date Rec'd: JUL 17 2024  
Date Filed \_\_\_\_\_  
Date Approved \_\_\_\_\_  
Date Expires \_\_\_\_\_

THP Name: **Copper Top**

- If this is a **MODIFIED THP**
- Is this a **MODIFIED THP for FUEL HAZARD REDUCTION**

Extension:  
[ ] Am # \_\_\_\_\_

If THP is any one of the modified types above complete appropriate modified checklists at end of general section

This Timber Harvesting Plan (THP) form, when properly completed, is designed to comply with the Forest Practice Act (FPA) and Board of Forestry and Fire Protection rules. All rule references are from Title 14 CCR; when cited, the form text will only refer to the rule number itself. The THP is divided into six sections. See separate instructions for information on completing this form. **NOTE: The form must be printed legibly in ink or typewritten, an online version is available at <https://www.fire.ca.gov/programs/resource-management/forest-practice/caltrees/timber-harvesting-forms/>.** Additional space may be inserted, as needed, to provide required information. Please distinguish answers from questions by *font change*, **bold** or underline.

**SECTION I - GENERAL INFORMATION**

This THP conforms to my/our plan and upon approval, I/we agree to conduct harvesting in accordance therewith. Consent is hereby given to the Director of Forestry and Fire Protection, and his or her agents and employees, to enter the premises to inspect timber operations for compliance with the Forest Practice Act and Forest Practice Rules.

1. REGISTERED PROFESSIONAL FORESTER:

RPF Signature:  Lic. No. 3097 Date 7/16/2024

RPF Printed Name: Mark Francis Pugsley Phone (707)894-8839

Address: PO Box 156 City Cloverdale State CA Zip 95425

Email: Mpuglsey@resawmill.com

2. LICENSED TIMBER OPERATOR(S):

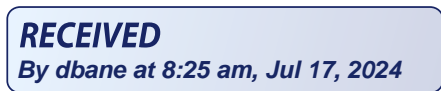
(If unknown, so state. You must notify CAL FIRE, by amendment, of LTO prior to start of operations)

Name: Unknown at this time Lic. No. \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_



3. TIMBERLAND OWNER(S) OF RECORD:

Name: Gualala Redwood Timber, LLC Phone (707)894-4245

Address PO Box 197 City Gualala State CA Zip 95445

Email: jbennett@pacificstates.com

Signature:  \_\_\_\_\_

4. TIMBER OWNER(S) OF RECORD:

Name: Gualala Redwood Timber, LLC Phone (707)894-4245

Address PO Box 197 City Gualala State CA Zip 95455

Email: jbennett@pacificstate.com

Signature:  \_\_\_\_\_

**NOTE: The Timber Owner is responsible for payment of a yield tax. Per State of California Revenue and Taxation Code sections 38104 and 38115. Timber Yield Tax information may be obtained at: Timber Tax Section, MIC: 60, California Department of Tax and Fee Administration, P.O. Box 942879, Sacramento, California 94279-0060. Phone 1-800-400-7115 OR 1-916-274-3330. For Timber Tax information, please see our website at: <http://www.boe.ca.gov/proptaxes/timbertext.htm>.**


5. PLAN SUBMITTER(S):

Name Gualala Redwood Timber, LLC

The submitter is the person who owns, leases, contracts, or operates on timberland. If the submitter is not identified in (2), (3), or (4), above, an explanation of his/her authority to submit the plan should be provided in Section III. [1032.7(a) and 1034(e)].

Address PO Box 197 City Gualala State CA Zip 95455

Email: jbennett@pacificstate.com

Signature:  \_\_\_\_\_

6. ON-SITE CONTACT: Name Unknown at this time

List person to contact on-site who is responsible for the conduct of the operations. If unknown, so state; name must be provided for inclusion in the THP prior to start of timber operations.

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

**ITEM #7 LOCATION OF TIMBER OPERATIONS**

a. Legal Description						
Meridian	Township	Range	Section	Acreage	Assessor's Parcel Number	County
MDBM	11N	15W	27	42.5		Mendocino
MDBM	11N	15W	26	114		Mendocino
MDBM	11N	15W	23	6		Mendocino
MDBM	11N	15W	22	0.5		Mendocino
<b>TOTAL AC</b>				163		

**FOREST DISTRICT**

b. Forest District			
<input checked="" type="checkbox"/>	COAST FOREST DISTRICT	<input type="checkbox"/>	Tahoe Regional Planning Authority Jurisdiction
<input type="checkbox"/>	Southern Sub District of the Coast Forest District	<input type="checkbox"/>	A County with Special Regulations
<input type="checkbox"/>	SOUTHERN FOREST DISTRICT	<input checked="" type="checkbox"/>	Coastal Zone, no Special Treatment Area (STA)
<input type="checkbox"/>	High use Sub District of the Southern Forest District	<input checked="" type="checkbox"/>	STA(s): Type: California Coastal Commission Special Treatment Area Identify: Gualala River  Type: Wild and Scenic River, Recreational Identify: Gualala River
<input type="checkbox"/>	NORTHERN FOREST DISTRICT	<input type="checkbox"/>	Other:

