



Date (dd/mmm/yyyy): _____/_____/_____

Importer Information (owner of the forest product while in transport):

Company Name: _____

Individual Contact Name: _____

Street Address/Box #: _____ City/Town: _____

Province/State: _____ Postal/Zip Code: _____

Phone Number: _____ Fax Number: _____ Email: _____

Receiver Name & contact information (if different from importer): _____

Description of Imported Product:

Tree Species: pine spruce douglas fir cedar other _____

Product Description: _____

Volume or Number of Logs/Pieces and Dimensions: _____

Harvest Location/Wood Origin: _____

Importation Information:

Point(s) of Entry (hwy # or port name): _____

Destination: _____

Date(s) of Entry: _____

Reason for Import: _____

Supplier/Vendor Information (if different from importer):

Name (company or individual): _____

Street Address/Box #: _____ City/Town: _____

Province/State: _____ Postal/Zip Code: _____

Phone Number: _____

Mail, fax or email application to: Forest Tenure, Trade and Policy Branch
 9th Floor
 9920 – 108 Street, Edmonton, AB, T5K 2M4
 Fax: 780-644-5728 E-mail: graham.legaarden@gov.ab.ca