



Environment,
Energy and Forestry
Forests, Fish and
Wildlife Division

Ground Hemlock (*Taxus canadensis*) Buyers Semi-Annual Report Form

Note: All weights must be for green material and reported in kilograms.

Date submitted:		Please Print except where signature or initials are required.	
Reporting period (check one)			
<input type="checkbox"/> May 1 - October 31 _____ (Yr)		<input type="checkbox"/> November 1 - April 30 _____ (Yr)	
1.0 Company			
Company Name:			
Owner/Agent Name		Buyers Licence #:	
Mailing Address:		Postal Code:	
Phone: () ()	FAX: () ()	Cell: () ()	
Email:		Buyer Signature:	
Total green weight of Ground Hemlock purchased on PEI during the reporting period: _____ Kg			
2.0 Buying Agents Who Operated on Your Behalf			
Buying Agent's Name:		Buyers Licence #:	
Buying Station Location:		Community:	
Street or Civic Address:		Is taxus stored at this location: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Phone: () ()	FAX: () ()	Cell: () ()	
Email:			
Buying Agent's Name:		Buyers Licence #:	
Buying Station Location:		Community:	
Street or Civic Address:		Is taxus stored at this location: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Phone: () ()	FAX: () ()	Cell: () ()	
Email:			
Buying Agent's Name:		Buyers Licence #:	
Buying Station Location:		Community:	
Street or Civic Address:		Is taxus stored at this location: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Phone: () ()	FAX: () ()	Cell: () ()	
Email:			

3.0 Storage Facilities (If different from the location listed in Question #2)

If different from the areas listed in Section 2.0, please provide the locations of store houses, storage facilities or other areas where the Ground Hemlock is kept and/or dried on behalf of the buyer listed in section 1.0.

Location/Community:

Street or Civic Address:

Contact Person:

Phone:

()

Location/Community:

Street or Civic Address:

Contact Person:

Phone:

()

List and attached additional Storage Facility information if required.

4.0 Transportation

Please provide the names of all licensed harvesters or licensed buyers who transported Ground Hemlock for this station in this reporting period.

Transporter's Name:

Harvester/Buyer Licence #::

Transportation Vehicle License Plate #

Province

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Harvester/Buyer Licence #::

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5.0 Licensed Harvesters

Please provide the names of all licensed harvesters/buyers who sold ground hemlock to this operation during this reporting period.

Harvester Name:

Harvester Licence #::

Green Weight Purchased:

Harvester Name:

Harvester Licence #::

Green Weight Purchased:

Harvester Name:

Harvester Licence #::

Green Weight Purchased:

Harvester Name:

Harvester Licence #::

Green Weight Purchased:

Harvester Name:

Harvester Licence #::

Green Weight Purchased:

Harvester Name:

Harvester Licence #::

Green Weight Purchased:

Harvester Name:

Harvester Licence #::

Green Weight Purchased:

Harvester Name:

Harvester Licence #::

Green Weight Purchased:

Harvester Name:

Harvester Licence #::

Green Weight Purchased:

Harvester Name:

Harvester Licence #::

Green Weight Purchased:

6.0 Harvest Information

Please provide the names of any **non-licensed land owners**, who sold Ground Hemlock harvested from their land to this buying Station/.Buyer during the reporting period.

Owner Name:	Phone: ()	Property id #
Purchase Date(s):	Quantity Purchased:	
Owner Name:	Phone: ()	Property id #
Purchase Date(s):	Quantity Purchased:	
Owner Name:	Phone: ()	Property id #
Purchase Date(s):	Quantity Purchased:	
Owner Name:	Phone: ()	Property id #
Purchase Date(s):	Quantity Purchased:	
Owner Name:	Phone: ()	Property id #
Purchase Date(s):	Quantity Purchased:	
Owner Name:	Phone: ()	Property id #
Purchase Date(s):	Quantity Purchased:	
Owner Name:	Phone: ()	Property id #
Purchase Date(s):	Quantity Purchased:	
Owner Name:	Phone: ()	Property id #
Purchase Date(s):	Quantity Purchased:	
Owner Name:	Phone: ()	Property id #
Purchase Date(s):	Quantity Purchased:	
Owner Name:	Phone: ()	Property id #
Purchase Date(s):	Quantity Purchased:	
Owner Name:	Phone: ()	Property id #
Purchase Date(s):	Quantity Purchased:	
Owner Name:	Phone: ()	Property id #
Purchase Date(s):	Quantity Purchased:	
Owner Name:	Phone: ()	Property id #
Purchase Date(s):	Quantity Purchased:	
Owner Name:	Phone: ()	Property id #
Purchase Date(s):	Quantity Purchased:	