Application for Term Grazing Permit

(Reference FSM 2230 and FSH 2209.13)

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| NOTE: The information requested on this form is voluntary; however, all the data requested is necessary if you wish to be considered as a qualified applicant for a grazing permit. The data is requested under authority of 5 USC 301, 36 CFR 222.3. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Section A (*To be completed by Applicant*) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I, | |  | | | | | | | | | | | | | | | | | | | | | of | | | | |  | | | | | | | | | | | | | |
|  | | *(Name of Applicant)* | | | | | | | | | | | | | | | | | | | | |  | | | | | *(Mailing Address including Zip Code)* | | | | | | | | | | | | | |
| do hereby apply for a permit to graze livestock on National Forest System lands or other lands under Forest Service control as follows: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LIVESTOCK | | | | | | | | | | | | | PERIOD OF USE | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Number | | | | | Kind | | | | | Class | | | From | | | | | | | | To | | | | | | | | | GRAZING ALLOTMENT | | | | | | | | | | | |
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| It is fully understood and agreed that a grazing permit, if issued and accepted pursuant to this application, may be cancelled or suspended, in whole or in part for: (a) failure to comply with the terms and conditions in the grazing permit, regulations of the Secretary of Agriculture on which the permit is based, or annual operating or other instructions of Authorized Officers issued pursuant to the permit; (b) knowingly and willfully making a false statement or representation in this application; (c) conviction for failure to comply with Federal laws or regulations or State and local laws relating to livestock control and to protection of air, water, soil and vegetation, fish and wildlife, and other environmental values when exercising the grazing use authorized by the permit; (d) to devote the affected National Forest System lands to another public purpose, including disposal; or (e) because the National Forest System lands or other lands under Forest Service control described in the permit are no longer available for grazing.  It is also fully understood and agreed that a grazing permit, if issued pursuant to this application, may be modified to conform to current situations brought about by changes in law, regulations, executive orders, allotment management plans, land management planning, or other management needs. A permit issued pursuant to this application may also be modified because of resource conditions or permittee request. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The following statements and representations constitute a part of this application for a term grazing permit. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. I own and seek grazing authorization for | | | | | | | | | | | | | | | | |  | | | | | head of cattle, | | | | | | | | | | |  | head of horses, and/or | | | | | | | |
|  |  | | | | | head of sheep, branded and earmarked as follows: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SHEEP  BRAND | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 2. I own the following land which I hereby submit as base property for this grazing permit: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Description: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | (*Section, Township, and Range*) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | Classified as: | | | | | | |  | | |  | | | |  | | | | | | | | |  | | | | | | |  | | |  | |  |  | | | | |
|  | | | | | | | | (*Range*) | | |  | | | (*Improved Pasture*) | | | | | | | | | | | | |  | | | | (*Cultivated*) | | |  | | (*Total Acres*) |  | | | | |
|  | In addition, I own or lease the following lands that are associated with this application: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Classified as: | | | | | | |  | | |  | | | |  | | | | | | | | |  | | | | | | |  | | |  | |  |  | | | | |
|  | | | | | | | | (*Range*) | | |  | | | (*Improved Pasture*) | | | | | | | | | | | | |  | | | | (*Cultivated*) | | |  | | (*Total Acres*) |  | | | | |
| 3. Do you currently hold a lease or permit from the Bureau of Land Management authorizing the grazing of livestock on public lands?  Yes  No  (*If yes, provide a copy of the lease or permit*.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Application Continued – (*Please answer questions 4 through 9*) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. Does anyone else possess an ownership interest in the livestock identified in Number 1 above? Yes  No  (*If yes, identify the name and mailing address of all other co-owners of the livestock*.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 5. Do you currently hold, or have interest in, any other Forest Service term permit authorizing grazing on National Forest System lands? Yes  No  (*If yes, provide a copy of the permit.*) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. Do you have an application for a term grazing permit currently pending before the Forest Service? Yes  No  (*If yes, provide a copy of the application.*) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7. Are you submitting this application as an agent or representative of a corporation, partnership, trust, or other legal entity? Yes  No  (*If yes, include copies of a list of shareholders or partners, a list of the officers and directors, or other documents showing full ownership of the organization.*) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8. Does a managerial agreement regarding the base property and/or permitted livestock exist with a third party? Yes  No  (*If yes, provide a copy of the agreement*.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9. I hereby request that the following provision be made part of my grazing permit: (*Complete if applicable.*) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| That I be allowed to graze a total of | | | | | | | | | | | | |  | | | | | | head of | | | | | |  | | | | | | | under an on-and-off provision on the | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | grazing allotment. The land I control together with the adjacent National Forest System | | | | | | | | | | | | | | | | | | | | | | | | | | |
| lands or other lands under Forest Service control forms a natural grazing unit. The land I offer consists of | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | acres I own | | | | |
| and | | | |  | | | | acres I lease or have the right to use more particularly described as follows: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| A copy of the proof to graze leased (*non-owned*) land is required. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Signature of Applicant | | | | | | | | | | | | | | | | | | | | | | | | | | Title | | | | | | | | | | | | | Date | | | |
| Section B (*To be completed by Recommending Officer*) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The number, kind, and class of livestock, period of use, and grazing allotment on which the livestock are recommended to graze are as entered below. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LIVESTOCK | | | | | | | | | | | | PERIOD OF USE | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |
| Number | | | | | Kind | | | | Class | | | From | | | | | | | | To | | | | | | | | | GRAZING ALLOTMENT | | | | | | | | | | | | | |
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| On-and-Off Provisions:  Provides for a total of \_\_\_\_\_\_\_\_ head of \_\_\_\_\_\_\_\_\_\_\_\_ to be grazed under an on-and-off provision. Attach Part 3 to the permit. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature of Recommending Officer | | | | | | | | | | | | | | | | | | Name (*print*) | | | | | | | | | | | | | | | | | Title | | | | Date | | | |
| **Burden Statement**  *According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0596-0003. The time required to complete this information collection is estimated to average 30 minutes per response, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.*  *The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, and marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA’s TARGET Center at 202-720-2600 (voice and TDD).*  *To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**Instructions for Completion of Form FS-2200-016, Application for Term Grazing Permit**

