

REGISTERED FUR MANAGEMENT AREA OPERATING PLAN

A. General For Year:

RFMA #:		WMU's :		Senior Holder:			
				For: ____yrs.			
RFMA Area (ha.):		# of twps:		Junior Partner #1:			
Zone #:		Local #:		Junior Partner #2:			
Days Spent Last Season:	Trapping:	Preparations:		Junior Partner #3:			

USE COMMENTS SECTION (PAGE 2) FOR ADDITIONAL PARTNERS

B. Cabins

No. of Cabins:							(indicate legal location below)	Lat./North	Long./East	Active	Old
1	¼	Sec.	Twp.	Rge.	W of	Mer.					
2	¼	Sec.	Twp.	Rge.	W of	Mer.					
3	¼	Sec.	Twp.	Rge.	W of	Mer.					
4	¼	Sec.	Twp.	Rge.	W of	Mer.					

USE COMMENTS SECTION (PAGE 2) FOR ADDITIONAL CABINS

C. Fur Harvest (include copy of shipping receipts for past 5 years)

Species	Plan	Total Five-year Harvest History (number) and Population (L, M, H)*				
	Yr.	Yr.	Yr.	Yr.	Yr.	Yr.
Badger						
Beaver						
Black Bear						
Bobcat						
Coyote						
Ermine/ Weasel						
Fisher						
Fox						
Arctic Fox						
Lynx						
Marten						
Mink						
Muskrat						
Otter						
Raccoon						
Red Squirrel						
Wolf						
Wolverine						
Other (specify)						

- Includes diseased or damaged animals not sold

D. Last Seasons Industrial Activity:

(check type(s)): Disturbance Description, Company/dates/times/hectares)

(Vandalism also recorded here under "other")

	Company Name	Phone #	Date(s)	Contact Names
Forestry				
Oil & Gas				
Siesmic				
Other				

E. Upcoming Industrial Activity

Disturbance Description (company/dates/times/hectares)	Phone	Contact name

F. Biological Indicators

Indicator Species	Current If Known	Check: Population level (Low, Medium, High) and Disease* (Yes/No)														
		Yr.			Yr.			Yr.			Yr.			Yr.		
Rabbits		L	M	H	L	M	H	L	M	H	L	M	H	L	M	H
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Mice		L	M	H	L	M	H	L	M	H	L	M	H	L	M	H
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Grouse		L	M	H	L	M	H	L	M	H	L	M	H	L	M	H
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Deer		L	M	H	L	M	H	L	M	H	L	M	H	L	M	H
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Moose		L	M	H	L	M	H	L	M	H	L	M	H	L	M	H
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify)		L	M	H	L	M	H	L	M	H	L	M	H	L	M	H
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

*Disease includes parasites, ticks, poor condition

G. Environmental Indicators

	Present Yr.	Yr.	Yr.	Yr.	Yr.	Yr.
Water Level (L, M, H)						
Fire History (acres or Ha. area burned)						
Snow Cover (L, M, H)						
Freeze up (early, normal, late)						
Other						

H. Comments

I. Contact Information

Senior Holder
Mailing Address:

Street:	
Town:	Province:
Postal Code:	Phone Number:
Fish & Wildlife District:	Alternate Phone Number:

J. Map

The attached Map includes the following items:

	Trails
	Bait Sites
	Cabin Location
	Trapline Access
	Upcoming Operating Area

K. Signatures

Senior Holder Signature:	Date:
ASRD (F&W) Filing date:	Date:

Waiver:	“I allow other land use industry to access this plan”	Date:
RFMA holder Signature:		