

AFC Unit\_\_\_\_\_

A35.307

County\_\_\_\_\_

ARKANSAS FORESTRY COMMISSION  
RESIDENCY CERTIFICATION

I understand the residency requirements of the Arkansas Forestry Commission Policy § 35-A, requires me to reside full time (not just a mailing address or P.O. Box) within 15 regularly traveled road miles of the County Work Center or within the county(s) to which I am assigned.

I certify that I currently meet these requirements. I understand that it is reason for termination if I relocate my residence and fail to meet the requirements of AFC Policy § 35-A.

Signature\_\_\_\_\_

Date \_\_\_\_\_