USDA Forest Service

FS-2700-6b(03/06)
OMB No. 0596-0082

RECREATION RESIDENCE SELF-INSPECTION REPORT

RANGER DISTRICT
ATTN:
ADDRESS
ADDRESS
FAX

PART I - TERMS AND CONDITIONS

Permit Holder/Primary & Mailing Address/Telephone	Tract: Lot #:

Yes	No	1. Have you built or modified your structures during the past year? (Clause III-A) If yes, explain.
Yes	No	2. Do you plan to construct or modify structures on the lot during the next year? (Clause III-B) If yes, explain.
Yes	No	3. Do your structures meet state and local regulations and have you had an annual inspection if required by these entities? (Clause IV-A) If no, explain.
Yes	No	4. Have you or do you plan to cut down any trees, altered the vegetation, or caused disturbance to the soil on the lot? (Clause IV-D) If yes, explain.
Yes	No	5. Have your kept your structures and access road in good repair, and maintained a neat appearance on the lot? (Clause IV-E) If no, explain.
Yes	No	6. Have you removed dangerous trees, limbs, or other hazardous conditions that could pose a risk of injury? (Clause IV-G) If no, explain what hazards exist.
Yes	No	7. Have you paid your rental fees for the current year? (Clause VI) If no, explain.
Yes	No	8. Have you received written approval for renting or subleasing your structures? (Clause VII-E) If no, explain.
Yes	No	9. Are you planning to sell your structures in the next year? (Clauses IV-H & VII-C, D) If yes, request a FS-2700-3a form and complete.
Yes	No	10. Are you living at the recreation residence full-time, to the exclusion of a home elsewhere? (Clause I-C) If yes, explain.

Comments:

Attach additional sheets, if necessary
Please sign, date, and return this form to your local Ranger District by: _____

PART II - OPERATION AND MAINTENANCE PLAN STANDARDS

!USE THIS SECTION TO LIST STANDARDS FROM APPROVED LOCAL O & M PLANS**!**

Item Inspected	Meets Standard	Action Required/Due Date
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	
	Yes No	

I certify that I have inspected the structures and permitted area, and the above information is accurate and true. I understand that any modifications to the structures and lot require prior written approval by the authorized officer.

_____ _____

Signature of Permit Holder Date

_____

Print Name

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