



Connecticut Department of  
Energy & Environmental Protection  
Bureau of Natural Resources  
Forestry Division

## Instructions for Completing an Application for Commercial Forest Practitioner Certification

*Use these instructions to complete the application form DEEP-FOR-APP-100, and prepare supporting documents. These instructions are not a substitute for the requirements of the relevant statutes and any regulations thereunder. You should review all applicable laws prior to completing this application. Remember, it is your responsibility to comply with all applicable laws.*

### General Information

Section 23-65h of the Connecticut General Statutes (CGS) provides that no person shall advertise, solicit, contract, or engage in commercial forest practices within this state at any time without a certificate issued by the Commissioner of Energy and Environmental Protection. The only exception to this requirement is for a person who only engages in the execution of commercial forest practices under the direct on-site supervision of a person who possesses a valid, effective forest practitioner certificate issued by the Commissioner of Energy and Environmental Protection. Such persons are not required to obtain a Commercial Forest Practitioner Certificate.

### How To Apply

This application is intended for a person seeking a Commercial Forest Practitioner Certificate. To obtain a certificate, the application must include the following:

- A completed *Application for Commercial Forest Practitioner Certification* (DEEP-FOR-APP-100) including supporting documents, if applicable;
- Required **non-refundable** fees, paid by check or money order, made payable to the "Department of Energy and Environmental Protection". The check or money order shall

state on its face "Forest Practitioner Certification".

You must submit the above materials together as a package to:

CENTRAL PERMIT PROCESSING UNIT  
DEPARTMENT OF ENERGY AND  
ENVIRONMENTAL PROTECTION  
79 ELM STREET  
HARTFORD, CT 06106-5127

### Additional Notes:

- To obtain a certificate, the applicant must also have achieved a grade of 75 or greater on an examination administered by the Department of Energy and Environmental Protection's (DEEP) Forestry Division. Note - an applicant for Forest Products Harvester may not have to take an examination if they satisfactorily demonstrate that they have engaged in commercial forest practices at least once per year between 10/1/81 through 10/1/91. See page 2, "Exemptions" of these instructions.
- An applicant who is already certified, but is applying for a different type of certification must submit a new application as well as a new application and examination fee.
- In the event that any of the information provided in the application changes, either during the application process or after certification has been received, the applicant

shall notify the Bureau of Natural Resources/Division of Forestry of all such changes at 860-424-3630 or by email at: [DEEP.Forestry@ct.gov](mailto:DEEP.Forestry@ct.gov)

### **Application Instructions** (DEEP-FOR-APP-100)

Please read the application form and instructions carefully. They have been designed to obtain specific information and any information that is missing or unclear will cause delays in the review process. If any questions are not applicable to your specific activity, please enter "N/A" in the space provided. If a question or supporting document is only required for specific activities it will be noted on the application form and in the instructions.

Please be advised that these instructions are not a substitute for any state or federal statutes or regulations. Be sure to refer to the applicable statutes and regulations while completing your application.

### **Part I: Application Type and Fee Information**

Select one type of certification for which you are applying. Certification is available in the following categories:

*Forester:* Required for a commercial forest practitioner who supervises or engages in the planning and design of a forest practice, including but not limited to, commercial forest products harvest operations, or acts as a property owner's agent in the sale of commercial forest products. A certified forester may also execute contracts or agreements, written or verbal, for the purchase of commercial forest products, act in the buyer's behalf in the supervision of commercial forest product harvest operations, and engage in the execution of commercial forest product harvest operations.

*Supervising Forest Products Harvester:* Required for a commercial forest practitioner who executes contracts or agreements, written or verbal, for the purchase of commercial forest products or who acts in the buyer's behalf in the

supervision of commercial forest product harvest operations. A Supervising Forest Products Harvester may also engage in the execution of commercial forest product harvest operations.

*Forest Products Harvester:* Required for a commercial forest practitioner who engages in the execution of commercial forest product harvest operations.

Currently, forest practitioner certification or licenses issued by another state are not valid in Connecticut.

Check the applicable box identifying the application type. For a renewal of an existing certificate, include the existing certificate number and expiration date. A certificate is deemed to be "existing", *only* if it has not yet expired on the date an application is filed. A renewal application must be submitted at least 60 days before the expiration date of the existing certificate.

