No.30653

D GUYANA FORESTRY COMMISSION PERMIT TO REMOVE FOREST PRODUCE

(To be completed in ink and alterations initialed)

Permit is valid for 30 days only and must be returned immediately to the point of collection if not used

Date of Kellio	Vall		State Forest	Permission No	.: Na	Name of Permittee:		
Location of SF	P:		Type of Vehic	cle:	No	o. of Vehicle:		
Name of Drive	er / Captain:		Destination:		Та	ags Used:		
LOGS / SAWN	LUMBER							
Type of Produce	Species	No. of Logs / Pieces	Volume (m3)	Amount		Tag Number	8	
				of Tags				
POLES / POST	S SPARS					OTHER	RPRODUCE	
Type of Produce	Species	Amount	Diameter	Length		Type of Produce	Amount	
hereby certify t	that the information	on presented ab	ove is true and	d correct.				
							nature of Permittee	
FOR OFFICIA	LUSEONLY							
Issued By GFC Offi			0 1	ssued To		SFPNo	D-1-07	
					CLITTURE STEND		Date & Time	
Officer		Checked in 7	Checked in Transit Ch		it	Checked at Station	Measured by	
Date & Time								
Location								
Permit Recei	and Dur		Denvis					
				Received From	n:	Date & Time Received:		
Location Rec				oyalty Due:		Receipt No:		
No. of Tags U	Ised		Tags U	sed to Date				
I hereby certi	fy, that I have c	hecked this pe	ermit and is s	satisfied that th	ne information is	true and correct.		
					The state of the	and direct.		
originature or t	Officer in Charg	0.	Date					

No. 6416

T GUYANA FORESTRY COMMISSION PERMIT TO REMOVE FOREST PRODUCE

(di Ra

Folio No .: _

(To be completed in ink and alterations initialed)

Permit is valid for 30 days only and must be returned immediately to the point of collection if not used

Date of Remov	/al:	V	WCL / TSA No.:			Name of Permittee:							
Location of Wo	CL/TSA:	T	Type of Ve	hicle:	No.	No. of Vehicle:							
Name of Drive	r / Captain:		Destination	n: ———	Tag	Tags Used:							
LOGS / SAWN LUMBER													
Type of Produce	Species	No. of Logs / Pieces	Volume (m3)	e Amount of Tags		Tag Number	s						
		/		resti	ryc	mmissi							
	*		1	0.	0	m							
	/	A	N	1		3							
	/	0,1			1	50							
		N.				5							
	/	2				2							
	/	2				3							
			1			-							
				1116									
				1110									
				11/1/	1111								
	1			1	///								
	1												
POLES / POST						OTHER	PRODUCE						
Type of Produce	Species	Amount	Diame	ter Lengti		Type of Produce	Amount						
	12	6		17		10.							
	1	3542		1		X1)	7						
		14				105/							
I hereby certify t	hat the information	n presented abo	ve is true	and correct.		TO1/-							
		1	20		1010	Sign	ature of Permittee						
FOR OFFICIAL	LUSE ONLY		~	ustai	naou								
FOR OFFICIAL USE ONLY Issued By GFC Off				Issued To		WCL / TSA No.	Date & Time						
DATE OF THE PARTY.				TAXABLE MARKET MARKET MARKET MARKET									
		Checked in Ti	ransit	Checked in Trans	sit	Checked at Station	Measured by						
Officer					- Total of Classoff	Wicasarea by							
Date & Time Location													
Permit Recei	The state of the s		Permit Received From:			Date & Time Received:							
Location Received: Total Royalty Due: Receipt No:													
No. of Tags Used Tags Used to Date													
I hereby certify, that I have checked this permit and is satisfied that the information is true and correct.													
Signature of Officer in Charge: Date:													