

WHA Data Form – Single Proposal

WHA proposal #:
WHA proposal name:

Location of this Site is Sensitive ☐ Yes ☐ No

If yes, please do not disclose or distribute this package without prior consultation with MoE or the CDC

WILDLIFE HABITAT AREA DATA FORM SINGLE PROPOSAL

STEP 1. WHA PROPOSAL

(ALL fields in Step 1 to be completed by proponent unless otherwise indicated)

PROPONENT INFORMATION

Contact Name:

Title:

Organization:

Mailing Address:

Province:

Postal Code:

Phone:

Fax:

GENERAL SITE INFORMATION

Identified Wildlife Common Name:

Scientific Name:

Forest District Name:

Date Submitted (YY/MM/DD):

Landscape Unit Name:

Reference Material (e.g., maps, photos; optional, please attach):

Describe how the site meets the requirements for WHA designation (see species WHA description). Describe whether species was observed at the site or other evidence to support WHA (e.g., nest or den site, shell fragments, breeding behaviour).

If the WHA includes one or more wildlife habitat feature(s) (WHF), complete the table below (please add/delete rows as appropriate):

Feature / Field Label	UTM Coordinates (use NAD 83)			Date obs. (YY/MM/DD)	Brief description (e.g., landscape context ¹ , condition ² , use by 2 ^o species ³ , etc.)
	Zone	Easting	Northing		

¹ Landscape context - generally describe the surrounding area and adjacent land uses including species composition and any other biological or abiotic factors that may affect the population.

² Condition – a measure of the quality of biotic and abiotic factors, within the WHA, and how they may affect the continued existence of the WHA; factors to consider include: habitat degradation, disturbance, and presence of exotic species.

³ Mention if observed or unconfirmed use by 2^o species.

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Nearest Gazetted Location:

Directions to the site (describe access to the site):

Describe area and surrounding land use (e.g. neighbouring land ownership, land use activities, potential development plans, etc.).

DATA INVENTORY INFORMATION

Was this data collected as part of an inventory?

☐ Yes

☐ No

If yes: Name of Inventory

Season

Year

Has species/ecosystem data been provided to: the Conservation Data Centre

☐ Yes

☐ No

OR the Wildlife Species Inventory (WSI) database

☐ Yes

☐ No

For fish species has species/ecosystem data been provided to: the CDC

☐ Yes

☐ No

AND the Fish Data Submission (FDS) website

☐ Yes

☐ No

Note: Submission of the data to the CDC (<http://www.env.gov.bc.ca/cdc/contribute.html>) or WSI (<http://www.env.gov.bc.ca/wildlife/wsi/contributions.htm>) is mandatory in order for the proposal to be approved (with the exception of Marbled Murrelet and Grizzly Bear proposals).

For fish species data must be submitted to the FDS (http://wwwd.env.gov.bc.ca/fish_data_sub/index.html) and the CDC (<http://www.env.gov.bc.ca/cdc/contribute.html>) in order for the proposal to be approved.

STEP 2. BIOLOGICAL REVIEW (TO BE COMPLETED BY MOE REGIONAL DESIGNATE)

Is the proposal 100% on Crown Land (or private land that is part of a TFL or woodlot):

☐ Yes

☐ No

Does the proposal meet the minimum requirements of the WHA description?

☐ Yes

☐ No

Is the site previously unknown?

☐ Yes

☐ No

Has the site been field checked?

☐ Yes

☐ No

If yes, provide the date:

Proposal accepted?

☐ Yes

☐ No

Rationale for decision. Include reasons for accepting/rejecting the proposal:

Name:

Date:

Signature:

(Qualified Registered Professional)

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STEP 3. AFFECTED PARTY REVIEW OF PROPOSAL (TO BE COMPLETED BY MOE REGIONAL DESIGNATE)
Consultation Initiation Date (i.e. date Regional Committee sent WHA package for distribution):
Date comments due back from affected parties:
Existing or tenured activities (<i>please check</i>) ☐ Access ☐ Forestry ☐ Range ☐ Mining ☐ Oil & Gas ☐ Recreation ☐ Other Describe other:
AFFECTED PARTY CONSULTATION SUMMARY
Forestry Tenure Holder(s):
Contact Name: Company Name: Address: e-mail:
Contact Name: Company Name: Address: e-mail:
Contact Name: Company Name: Address: e-mail:
Range Tenure Holder(s):
Contact Name: Company Name: Address: e-mail:
Contact Name: Company Name: Address: e-mail:
Contact Name: Company Name: Address: e-mail:
Surface and Subsurface Tenure Holder(s):
Contact Name: Company Name: Address: e-mail:
Contact Name: Company Name: Address: e-mail:
Contact Name: Company Name: Address: e-mail:
First Nations Groups:
Contact Name: Band or Group: Address: e-mail:

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Contact Name: Band or Group: Address: e-mail:
Contact Name: Band or Group: Address: e-mail:
MOFR District
Contact Name: Department: Address: e-mail:
Other (ILMB, etc.):
Name: Agency: Address: e-mail:
Name: Agency: Address: e-mail:
Name: Agency: Address: e-mail:
Operational Impacts: Forestry: Range: Mineral: Other:
Unresolved issue(s):
Management considerations used to reduce impact and/or resolve issues (e.g., boundary adjustments):
Wildlife habitat area: Core area (ha): Buffer area (ha): Total area (ha):

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Provide justification for choice of WHA boundaries. Include reasons for any variation from that recommended in *Accounts and Measures for Managing Identified Wildlife*:

General wildlife measures:

☐ Adopted as outlined in IWMS ☐ Modified measure(s) recommended

Specify the modified measures (use exact wording to be used for signed Order):

Is there a potential for future exemptions? ☐ Yes ☐ No
If yes, describe:

Additional management considerations related to but not directly a part of this candidate WHA:

QUALIFIED REGISTERED PROFESSIONAL CERTIFICATION

Submitted by (please print):

Agency:

Signature: _____

Date: