

FOR ADMIN. USE ONLY  
Amendments-date & S or M

### TIMBER HARVESTING PLAN

STATE OF CALIFORNIA  
DEPARTMENT OF FORESTRY  
AND FIRE PROTECTION  
RM-63 (01-00)

FOR ADMIN. USE ONLY

THP No. 4-09-003/CAL-1

Dates Rec'd May 11, 2009

- 1. TCU 7. Parks
- 2. Tinsley 8. Stanislaus NF
- 3. WASA 9. RTC
- 4. FG 2 10. \_\_\_\_\_
- 5. COIS 11. \_\_\_\_\_
- 6. Planning 12. \_\_\_\_\_

THP Name: **Sugar Spring**

(In the CDF FPS, this is "THP Description")

If this is a Modified THP, check box:  [ ]

Date Filed \_\_\_\_\_

Date Approved \_\_\_\_\_

Date Expires \_\_\_\_\_

Extensions 1)  [ ] 2)  [ ]

This Timber Harvesting Plan (THP) form, when properly completed, is designed to comply with the Forest Practice Act (FPA) and Board of Forestry and Fire Protection rules. See separate instructions for information on completing this form. NOTE: The form must be printed legibly in ink or typewritten. The THP is divided into six sections. If more space is necessary to answer a question, continue the answer at the end of the appropriate section of your THP. If writing an electronic version, insert additional space for your answer. Please distinguish answers from questions by *font change* bold or underline.

#### SECTION I - GENERAL INFORMATION

This THP conforms to my/our plan and upon approval, I/we agree to conduct harvesting in accordance therewith. Consent is hereby given to the Director of Forestry and Fire Protection, and his or her agents and employees, to enter the premises to inspect timber operations for compliance with the Forest Practice Act and Forest Practice Rules.

1. TIMBER OWNER(S) OF RECORD: Name Sierra Pacific Industries

Address P.O. Box 132

City Martell State Ca Zip 95654 Phone (209) 223-7170

Signature Jim M. Tate Date 5/7/09

NOTE: The timber owner is responsible for payment of a yield tax. Timber Yield Tax information may be obtained at the Timber Tax Section, MIC: 60, State Board of Equalization, P.O. Box 942879, Sacramento, California 94279-0060; phone 1-800-400-7115; BOE Web Page at <http://www.boe.ca.gov>.

2. TIMBERLAND OWNER(S) OF RECORD: Name Sierra Pacific Industries

Address P.O. Box 132

City Martell State Ca Zip 95654 Phone (209) 223-7170

Signature Jim M. Tate Date 5/7/09

3. LICENSED TIMBER OPERATOR(S): Name Unknown at this time Lic. No. \_\_\_\_\_

(If unknown, so state. You must notify CDF of LTO prior to start of operations)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

4. PLAN SUBMITTER(S): Name Sierra Pacific Industries

Address P.O. Box 132

City Martell State Ca Zip 95654 Phone (209) 223-7170

(Submitter must be from 1, 2, or 3 above. He/she must sign below. Ref. Title 14 CCR 1032.7 (a))

Signature Jim M. Tate Date 5/7/09

5. a. List person to contact on-site who is responsible for the conduct of the operation. If unknown, so state and name must be provided for inclusion in the THP prior to start of timber operations.

Name Unknown At This Time

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

- b.  Yes  No Will the timber operator be employed for the construction and maintenance of roads and landings during conduct of timber operations? If no, who is responsible?

- c. Who is responsible for erosion control maintenance after timber operations have ceased and until certification of the Work Completion Report? If not the LTO, then a written agreement must be provided per 14 CCR 1050 (c).

The LTO, which is unknown at this time.

6. a. Expected date of commencement of timber operations:  
 date of THP conformance, or  \_\_\_\_\_ (date) \_\_\_\_\_

- b. Expected date of completion of timber operations:  
 3 years from date of THP conformance, or  \_\_\_\_\_ (date) \_\_\_\_\_

7. The timber operation will occur within the:
- COAST FOREST DISTRICT  The Tahoe Regional Planning Authority Jurisdiction  
 Southern Subdistrict of the Coast F. D.  A County with Special Regulations, identify: \_\_\_\_\_
- SOUTHERN FOREST DISTRICT  
 High use subdistrict of the Southern F. D.  Coastal Zone, no Special Treatment Area  
 Special Treatment Area(s), type and identify: \_\_\_\_\_
- NORTHERN FOREST DISTRICT \_\_\_\_\_
- Other \_\_\_\_\_

8. Location of the timber operation by legal description:  
 Base and Meridian:  Mount Diablo  Humboldt  San Bernardino

Section	Township	Range	Acreage	County	Assessor's Parcel Number*
14	7N	14E	63	Calaveras	CA004004002
15	7N	14E	59	Calaveras	CA004004001
22	7N	14E	380	Calaveras	CA004004007
23	7N	14E	295	Calaveras	CA004004006
24	7N	14E	73	Calaveras	CA004004004
27	7N	14E	41	Calaveras	CA004007001

\*All parcels are included in the Option A

TOTAL ACREAGE 911 (Logging Area Only)

Planning Watershed: CALWATER Version, Identification Number, and Name: 6532.600704 Bear Creek  
 U.S. Geological Survey (USGS) Quadrangle name(s) and date(s): Devils Nose Quad 1971 (revised in 1991)

9.  Yes  No Has a Timberland Conversion been submitted? If yes, list expected approval date or permit number and expiration date if already approved.

10.  Yes  No Is there an approved Sustained Yield Plan for this property? Number \_\_\_\_\_ Date app.  
 Yes  No Has a Sustained Yield Plan been submitted but not approved? Number \_\_\_\_\_ Date sub.

11.  Yes  No Is there a THP or NTMP on file with CDF for any portion of the plan area for which a Report of Satisfactory Stocking has not been issued by CDF?  
 If yes, identify the THP or NTMP number(s): \_\_\_\_\_  
 Yes  No Is there a contiguous even aged unit with regeneration less than five years old or less than five feet tall? If yes, explain. Ref. Title 14 CCR 913.1 (933.1, 953.1) (a)(4).

12.  Yes [ ] No Is a Notice of Intent necessary for this THP?  
 Yes [ ] No If yes, was the Notice of Intent posted as required by 14 CCR 1032.7 (g)?

13. RPF preparing the THP: Name Daniel DeArmond RPF Number 2855  
Address P.O. Box 132  
City Martell State Ca Zip 95654 Phone 209-223-7170

- a. [ ] Yes  No I have notified the plan submitter(s), in writing, of their responsibilities pursuant to 14 CCR 1035 of the Forest Practice Rules.  
 Yes [ ] No I have notified the timber owner and the timberland owner of their responsibilities for compliance with the Forest Practice Act and rules, specifically the stocking requirements of the rules and the maintenance of erosion control structures of the rules.

The plan submitter is the same as one of the timberland owners and the timber owner. The plan submitter and their representatives are actively involved in timber harvest plan preparation and execution. They are well aware of their responsibilities pursuant to 14 CCR 1035 and their responsibilities regarding the stocking requirements and maintenance of erosion control structures as described in the Forest Practice Rules. Sierra Pacific Industries understands that they are responsible for erosion control maintenance after certification of the Work Completion Report.

- b.  Yes [ ] No I will provide the timber operator with a copy of the portions of the approved THP as listed in 14 CCR 1035 (e). If "no", who will provide the LTO a copy of the approved THP?

I or my supervised designee will meet with the LTO prior to commencement of operations to advise of sensitive conditions, provisions of the plan pursuant to 14 CCR 1035.2 and supply the LTO with an approved copy of this THP.

- c. I have the following authority and responsibilities for preparation and administration of the THP and timber operation. (Include both work completed and work remaining to be done):

As a Forester for Sierra Pacific Ind., I am responsible for the preparation, submission, and administration of the THP (which includes any necessary amendments to the THP). The LTO shall be responsible for supervising harvest operations and for compliance with the plans' content. For the Tractor operations and project work for this THP, I have been retained as the RPF, available to provide professional advice to the licensed timber operator and timberland owner upon request throughout the active timber operations regarding: (1) the plan, (2) the forest practice rules, (3) and other associated regulations pertaining to timber operations.

- d. Additional required work requiring an RPF, which I do not have the authority or responsibility to perform:

None.

- e. After considering the rules of the Board of Forestry and Fire Protection and the mitigation measures incorporated in this THP, I have determined that the timber operation:

- [ ] will have a significant adverse impact on the environment. (Statement of reasons for overriding considerations contained in Section III).  
 will not have a significant adverse impact on the environment.

Registered Professional Forester: I certify that I, or my supervised designee, personally inspected the THP area, and this plan complies with the Forest Practice Act, the Forest Practice Rules and the Professional Foresters Law. If this is a Modified THP, I also, certify that: 1) the conditions or facts stated in 14 CCR 1051 (a) (1) - (16) exist on the THP area at the time of submission, preparation, mitigation, and analysis of the THP and no identified potential significant effects remain undisclosed; and 2) I, or my supervised designee, will meet with the LTO at the THP site, before timber operations commence, to review and discuss the contents and implementation of the Modified THP.

Signature

Daniel DeArmond



Date

5/7/09