*(Reference FSM 2230 and FSH 2209.13)*

**Section A**

Applicant – Enter Name of entity who is applying for a permit. (NOTE: Applicant name must match the name on the Base Property ownership documents and brand certificate unless an approved exception per FSH 2209.13.)

Address – Enter address of entity who is applying for a permit.

Permit Number – Enter the identifying number of the active permit which is being waived.

Livestock Number– Enter the number of animals being applied for.

Livestock Kind – Enter the appropriate livestock kind.

Livestock Class – Enter the appropriate livestock class.

Period of Use. (From/To) – Enter dates (mm/dd) of the period being applied for.

Grazing Allotment(s) – Enter the complete name of the allotment(s) the applied for use would occur on.

1. Head of Cattle – Enter the number of Cattle owned and seeking authorization for.

Head of Horses – Enter the number of Horses owned and seeking authorization for.

Head of Sheep – Enter the number of Sheep owned and seeking authorization for.

Brand and Earmark

Draw on the right and or left ear the earmark used.

Draw on the right and/or left cow the brand used.

Draw on the right and/or left horse the brand used

Draw in the block the sheep brand used.

1. Description – Enter the legal description of the base property submitted for this permit.

Base Property Classified as – Enter the acres submitted classified as Range, Improved Pasture, Cultivated and the total.

Additional Land Classified as - Enter the other owned or leased acres classified as Range, Improved Pasture, Cultivated and the total.

1. Answer Yes or No to the question asked.
2. Answer Yes or No to the question asked.
3. Answer Yes or No to the question asked.
4. Answer Yes or No to the question asked.
5. Answer Yes or No to the question asked.
6. Answer Yes or No to the question asked.
7. No. of Head – Enter the total number of animals applying for with on/off provisions.

Cattle/Horses/Sheep – Enter the livestock kind applying for with on/off provisions.

Grazing Allotment(s) – Enter the complete name of the allotment(s) the applied for use would occur on.

No. of Owned Acres – Enter the number of acres that are owned to be used as part of this permit.

No. of Leased Acres – Enter the number of acres that are leased to be used as part of this permit.

Description – Enter the legal description of the owned and leased property. NOTE: attach copy of the proof to graze on leased land to the application.

Signature of Applicant – Enter the complete full name of the permit holder applying for the Permit.

Title – Enter the title of the person applying for the permit.

Date – Enter the date of signature.

**Section B**

Livestock Number– Enter the number of animals recommended for approval.

Livestock Kind – Enter the appropriate livestock kind.

Livestock Class – Enter the appropriate livestock class.

Period of Use. (From/To) – Enter dates (mm/dd) of the period recommended for approval.

Grazing Allotment(s) – Enter the complete name of the allotment(s) recommended for approved occupancy.

On-and-Off Provisions No. of Head – Enter the total number of animals recommended for approval with on/off provisions.

On-and-Off Provisions Cattle/Horses/Sheep – Enter the livestock kind recommended for approval with on/off provisions.

Signature of Recommending Officer – Enter the official signature of the Recommending official

Name (Print) – Print the name of the recommending official.

Title – Enter the official Title of the recommending official

Date – Enter the date that the recommendation was submitted.