

APPENDIX E

CLIENT TRANSPORT AND BICYCLE DELIVERY SERVICE
OUTFITTER/GUIDING - OPERATING PLAN
WHITE RIVER NATIONAL FOREST
DILLON AND EAGLE/HOLY CROSS RANGER DISTRICTS

Name of Outfitter and/or Business:

Name of Agent/ Representative:

Address:

Phone: (w) (c)

Fax:

Agent/Representative E-mail:

Business Website:

District(s) Operating On: Dillon and Eagle/Holy Cross Ranger District - White River National Forest

Activity(ies): Client Transport and Delivery/ Pick-up of bicycles at Vail Pass

Operating Season(s): May through October, Annually

Prepared By: _____

Date: _____

Permit Holder Signature

Permit Holder printed name

Reviewed By: _____

Date: _____

FS Permit Administrator Signature

Permit Administrator printed name

Approved By: _____

Date: _____

FS Authorized Officer Signature

Authorized Officer printed name

INTRODUCTION & INSTRUCTIONS

This Operating Plan is made part of the Special Use Authorization as described in said permit.

The objective of this Operating Plan (Plan) is to manage commercial bicycle delivery and guided bicycle tours at Vail Pass on National Forest System lands located to the east and west of the Vail Pass Rest Area overpass (Black Lakes Road) during the time when the Vail Pass and Tenmile Paved Recreation Paths are open for use. The Plan establishes use numbers, quotas and operational procedures authorized for bicycle delivery. Approved use numbers and quotas described on the face of the permit shall not be exceeded except as provided in this Plan. The Plan requires specific performance by commercial companies and their employees to operate according to regulations established by the governmental agencies who manage these resources.

This plan shall be drafted by the Permit Holder (Holder), reviewed by the Forest Service (FS) Permit Administrator, and approved annually by the Authorized Officer. It shall be updated or revised as necessary to reflect any changes in the approved operation. The Authorized Officer must approve any changes to the Operating Plan in writing and in advance of implementation.

The Plan is a working tool used by both the Permit Holder and FS in managing the permitted operations. The following general provisions and the Permit Holder's written responses become part of the permit when signed by the Permit Holder and the Authorized Officer. In addition to this Plan, the Holder must submit the following by the due date:

1. Operating Plan Itinerary Worksheet (estimated use form)
2. Current employee list, including the required current certifications(e.g., First Aid, CPR, or other professional medical or related qualifications). Any updates to staff or certifications through the season must be submitted within one week.
3. Current copy of Certificate in Good Standing as a Business in the State of Colorado
4. Documentation of all required State Department of Regulatory Agency PUC licenses, if applicable – to be on file with business & available for FS review.
5. List of vehicles, trailers or other major equipment; including make, model, and license numbers – on file with business & available for FS review. The list shall include number, types and manufacturer of bicycles proposed for use. (Any updates through the season must be submitted within one week)
6. Copies of current brochures or other advertising material.
7. Copies of any Land Use Agreements from landowners (if any).
7. Documentation showing whether insurance will be a split limit policy format which lists separate coverages for third-party property damage, personal injury or death to one person and personal injury or death to more than one person (\$25,000/\$500,000/\$500,000); or combined single limit policy format that lists a single coverage for the categories listed above (\$500,000).*

* Proof of adequate insurance (minimum of \$500,000) must be submitted prior to issuance of a permit, but no less than 15 days prior to the operating season and then prior to the policy expiration date, annually. The policy must be in the name of the Permit Holder and must list the U.S. Government and the Colorado Department of Transportation as an additional insured.

If written responses no longer adequately describe the operation through the season it is the responsibility of the Permit Holder to initiate any necessary changes.

Permit Holders shall submit all information (as listed on the introduction/instructions page) to the Forest Service by March 15, annually.

Italicized, blue text and questions require a response from the Permit Holder or applicant. Complete all pertinent sections providing as much detail as necessary for the Authorized Officer to fully understand the proposed operation. Attach supplemental pages, (such as maps or diagrams) if needed. If a section does not apply indicate "N/A". Submit either electronic (preferred,) or hard copies to the Permit Administrator for review and approval.

