



Practice Plan

Multiple Practices

Instructions: Complete all requested information in this Practice Plan. Once your plan is complete, upload a copy using the Application: Part 2 link emailed to you by the Maine Forest Service. Details on specific information to include in each Practice Plan and required practice-specific information is listed in the [Practice Descriptions & Practice Plan Checklist](#). This template is for projects with multiple practices. Complete the pages for the number of practices that match your project.

Please type your Practice Plan.

Contact your District Forester or the Landowner Outreach Forester if you have questions about completing this plan.



COVER PAGE

Primary Landowner's Name:

Woodlot Town:

Woodlot County:

Forester Name:

Forester's License Number:

Has the landowner requested funding through the Woods WISE Resilience Program before, for this property, or another property?

YES NO

If yes, how much funding?

Requested Practice(s):

Check all practices that apply.

Early Stand Tending

- Pre-commercial thinning
- Early commercial thinning
- Crop tree release

Regeneration Support

- Planting
- Regeneration protection
- Regeneration management

Forest Health Management

- Invasive plant control
- Sanitation cutting

Total Number of Acres to be Treated:

Total Amount of Practice Funding Requested:

This is the amount in the yellow box on the budget spreadsheet

By selecting this box, I certify that the proposed practices support the goals and objectives of the landowner(s), and meet the guidelines of the Woods WISE Resilience program. I certify the information provided is true to the best of my knowledge.

Forester's Signature:

Date:

Sign after completing all other parts of the form to avoid an error saving, if using a digital signature



FINANCIALLY VIABLE PRACTICES

For practices that produce merchantable wood, Resilience Foresters must provide written justification on why financial incentives are needed to implement the practice. Reimbursements will be calculated based on net practice expenses. If a practice is not financially viable, details on generated income are not required.

A practice is not financially viable in the context of this program if it meets Criterion 1 or 2, listed below, and one or more of the following bullet points

Criterion 1: < 25% of the canopy is removed & < 5% of harvested wood is sawlogs; 95+% is low-grade (pulp, firewood, biomass)

Criterion 2: < 7 cords/acre of merchantable material removed & < 5% of harvested wood is sawlogs; 95+% is low-grade (pulp, firewood, biomass)

AND one or more of the following

- Small or specialized equipment is needed (brush saws, manual chainsaw, small harvester/forwarder/skidder <15 tons, etc.)
- The total treatment area is small (5-15 acres)
- Personal use products/volumes only (e.g., firewood for the landowner's use)
- No marketable forest products are generated
- Long skid distance from practice area to road edge

Is the proposed work financially viable?

YES

NO

If yes, what is the expected income from this work? The amount should match the anticipated income listed in Step 4 of the WoodsWISE Resilience Program Budget Template.

Briefly explain why funding is needed through the WoodsWISE Resilience Program to complete the proposed work.



WoodsWISE Resilience Program
Practice Plan

PRACTICE 1 DESCRIPTION

Practice Name:

Total Practice Area Acres:

Stand Description:



WoodsWISE Resilience Program Practice Plan

Practice Prescription:



WoodsWISE Resilience Program Practice Plan

Maps and Photos: A map of the practice area and a soil map are required for your practice plan. These can be a single map or two separate maps. Photos of the area pre-treatment are also required. You will upload these into the WWRP Application: Part 2 link as a JPEG, PNG, or PDF file type.

Spatial data for the practice area must be emailed separately to Greg Miller at Greg.T.Miller@maine.gov, cc-ing WWRP.DACF@maine.gov. Acceptable data format includes .SHP or .KML files. Coordinates for practice area boundaries may be submitted for spatial data if they are entered into an Excel file.



WoodsWISE Resilience Program
Practice Plan

Post-Treatment Conditions:

Possible Challenges or Limitations:



WoodsWISE Resilience Program Practice Plan

Regulatory Considerations:



WoodsWISE Resilience Program
Practice Plan

PRACTICE 2 DESCRIPTION

Practice Name:

Total Practice Area Acres:

Stand Description:



WoodsWISE Resilience Program Practice Plan

Practice Prescription:



WoodsWISE Resilience Program Practice Plan

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WoodsWISE Resilience Program Practice Plan

Post-Treatment Conditions:

Possible Challenges or Limitations:



WoodsWISE Resilience Program Practice Plan

Regulatory Considerations:



WoodsWISE Resilience Program
Practice Plan

PRACTICE 3 DESCRIPTION

Practice Name:

Total Practice Area Acres:

Stand Description:



WoodsWISE Resilience Program Practice Plan

Practice Prescription:



WoodsWISE Resilience Program Practice Plan

Maps and Photos: A map of the practice area and a soil map are required for your practice plan. These can be a single map or two separate maps. Photos of the area pre-treatment are also required. You will upload these into the WWRP Application: Part 2 link as a JPEG, PNG, or PDF file type.

Spatial data for the practice area must be emailed separately to Greg Miller at Greg.T.Miller@maine.gov, cc-ing WWRP.DACF@maine.gov. Acceptable data format includes .SHP or .KML files. Coordinates for practice area boundaries may be submitted for spatial data if they are entered into an Excel file.



WoodsWISE Resilience Program Practice Plan

Post-Treatment Conditions:

Possible Challenges or Limitations:



WoodsWISE Resilience Program Practice Plan

Regulatory Considerations:



WoodsWISE Resilience Program
Practice Plan

PRACTICE 4 DESCRIPTION

Practice Name:

Total Practice Area Acres:

Stand Description:



WoodsWISE Resilience Program Practice Plan

Practice Prescription:



WoodsWISE Resilience Program Practice Plan

Maps and Photos: A map of the practice area and a soil map are required for your practice plan. These can be a single map or two separate maps. Photos of the area pre-treatment are also required. You will upload these into the WWRP Application: Part 2 link as a JPEG, PNG, or PDF file type.

Spatial data for the practice area must be emailed separately to Greg Miller at Greg.T.Miller@maine.gov, cc-ing WWRP.DACF@maine.gov. Acceptable data format includes .SHP or .KML files. Coordinates for practice area boundaries may be submitted for spatial data if they are entered into an Excel file.



WoodsWISE Resilience Program Practice Plan

Post-Treatment Conditions:

Possible Challenges or Limitations:



WoodsWISE Resilience Program Practice Plan

Regulatory Considerations: