

**STOP. Do Not Fill Out the Below Unless You Want to Cancel.**

**SHASTA COUNTY WILDFIRE MITIGATION PROJECT  
WITHDRAWAL FORM**

To cancel the Right-of-Entry for the Shasta County Wildfire Mitigation Project, this Withdrawal Form must be signed by the Permitter, and delivered to:

VESTRA Resources, Inc.  
Shasta County Wildfire Mitigation Project  
5300 Aviation Drive  
Redding, CA 96002

Phone: (530) 223-2585  
Email: grantsupport@vestra.com

The Withdrawal Form must be countersigned and fully executed by an authorized employee or agent of the Permittee with the original Withdrawal Form obtained for the records of the Permittee. Allow at least five (5) business days to process. The Withdrawal Form will not be valid without the signature of an authorized employee or agent of the Permittee.

I, the Permitter, have read and understand the forgoing statement concerning the cancellation process. I hereby certify that the Hazardous Fuels Reduction treatment work, including mechanical or hand treatment such as broadcast chipping, mastication, or removal from the property has not yet commenced, and that I request to cancel the Right-of-Entry (ROE).

\_\_\_\_\_  
Printed Name of Property Owner(s) or Owner's Agent

\_\_\_\_\_  
Signature of Property Owner(s) or Owner's Agent

\_\_\_\_\_  
Date

Property Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Assessor Parcel Number(s) (APN): \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**I hereby acknowledge receipt of the foregoing request for cancellation.**

\_\_\_\_\_  
Printed Name of Permittee's Authorized Employee or Agent

\_\_\_\_\_  
Signature of Permittee's Authorized Employee or Agent

\_\_\_\_\_  
Date