

Personal Information Form

This form is available on the [Department Web site](#)

You have informed the Ministère des Forêts, de la Faune et des Parcs about your decision regarding disclosure of your forest producer file.

You can change your choice at any time. To do so, simply fill out and sign this form and then send it to the registry office in charge of your file. Once it has been received, action will be taken to convey your information or maintain its confidentiality.

FOREST PRODUCER'S AUTHORIZATION

I agree that the information provided in my forest producer file can be sent to the concerned regional agency for private forest development, and to the persons commissioned by it or by the Department to prepare or implement programs for certified forest producers. In not giving my consent, I am aware that the regional agency for private forest development cannot process my application until I give written authorization to that effect.

Yes No

INFORMATION ABOUT THE FOREST PRODUCER

Permanent Code

Name *(Enter the name that appears on your Forest Producer Certificate)*

Home, Business, or authorized representative's Address

(Number, Street, Apartment, PO Box, Rural Route)

Municipality

Province, State, Country

Postal Code

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Signature *(Forest producer or authorized representative)*

Date *(Year-Month-Day)*

Remember to check off your choice, and sign and date the form.