c. CALWATER PLANNING WATERSHED		
Name	Watershed identification Number	CALWATER Version
Big Pepperwood Creek	1113.850201	2.2.1

d. WATERSHED (ASP, 303D)			
<input checked="" type="checkbox"/>	ASP Watersheds	<input type="checkbox"/>	Non ASP Watersheds
<input type="checkbox"/>	Upstream of ASP Watersheds	<input checked="" type="checkbox"/>	303d Watersheds Gualala River Reason listed: Sediment, Aluminum, and Temperature
<input type="checkbox"/>	Exempt from ASP Watershed Rules • Reason Exempt:		

e. USGS QUADRANGLE	
Name	Date
Gualala	1998

**ITEM #8**

**MODIFIED THP REQUIRED CONDITIONS AND MITIGATIONS**

<b>a. Modified THP</b>	
1. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is this THP submitted as a modified THP per 14 CCR § 1051
2. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is this THP submitted as a modified THP for Fuel Hazard reduction per 14 CCR § 1051.3 (If YES skip to the Checklist for the Modified THP for Fuel Hazard Reduction below.)

<b>b. Timberland Conversion</b>	
1. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Has a Timberland Conversion been submitted?
	<ul style="list-style-type: none"> <li>• Permit Number: _____ (if known) or</li> <li>• Expected approval date:</li> </ul>
2. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Has a Timberland Conversion been approved?
	<ul style="list-style-type: none"> <li>• Permit Number:</li> <li>• Approval date:</li> <li>• Expiration date:</li> </ul>

<b>c. Demonstration of Maximum Sustained Production (MSP) per 14 CCR § 913.11 (93.11, 953.11).</b>	
MSP OPTION	
<input type="checkbox"/> (a)	THP Number Option (a) is approved under: _____
	Date Approved: _____
<input type="checkbox"/> (b)	Has a Sustained Yield Plan been approved?
	<ul style="list-style-type: none"> <li>• SYP number:</li> <li>• Date Approved:</li> </ul>
	Has a Sustained Yield Plan been submitted but not approved?
	<ul style="list-style-type: none"> <li>• SYP number:</li> <li>• Date Submitted:</li> </ul>
<input checked="" type="checkbox"/> (c)	

<b>d. Conservation Easements / Landowner Assistant programs</b>	
1. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is there a conservation easement, existing, for any of the plan area?
	<p><b>If "YES" provide</b></p> <ul style="list-style-type: none"> <li>• Conservation Easement Name: _____</li> <li>• Who is the easement grantee: (Who holds the easement)</li> </ul> <p>_____</p>
2. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is a Conservation Easement proposed or waiting approval for any portion of the plan area?
3. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are there any land owner assistance programs associated for any portion of the propose plan area?

d. Conservation Easements / Landowner Assistant programs	
	If "YES" indicate what land assistance program it is and associated identifying document number and/or name of project.

e. Habitat Conservation Plans (HCP) / Natural Communities Conservation Plans (NCCP)	
1. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is any portion of the ownership covered by a Habitat Conservation Plan?
	If "YES" provide <ul style="list-style-type: none"> <li>• Conservation Easement Name: _____</li> <li>• Who is the easement grantee: (Who holds the easement) _____</li> </ul>
2. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is a Conservation Easement proposed or waiting approval for any portion of the plan area?
3. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are there any land owner assistance programs associated for any portion of the propose plan area?

ITEM #9 Prescribed Maintenance Period	
a. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Will the Licensed Timber Operator be employed for the construction and maintenance of roads and landings during the conduct of timber operations?  If "NO" identify who will be responsible and provide a contact phone number. Contact name: Phone number:
b. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Will the Licensed Timber Operator be responsible for erosion control maintenance after timber operations have ceased and until a work completion report has been certified by the department?  If "NO" include a written agreement per 14 CCR 1050(c). Timberland Owner acknowledgement form contains the necessary information and can be included as the written agreement  <b>NOTE: Prescribed maintenance periods:</b> <ul style="list-style-type: none"> <li>• Outside ASP watersheds maintenance period is one year but can be extended 3 years at the Departments discretion.</li> <li>• ASP watersheds the maintenance period is three years</li> </ul> <b>Other activities such as stocking, that require the use of roads, crossings, or other features requiring erosion control shall be maintained during that activity even after the prescribed maintenance period has ended.</b>
c. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is it anticipated timber operations will commence on the date of THP conformance as approved by the Department?  If "NO" provide an expected date of commencement of timber operations: DATE _____
d. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is it anticipated timber operations will be completed within 5 years from the date of THP conformance?