Any change to wording in this document that is black or blue font, without prior approval, may be grounds for denial of a special use permit

I. ADMINISTRATIVE REQUIREMENTS

1. The itinerary details proposed use, lists proposed delivery schedule(s), proposed ancillary service providers**, and all necessary fee calculation information. The itinerary is an attachment to the Special Use Permit. If the itinerary is not submitted by the above date, authorization to operate on the National Forest may be denied.

** Ancillary services that support the use authorized by the permit may be provided by a party other than the Permit Holder or her/his employees, but only with prior written approval from the Authorized Officer. Ancillary services must comply with all provisions of FSH 2709.14,53ij (5).

2. The itinerary should be based upon the amount of authorized use in service days and maximum daily quota of bicycles at one time. A service day is defined as each delivery to one person for a trip for any part of a day. Any individual being delivered to the Pass two or more times during a single day will be considered as two service days for purposes of use allocations. Under no circumstances will any limitations defined by the permit be exceeded, without written permission.

3. The entire amount of permitted or allocated use must be applied for and used in the operation of the permit. All use applied for in the itinerary must be included in the estimated fees at representative rates. The proposed use may not exceed the authorized service days issued on the face of the permit.

4. Prior to commencement of any on-ground operations, the Plan, Itinerary and other required submittals must be reviewed and approved by the Authorized Officer. Any deviations from the assigned amount of use must be approved by the Authorized Officer.

5. The Authorized Officer may withhold authorization for the Holder to use all or part of an assigned amount of service days for reasons of resource protection, public health and safety, user conflict or violations of the terms and conditions of the permit.

6. The Permit Holder will furnish **actual** use reports to the Authorized Officer within 30 days of the last day of the operating season (approx. by the end of November), on an actual use form provided by the Forest Service (Attached) or approved format with the required information. Hand written use reports must be legible; typed or computer generated reports are preferred. Late submission of this report may result in a negative notation on the performance evaluation. At a minimum, the actual use report must contain the following:

- Date and time and duration of each trip (i.e. 6/24/15; 10:00 a.m.; 3 hours)
- Trip type (mixed group – composed of those who don't all necessarily know each other, connected group - composed of those who friends or family and will likely be riding together, guided trip, etc)
- Number of clients, and number & type of bicycles per trip

- Number of employees if a guided trip
- Direction ridden and final destination (i.e. west to Vail, east to Cooper Mountain, Frisco, Keystone or Breckenridge)
- Gross revenue per trip
- Ancillary Service Providers use (if any)

7. Copies of any Land Use Agreements from landowners, either public or private, which grant parking, utilization of, or access through their lands to or from National Forest lands must be included with the Plan, if used as part of the operation. (ie. Town of Frisco authorization & Permit touse town lands)

8. A complete list of equipment including the number, type, licenses, registration and insurance for any vehicles used on National Forest System lands must be kept on file by the Holder and be available for review by the Permit Administrator or the Authorized Officer upon request.

9. Periodic meetings may be held by individual Permit Administrators for disseminating information to or from the Holder. If a meeting is to be held, the Holder will be notified at least 14 days prior to the date through written correspondence. Attendance by the Holder, or a designated representative, at these meetings will be mandatory unless the Authorized Officer approves absences in advance. Absence from the meeting may be approved for reasons out of the Holders control such as inclement weather conditions. Any unexcused absence may result in a negative notation on the annual performance evaluation and/or in the permit file.

10. The Holder, as well as their employees, agents, guests, clients or customers, shall abide by all current Forest Service regulations and permit requirements. The Permit Holder is responsible for actions of these persons. All employees, agents, guests, and customers shall be informed of pertinent regulations regarding resource protection and permitted use.

11. Public Notification. The fact that the permitted operation is operating on National Forest System lands under the administration and management of the USDA Forest Service shall be apparent in all of the Permit Holder's brochures and advertising regarding use and operation of the area and facilities under permit.

12. All advertisements, websites, brochures, signs, and other materials that address service and programs offered will contain the following statements:

company name here is an equal opportunity service provider and employer.

company name here operates under special use permit from the USDA Forest Service, White River National Forest.

13. *Describe the services that will be provided for persons with disabilities, including any special equipment used to accommodate them.*

14. *Describe how the business will advertise/promote the services that may be provided for persons with disabilities or who have special needs.*

15. Detail how employees, guests, agents or customers will be informed of Forest Service regulations, and permit requirements.

