



DIVISION of FORESTRY

Cooperative Forest Management

STEWARDSHIP LANDOWNER QUESTIONNAIRE

(Form may be filled in on the computer)



NAME: _____

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

Contact Person: _____ Daytime Phone: _____

Location of Land: _____
Street Town County

Total Acreage: _____ Forested Acreage: _____

Boundaries marked on site? Yes No Partially

1. How long have you been associated with this property? _____

2. Have you ever had a management plan written for your forestland?
 Yes No If yes, when? _____ By whom? _____

3. Is the property zoned and/or classified in any of the following categories?
 Residential Farmland Forestland Commercial Industrial
 Open Space Non-profit.

4. Have you used the services of any natural resource professional in managing the land?
 Arborist Soil Scientist Fisheries Biologist Forester
 Naturalist Entomologist Wildlife Biologist Pathologist
 Landscape Architect Other (specify) _____

5. What are the most significant features of the land you might want to maintain, protect, and enhance?

6. Which three benefits of land ownership from the following list do you most wish to enhance?
 Aesthetics Recreation Wildlife Water Quality
 Wood Products Fisheries Income Real Estate Investment
 Overall Ecosystem enhancement Other (specify) _____

7. After your ownership, what do you ultimately plan to have happen to your land?
 Will as is to heirs Divide among heirs Sell for development
 Protect some or all land from development Other (explain) _____

8. What steps have you taken to ensure your wishes are fulfilled? Simple will
 Comprehensive estate plan Discussions with family about future of land None

9. Please enclose a sketch map or boundary map of your property.

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