

**STANDARD EROSION AND SEDIMENT CONTROL PLAN
FOR FOREST HARVEST OPERATIONS
CALVERT COUNTY**

I. SITE INFORMATION

A. Location: _____
(Include vicinity map showing intersection of two major roads.)

B. Nature of Operation: _____ Acres Harvested: _____
(Logging including clearcut & damage select cut, Woodchipping, Firewood)

C. Type of Plan: Standard Plan Standard Plan with SMZ
 Custom Plan Custom Plan with BMP Design

II. LANDOWNER AND OPERATOR INFORMATION

A. Landowner(s): _____
Address: _____
Phone: _____ Email: _____

B. Operator: _____
Address: _____
Phone: _____ Email: _____
Current F.P.O. Lic. #: _____ Green Card #: _____

C. Plan Preparer: _____ Professional License #: _____
Phone: _____ Email: _____

1. List the names of other operators who may be involved in the harvest and the nature of their operations:

2. If subcontracting to any of the operators listed above, do you assume responsibility for their compliance with this plan? _____ **(If no, they must obtain a separate plan prior to their operations.)**

III. AGREEMENT

- A. I/We agree to adhere to Standard Erosion and Sediment Control Plan for Forest Harvest Operations, to grant inspectors and Maryland DNR Forest Service staff the right of entry to the site to monitor compliance. **Contact [DNR Forest Service \(Calvert Co. office\) at 410 5351303](#) at least 3 business days prior to mobilizing any harvesting equipment.**
- B. I am aware of the landowner's responsibility in preventing accelerated erosion and sedimentation during, and subsequent to, forest harvest operations as mandated by the rules and regulations adopted by the State of Maryland and local jurisdictions, and the *2015 Maryland Soil Erosion and Sediment Control Standards and Specifications for Forest Harvest Operations*.
- C. I agree to require that all operators conducting forest harvest operations on my property to adhere to the requirements of the Standard Plan and the *2015 Maryland Soil Erosion and Sediment Control Standards and Specifications for Forest Harvest Operations*.

Landowner: _____ Date: _____

Operator: _____ Date: _____

Reviewed: _____ Date: _____

Maryland DNR Forester

Approved: _____ Date: _____

Calvert Soil Conservation District

Note: (Plan is only valid for two years from approval date.)

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