



For Official Use Only	
Case Number:	
Date:	
Fees: \$450.00 + \$1/acre	
Accepted by:	\$
Date Plan Approved:	
Date Plan Rejected:	

FINAL FCP AGREEMENT REVIEW APPLICATION/CHECKLIST

APPLICANT INFORMATION		
Project Name:	Tax Identification:	
Location:		
Tax Map:	Block:	Parcel:
MD Coordinates	N	E

ALL information requested above must be completed before acceptance of this application. Please submit **7 COPIES** of all materials: One digital plan **must** be submitted to sparker@cityoffrederickmd.gov.

OK	NO	ELEMENTS OF FINAL FOREST
		Compliance with Preliminary Forest Conservation Plan
		Conserved: Linear length stream buffer stream buffer(ac.)
		Established: Linear length stream buffer stream buffer(ac.)
		Forester or Landscape Arch. Certification
		Retention Areas: onsite(ac.) offsite(ac.)
		Reforestation Areas: onsite(ac.) offsite(ac.)
		Regeneration Areas: onsite(ac.) offsite(ac.)
		Afforestation Areas: onsite(ac.) offsite(ac.)
		Area of easements
		Area of Floodplain: Unforested (ac.) forested (ac.)
		Limits of Disturbance
		Maintenance Calendar
		Stockpile Areas
		Planting Plan
		Temporary/Permanent Device
		Stocking Standards
		Signed Forest Conservation Agreement *(2 copies)

***The Forest Conservation agreement is a component of the Final Forest Conservation Plan and must be submitted with the plan.**

Project Name:	
Owner/Developer*	
Name:	
Address:	
Phone:	email:

I am the owner or authorized agent for the owner(s) of the property for which this Forest Stand Delineation and/or Forest Conservation Plan has been submitted for review and approval to the appropriate approving authority of the City of Frederick. I hereby grant permission to the City of Frederick Deputy Director for Planning and/or the Deputy Director for Engineering and/or their authorized representative to come upon my property during normal business hours for the purpose of verifying that the material on the Forest Stand Delineation and/or Forest Conservation Plan is accurate and complete.

All correspondence will be sent to the applicant. If the owner also wishes to receive a copy, please check box:

Signed: _____

Date: _____

If not owner, attach "Agent Authorization" letter.

FSD/FCP Prepared By:

Name:	
Address:	
Phone:	email:

I certify I am a licensed forester, licensed landscape architect, or have been approved by the Maryland Department of Natural Resources as a qualified professional and, therefore, am qualified to prepare the attached Forest Stand Delineation and/or Forest Conservation Plan. I further certify that this plan was prepared by me or under my supervision and that I have used the methods provided for by Article 7, Section 721 of the Land Management Code and the Maryland State Forest Conservation Technical Manual to prepare the Forest Stand Delineation and/or Forest Conservation Plan.

Signed: _____

Date: _____

MD Regulation # _____

Approved as Qualified Professional by DNR on _____

*** If there is an owner and a contract purchaser, the application must be signed by both parties. The Agent Authorization must accompany this application.**

****The digital site plan must be submitted in the form of a tiff, pdf, or jpeg. CADD files will not be accepted.**