

District #:_____ **Reviewed by:**_____ **Date:**_____

Property Owner Name: _____ Tax Map #: _____ Tax Lot #: _____

Physical Address: _____

Mailing Address: _____

Email Address: _____ Best phone number: _____

Property use: Vacant Full-time resident Part-time resident Absentee Rental Foreclosure In Trust

Other: _____ Total acreage: _____ Nearest access road: _____ Public Private

Do you have gorse or other invasive species on your property? Yes No Other: _____Gorse Infestation: % of acreage covered _____ Height of gorse _____ feet _____ inches

% Equipment Accessible

% Manual crew accessible

% Not accessible

Terrain Description:Slopes: % area @ % slope, % area @ % slope, % area @ % slopeFlat: % of property less than 10% slope Structures: % of propertyWater: % of property Spring Creek River Pond/Wetland/SeasonalSpecial considerations: Cliffs Large rocks Wildlife Cultural site Erosion Other:Notifications needed: City of Bandon Coquille Indian TribeAdjacent property owners: (Please list names & addresses)Other potential cooperating properties to consider in this plan: (Please list names & addresses)

Has this property owner attended GAG outreach events/public forums? Yes No

Has this property owner visited the GAG website or demonstration site? Yes No

Will this property owner be able to access email and the internet? Yes No

Will this owner allow grinding of their gorse or others' gorse on their property?

Will this owner allow access through their property for other properties? Yes No

Will this owner allow herbicide applications on their property? Yes No

Will this owner allow herbicide application on adjacent properties? Yes No

Is this owner interested in cost-share options with matching commitment? Yes No

Is this owner interested in Firewise information or outreach by CFPA? Yes No

Does this property have other noxious weeds present? Yes No

Notes:

**For additional assistance contact Vegetation Management Coordinator,
City of Bandon, gorse@cityofbandon.org - 541.329.9595**