### **Exemptions**

1. An applicant applying for Forest Products Harvester certification who satisfactorily demonstrates that he has engaged in commercial forest practices at least once each year between 10/1/81 through 10/1/91 does not have to take an examination and is not required to pay the *examination* fee. An applicant who seeks certification through such a demonstration *must still* complete an *Application for Commercial Forest Practitioner Certification* (DEEP-FOR-APP-100) and submit it along with *Attachment A: Forest Products Harvester Examination Exemption* (DEEP-FOR-APP-101) and the application fee. A person seeking Forest Products Harvester certification who is otherwise eligible for exemption may forgo the demonstration noted in this paragraph and elect to take the examination. Anyone electing to take the examination must submit an application, the application fee and the examination fee.

CGS section 23-65f defines “commercial forest practices” as any forest practices performed by a person, other than the owner of the subject land, for remuneration, or which, when performed, yield commercial forest products.

Upon receipt of a properly completed application and Attachment A, the department will review all information provided. If the information in Attachment A does not demonstrate that the applicant has the requisite experience, the applicant shall submit the examination fee and must pass the examination in order to qualify for certification.

The information requested on Attachment A must be provided for each year from 10/1/81 to 10/1/91. *A separate Attachment A must be provided for each year.* Only Attachment A or a clear copy thereof may be used for each year.

The employer or landowner for whom the applicant performed commercial forest practices must certify by his or her signature in the space provided in Part I of Attachment A that the information on Attachment A is true, to the best of the landowner's or employer's knowledge or belief. A separate Attachment A must be provided for each landowner and/or employer for whom an applicant performed commercial forest practices.

An applicant may also provide a copy of applicable contracts, agreements, wage statements, or other documents proving that he has engaged in commercial forest practices for each year or years between 10/1/81 to 10/1/91.

The applicant's signature in Part II of Attachment A certifies that, to the best of his or her knowledge or belief, the information contained in the application is true, accurate and complete. An application will be considered insufficient unless all required signatures are provided.

2. State or municipal employees who engage in activities for which certification is required and who do so solely as a part of their state or municipal employment may seek exemption from payment of the application and examination fees. The exemption from payment of the application and examination fees applies only to activities wholly performed as a part of an applicant's state or municipal employment and will expire upon the termination of such person's employment. A state or municipal employee *must still submit a completed application and pass the examination* unless an employee seeking forest products harvester certification demonstrates that he is exempt from the examination requirement.

## **Re-examinations**

If you are filing an application in order to *retake* the examination, please read the following: An applicant who fails to pass the examination may retake the examination. In order to be eligible to retake the examination, a person must submit a new application along with a new examination fee. No new application fee is required provided the person is seeking the examination for the same type of certification previously sought and the re-examination application is made within two years of submission of the original application. A separate examination fee is required each time a person retakes an examination.

## **Renewal Applications**

Completed applications for renewal of certification must be submitted to the Department no less than 60 days prior to the expiration date on the certificate. The certification regulations provide that if the statutes or regulations concerning forestry, forest practices or wetlands have changed and such change results in a change in the conduct of forest practices, an examination for recertification shall be required. You will be notified by the Department should an examination be necessary, of where and when

the exam will be given. In order to renew a certification, the following requirements must be met:

- 1) All annual reports must be submitted.
- 2) The required number of [continuing education units](#) (CEU's) must have been submitted to the Department.

All outstanding annual reports and CEUs must be submitted with a completed renewal application.

## Part II: Applicant Information

1. *Applicant* - Complete the following information concerning the applicant.
  - Provide the legal name, last, first, and middle (include suffix).
  - Provide mailing address.
  - *Phone* - Unless otherwise indicated, the phone number provided should be the number where the corresponding individual can be contacted during daytime business hours.
  - *E-Mail* – Applicants must provide an accurate e-mail address when completing their application form. The e-mail address may be used for future correspondence from DEEP to your business.
  - Provide *Date of Birth*.
2. Provide residence address for the applicant, if different than mailing address.
3. *Emergency Contact Person* - Provide the name, relationship and phone number of the specific individual whom DEEP may contact.
- 4-6.) Provide information requested concerning the applicant's employers,

business names, and entities under which or for whom the applicant engages in commercial forest practices.

## Part III: Additional Background Information

1. *For Forester Certification Level Only:*  
Provide all post high school education (complete for renewal applications also.)
2. *For all Applicants:*  
Provide information concerning applicant's compliance background.

## Attachment A: Forest Products Harvester Examination Exemption

This attachment must be completed and submitted with the application only if the applicant qualifies for the **Forest Products Harvester** examination exemption as described in these instructions.

