**RSA Stocking Survey Reporting Cover Page**

**Applicability:** Establishment and Performance (D Standard CSR/NSR only) stocking surveys.

**Name of timber disposition holder: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Timber year**: May 1, 20\_\_\_\_\_ to Apr 30, 20\_\_\_\_\_

**First and last name of qualified surveyors** (or as attached)

**List of ARIS Opening Numbers** for which reforestation survey data is being submitted:

A. Establishment surveys: (or as attached)

B. D Standard CSR/NSR Performance Surveys: (or as attached)

**List of ARIS Opening Numbers** for which reforestation survey field check audits were completed:

A. Establishment surveys: (or as attached)

B. D Standard CSR/NSR Performance Surveys: (or as attached)

**Summary of preventive and corrective actions** - from Quality Assurance/Quality Control Program for openings included in this submission (or as attached; if none, please indicate)

**Declaration**:

This submission, including this signed cover page and attached reforestation surveys:

1. Was prepared by me, or under my direct supervision, or was prepared by a third party(ies) and has been reviewed and accepted by me; and,
2. Was prepared in accordance with the timing, methods, procedures, and format required by the RSA; and,
3. Was prepared in accordance with a documented Quality Assurance/Quality Control program which meets the requirement defined in Section 10 and used qualified surveyors to properly collect all survey information; and,
4. To the best of my knowledge and the best of my professional ability, recognizing the standard of care expected of a professional doing this work, is in my professional opinion, true, accurate and complete.

**Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Print name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Professional organization[[1]](#footnote-1): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Registration number:\_\_\_\_\_\_\_\_\_**

**Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. If applicable [↑](#footnote-ref-1)