ITEM #9 Prescribed Maintenance Period	
	<p>If "NO" provide the expected date timber operations will be completed:  DATE _____</p>

ITEM #10 Stocking Adjacent Plans	
<p>a. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Is there a <b>THP</b> on file with CAL FIRE for any portion of the plan area for which a Report of Satisfactory Stocking has not been issued by CAL FIRE?</p> <p>If "YES" provide THP Number: _____</p>
<p>b. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Is there a contiguous even aged unit with regeneration less than five years old or less than five feet tall?</p> <p><b>If "YES" provide explanation per 14 CCR 913.1 (933., 953.1)(a)(4)</b></p>

ITEM #11	Responsibilities / Notifications
a. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<p>RPF has notified the Plan Submitter, in writing, of their responsibilities pursuant to 14 CCR 1035 of the Forest Practice Act and Rules.</p> <p><b><u>The Plan Submitter, Timber/Timberland Owner are the same: Gualala Redwood Timber LLC. The plan submitter and their representatives are actively involved in the management of the ownership which includes timber harvesting, plan preparation and execution, and are aware of their responsibility for any necessary stocking efforts and erosion control maintenance needs as required by the Forest Practice Rules and the approved plan. For these reasons written notification is not deemed necessary.</u></b></p>
b. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<p>RPF has notified the timber owner and the timberland owner of their responsibilities for compliance with the Forest Practice Act and Rules and the prescribed maintenance periods and maintenance of erosion control structures.</p> <p><b>See Item #11(a) above.</b></p>
c. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<p>RPF will provide the timber operator with a copy of the portions of the approved THP as listed in 14 CCR 1035(f).</p> <p><b>If "NO" who is responsible to provide the LTO a copy of the approved THP?</b></p>
	<p>Who will meet with the LTO prior to commencement of operations to advise of sensitive conditions and provisions of the THP per 14 CCR 1035.2.</p> <p><input type="checkbox"/> RPF  <input type="checkbox"/> Supervised Designee  <input checked="" type="checkbox"/> Both  <input checked="" type="checkbox"/> Other: Plan Submitter or Plan Submitter Designee</p> <p>In accordance with 14 CCR 1035.2, the RPF, his supervised designee familiar with the plan or the Forest Manager (John Bennett, RPF #2650) will meet with the LTO prior to the commencement of operations</p>
d. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<p>Are Archaeological or historical sites within or near the plan area that require protection?</p> <p><b>NOTE: Archaeological information is Confidential</b></p>
e. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<p>RPF has the following authority and responsibilities for the preparation and administration for the THP and timber operations. (Including both work completed and work remaining to be done.)</p> <p>Additional information: <b>See Section III item 11 for additional discussion.</b></p>
f. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<p>RPF has been retained by the plan Submitter to provide professional advice to the LTO and timberland owner upon request throughout the active timber operations regarding the THP, the Forest Practice Rules, and other associated regulations pertaining to timber operations per 14 CCR 1035(d)(1)</p> <p><b>As RPF of Record, I shall remain available to provide professional advice to the LTO and timberland owner throughout the active timber operations per 14 CCR 1035(d) or until such time the plan submitter amends another RPF onto the plan to perform this duty..</b></p>

ITEM #11 Responsibilities / Notifications	
	Describe additional required work requiring an RPF, which the RPF submitting this proposed THP does not have the authority or responsibility to perform.  <b>There is no other additional required work that the RPF does not have the authority or responsibility to perform.</b>

ITEM #12 Notice of Intent (NOI)	
Per 14 CCR 1032.7(c)(1-5) The RPF preparing the THP shall submit to the Director, with the THP, a Notice of Intent (NOI) to harvest timber if:	
<ul style="list-style-type: none"> <li>(1) Any proposed boundary lies within 300 feet of any property not owned by the timberland owner, or</li> <li>(2) Plan amendments that change plan boundary so that new boundaries are within 300 feet of property not owned by the timberland owner.</li> <li>(3) Plan amendments change the silvicultural method if a notice was required for the Plan by condition (1) or (2) above.</li> <li>(4) Any overhead electrical power line, except a line from a transformer to a service panel, is present within the plan area or within 200 feet outside the Plan boundary, or</li> <li>(5) Plan amendments change a plan boundary so that the overhead electrical power line, except a line from a transformer to a service panel, is within the new boundary area or within 200 feet outside the Plan Boundary.</li> </ul>	
a. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is a Notice of Intent necessary for this THP?  <b>If "YES" include the NOI with the THP as a separate form with the THP</b>
b. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	I understand the NOI is to be posted prior to submitting the THP and I will post the NOI at the conspicuous location near the project location prior to submitting this proposed THP.

ITEM #13 Statement of Environmental Impact	
After considering the rules of the Board of Forestry and Fire Protection and the mitigation measures incorporated in this THP, I the Registered Professional Forester, have determined that the timber operations <b>(mark all that apply)</b>	
a. <input type="checkbox"/>	<b>WILL HAVE</b> A SIGNIFICANT adverse effect on the environment. Provide a statement of reasons for overriding considerations in SECTION III.
b. <input checked="" type="checkbox"/>	<b>WILL NOT HAVE</b> A SIGNIFICANT adverse impact on the environment.
<input checked="" type="checkbox"/>	I certify that I, or my supervised designee, personally inspected the THP area, and this plan complies with the Forest Practice Act, the Forest Practice Rules and the Professional Foresters Law.