



Southern Pine Beetle Prevention Program
Request for Extension or Cancellation

Landowner Name _____ Address _____ Phone _____

TFS Forester _____ Current Expiration Date _____

Type of Request:

3 Month Extension 6 Month Extension Contract Cancellation

Reason for Extension/Cancellation:

Landowner Signature: _____ Date: _____

Section to be Completed by Project Manager

Date Received: _____

Action Taken: Extension Approved Extension Not Approved Contract Cancelled

If Extension Approved, New Expiration Date: _____

Project Manager Signature: _____ Date: _____

Return signed request to
Shane Harrington, Program Manager:
Texas A&M Forest Service
200 Technology Way, Suite 1281
College Station, TX 77845

Extension requests will be reviewed on a case by case basis. Landowners are limited to one contract extension not to exceed 6 months, approval of request and length of extension is the discretion of the program manager