

Wisconsin Department of Agriculture, Trade and Consumer Protection

Agricultural Resource Management Division - Plant Industry Bureau 2811 Agriculture Drive, P.O. Box 8911 Madison, WI 53708-8911

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For office use only
Certification #
Chs 93 06 and 94 11 Wis State

and ATCP 21.20, Wis. Adm. Code.

FIREWOOD CERTIFICATION INSPECTION REPORT

Applicant Name and Address:	Location of wood for inspection (if different from applicant address):							
					County			
Applicant Phone: Cell Phone:			Contact Name and E	County: Contact Name and Email address:				
WOOD TREATMENT METHODS (check all that apply):			KILN INFO:	KILN INFO:				
The state of the s			Type of kiln:	Type of kiln:				
☐ Wood is seasoned for at least 2 years.				Kiln has temperature recording instruments?				
☐ Wood is kiln dried or heat treated.			Does company keep temperature records? Yes No					
$\ \square$ Other (describe in Comments section below).			Minimum of 60 min	Minimum of 60 min at core temp of 140° F? \Box Yes \Box No				
WOOD INFO (check all that apply):		WOOD SPECIES (by percentage):						
☐ Wood is slab wood.		Conifers:	%	Hardwoods:		%		
☐ Wood is split.		DISTRIBUTION (check all that apply):						
☐ Wood is pallet material.		☐ Sold on site	☐ Bundled	☐ Bulk (to move)		☐ La		
☐ Wood is dimensional lumber.		☐ Sawed/Split	☐ Bagged	☐ Lumber		☐ Slabs/Trimmings		
☐ Wood is in log form.	-	PROCESS FOR RESIDUE?						
Other:								
MOVEMENT:								
Wood Sources:								
Firewood obtained from which co	unties?							
Quarantine concerns?								
Interstate movement? Yes No Which states?								
COMMENTS:								
LATITUDE N:		LONGITUDE W	LONGITUDE W: -			Certifiable Vendor? ☐ Yes ☐ No		
Inspected by:		Phone:	Phone:					
Signature:		Date:			35			