## Part IV: Certification

After the application has been completed it must be reviewed and signed by both the applicant(s) and the individual(s) who actually prepared the application. By their signature, they certify that to the best of their knowledge and belief, the information contained in the application, including all attachments, is true, accurate and complete.

An application will be considered insufficient unless all required signatures are provided.

## Affirmative Action, Equal Employment Opportunity and Americans with Disabilities

The Connecticut Department of Energy and Environmental Protection is an Affirmative Action/Equal Opportunity Employer that is committed to complying with the requirements of the Americans with Disabilities Act (ADA). Please contact us at (860) 418-5910 or [deep.accommodations@ct.gov](mailto:deep.accommodations@ct.gov) if you: have a disability and need a communication aid or service; have limited proficiency in English and may need information in another language; or if you wish to file an ADA or Title VI discrimination complaint.



Connecticut Department of  
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CPPU USE ONLY		
App #:	_____	
Doc #:	_____	
Check #:	_____	
Program: Forestry Certification		
<input type="checkbox"/> FPH	<input type="checkbox"/> SFPH	<input type="checkbox"/> F #
<input type="checkbox"/> EE	<input type="checkbox"/> O	<input type="checkbox"/> G

## Application for Commercial Forest Practitioner Certification

Please complete this form in accordance with the instructions (DEEP-FOR-INST-100) to ensure the proper handling of this application. Print or type unless otherwise noted. The application and examination fee must be submitted along with a completed application to the address specified at the end of this form.

### Part I: Application Type and Fee Information

<p><b>Select one type of certification:</b> See <i>General Information About Commercial Forest Practitioner Certification</i> of the application instructions for a description of the different types of certification.</p> <p><input type="checkbox"/> Forester      <input type="checkbox"/> Supervising Forest Products Harvester      <input type="checkbox"/> Forest Products Harvester</p>			
Application Type Check the appropriate box identifying the application type.	Application Fee	Examination Fee	Total Fee
<input type="checkbox"/> New Application	\$235.00 [#1895]	\$65.00 [#84]	\$300.00
<input type="checkbox"/> New Application - Exempt from Examination Fee (see instructions) <b>must complete Attachment A</b>	\$235.00 [#1895]		\$235.00
<input type="checkbox"/> New Application - Retake of an examination (see instructions)		\$65.00 [#84]	\$65.00
<input type="checkbox"/> Renewal Application Existing Certification No.: _____ Expiration Date: _____	\$235.00 [#1895]		\$235.00
<input type="checkbox"/> Check here, in addition to above boxes, if the applicant is a State or Municipal employee for which certification is required for their employment. If this box is checked, the application and examination fee are waived.	\$0	\$0	\$0
<input type="checkbox"/> Check here, in addition to the above boxes, if the applicant is unable to read and is applying to take the oral examination. If this box is checked, the person preparing this application must sign and complete Part IV.			

### Part II: Applicant Information

1. Please provide the following information regarding the applicant.			
Name:			
Last	First	Middle	
Mailing Address:			
City/Town:	State:	Zip Code:	
Home Phone:	Cell Phone:		
*E-mail address:			
Date of Birth:			
*By providing this e-mail address you are agreeing to receive official correspondence from DEEP, at this electronic address, concerning the subject application. Please remember to check your security settings to be sure you can receive e-mails from "ct.gov" addresses. Also, please notify DEEP if your e-mail address changes.			

**Part II: Applicant Information (continued)**

2. Applicant Residence Address (if different than above):  
 City/Town:                      State:                      Zip Code:

3. Emergency Contact Information:  
 Emergency Contact Name:                                      Relationship:                      Phone Number:

4. Please provide the following information regarding each employer for whom the applicant engages in Commercial Forest Practices.

Name	Street Address	City/Town	State	Zip Code	Contact Person	Phone

5. For applicants who engage in Commercial Forest Practices under a business name, please provide the following information for each business under which the applicant engages in Commercial Forest Practices.

Name	Street Address	City/Town	State	Zip Code	Contact Person	Phone

6. For applicants who do not engage in Commercial Forest Practices for an employer or under a business name please provide the following information regarding each name or entity under which or for whom the applicant engages in Commercial Forest Practices.

Name	Street Address	City/Town	State	Zip Code	Phone

**Part III. Additional Background Information**

1. Applicants for **Forester certification only (including renewal applications):**

Name of Institution	Graduation Date	Degree Earned

2. **For all Applicants:**  
 A. For each state (including Connecticut) in which the applicant is currently or has previously been registered, certified or licensed as a forest practitioner provide the following:

Name of State	current registration, certificate or license identifier (i.e., number):	if no longer registered, certified, or licensed indicate why	Has a registration, certification or license as a forest practitioner been denied, revoked or suspended?
			<input type="checkbox"/> Yes <input type="checkbox"/> No; If yes, give dates and explain:
			<input type="checkbox"/> Yes <input type="checkbox"/> No; If yes, give dates and explain:
			<input type="checkbox"/> Yes <input type="checkbox"/> No; If yes, give dates and explain:
			<input type="checkbox"/> Yes <input type="checkbox"/> No; If yes, give dates and explain:

B. Has the applicant ever been convicted of a felony associated with the conduct of a forest practice?  
 Yes  No If yes, give dates and explain:

C. Within the past 3 years, has the applicant engaged in a forest practice for which a cease and desist order, citation, or other administrative order has been issued from any federal, state, or local agency for conduct associated with a forest practice ?  Yes  No If yes, give dates and explain:

## Part IV: Certification

The applicant and the preparer, if applicable, must sign this part.

"I have personally examined and am familiar with the information submitted in this document and all attachments and certify that, based on reasonable investigation, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that any false statement made in this application or its attachments may be grounds for denial, suspension, or revocation of a certification."			
Applicant Signature _____		Date _____	
<i>If an applicant is unable to read and has requested to take an examination orally, the person preparing this application must sign and provide the information requested below.</i>			
"I declare under penalty of false statement that I have completed this application based upon the information provided by the applicant and that to the best of my knowledge and belief the information in this application is true, complete and correct."			
Signature of Preparer _____		Date _____	
Preparer's Address:			
City/Town:		State:	Zip Code:
Preparer's Phone:		ext.	

Note: Please submit this completed Application Form, including Attachment A if applicable, and Fee to:

CENTRAL PERMIT PROCESSING UNIT  
DEPARTMENT OF ENERGY AND ENVIRONMENTAL PROTECTION  
79 ELM STREET  
HARTFORD, CT 06106-5127

The applicant will be notified in writing of the exam date.

For Renewal applications, all annual reports and required CEU's must have been submitted. The applicant must submit all outstanding annual reports and CEUs with this completed application.

For questions, please contact the Forestry Division at 860-424-3630 or email at: [DEEP.Forestry@ct.gov](mailto:DEEP.Forestry@ct.gov)



# Attachment A: Forest Products Harvester Examination Exemption

***This form is to be completed and submitted with the application only if the applicant qualifies for the Forest Products Harvester Examination Exemption.***

Applicant's Name:

Last

First

Middle

Please reproduce and complete this Attachment for **each** employer for whom the applicant was employed by, or for whom the applicant contracted to in the engagement of commercial forest practices *and/or* for **each** landowner for whom the applicant engaged in commercial forest practices.

## Part I. Employer or Landowner Information

Please check one of the following:     Employer     Landowner

1. Provide Information concerning the Employer/Landowner:

Name:

Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Contact Person:

Title:

2. The dates during which the applicant performed commercial forest practices:

From:

To:

3. The estimated hours the applicant worked per week performing commercial forest practices:

4. Briefly describe the commercial forest practice being performed (timber harvesting, tree planting, timber stand improvement, amount of volume harvested, acres planted, etc.):

5. Indicate the town(s) in which the commercial forest practice(s) were performed:

## Part I. Employer or Landowner Information (continued)

6. Describe fully the applicant's role in the performance of the commercial forest practice noted above. For example: operated skidder, planted trees, operated a chain saw, etc.

7. Did the applicant receive remuneration (payment) for engaging in the activities described in number 6 above?  
 Yes  No

8. The following certification must be signed by the Employer/Landowner:

"I hereby certify under penalty of false statement that the above information related to forest practices performed by \_\_\_\_\_ for \_\_\_\_\_ is true to the best of my knowledge and belief."  
(Applicant) (forest practice)

\_\_\_\_\_  
Employer or Landowner Signature

\_\_\_\_\_  
Date

Check the box if additional sheets are required. If so, please reproduce this sheet, and label, and attach additional sheet(s) with the required information to this sheet.

## Part II. Applicant Certification

"I have personally examined and am familiar with the information submitted in this document and all attachments and certify that, based on reasonable investigation, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that any false statement made in this document or its attachments may be grounds for denial, suspension, or revocation of certification."

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date