16. Are any ancillary service providers proposed to be used?

Yes **No** If yes, describe the types of service that are proposed and why your employees would not be expected to provide this service:

List names and activities of ancillary service providers proposed to be used in this operation:

Submit a copy of the contract for these services and a copy of the contract holder's insurance policy (if applicable) with your Operating Plan, or if unavailable at that time, a minimum of 15 days prior to the start of the operating season.

17. The following individual(s) is (are) designated to represent _____ in contact with the Forest Service concerning the permit administration and operation.

18. Business Background and Experience, (untruthful or intentionally inaccurate information may be grounds for permit denial, revocation or suspension.)

a. Legal name of the business entity under which you operate: _____
(Must match the name listed by the Secretary of State on the Certificate In Good Standing)

b. Year company/organization was established: _____
Years under current ownership:

c. Within the past two years has the Permit Holder, their representative(s), or any employees been convicted of Federal, State, or local violations or have they received citations regarding outfitting/guiding operations or associated activities?

Yes **No** If yes, please explain:

d. Has the Permit Holder's State Outfitter's License or Outfitter's Registration ever been denied or revoked?

Yes **No** **N/A** If yes, please explain:

e. Have any of the Permit Holder's Bureau of Land Management, (BLM), National Park Service, (NPS), or USFS permits been denied, suspended, or revoked? ___

Yes No If yes, please explain:

f. Are there, or have there ever been, any charges or court actions related to your permitted activities or business?

Yes No If yes, please explain:

g. Has this business ever operated under a different name? A different owner?

Yes No If yes, please explain:

h. List any other current permits (include activities and locations) the Permit Holder has for operations on BLM, NPS, USFS or other public lands besides those covered under this permit.

II. OPERATIONS:

A. OPERATIONAL REQUIREMENTS

1. A daily collective capacity (quota) in number of bicycles for all use by the Holder of a maximum of **28 bicycles delivered at any one time (2 groups of 14 may be delivered, but they must be separated by at least 15 minutes for the ride, so there is never a group of more than 14 clients in a group + 1 guide if applicable)** may not be exceeded without prior written approval of the Authorized Officer. Holders wishing to request authorization for larger groups will need to submit a written request a minimum of 21 business days in advance of the proposed date(s) for the request is to be considered.
2. All bicycles shall be identifiable by display of company name or logo.
3. All employees must be easily identifiable as an employee of your company. This may be through jackets, caps or some other means of readily visible identification.
4. Bicycles may occupy the staging area (Upper and Lower Black Lakes parking areas on the west side of Vail Pass or on the shoulder of Black Lakes road) throughout the day for a maximum of 25 minutes, but must be removed daily (**the standard assigned site fee (\$210/season for 2016) will be assessed for this staging area**).
5. If emergency vehicles (Sheriff, Search and Rescue, ambulance etc) are needed at Vail Pass all commercial delivery vehicles will vacate the area to make room for the emergency vehicles.
6. Under no circumstance shall any company vehicle create a waiting line on the east/west bound I-70 on/off ramps, block highway traffic or cause a safety issue.
7. Permit holders will meet or stage their clients in the approved location(s) at Black Lakes. However, to expedite the process all paperwork should be completed and clients briefed on safety, logistics and operational issues at the base of operations in town, during the delivery drive or elsewhere off of NFS lands.
8. Vehicles may be parked at the approved load/unload location only long enough to load/unload

bicycles and clients. (As required above, all safety briefing and other information should be completed at an off-site location). Loading/unloading time should not exceed **25 minutes**. Vehicles will depart from unload area immediately after load/unload.

9. Permit holder(s) are encouraged to stagger their trip window times to reduce overcrowding and delays at the trailhead/staging area.

10. To reduce congestion, all bicycles will be arranged on the haul vehicles in a manner which makes them easy to load and unload in the most efficient manner.

11. Commercial vehicles are prohibited from being left unattended at the unload site or anywhere at Vail Pass.

12. Commercial companies are not authorized to solicit business at Vail Pass. If approached by a prospective client a brochure may be provided.

13. If the Holder is in violation with provisions of the permit or the Operating Plan on-site FS staff may notify the holder or their employees by direct verbal communication. Written correspondence will be used as follow-up to correctional verbal communication.

14. No commercial use will occur which promotes or allows for after dark rentals or client transport. All commercially delivered bicycles will be scheduled to return to the respective designated pick up area 30 minutes prior to sunset.

15. Permit holders will ensure that the Vail Pass operating area is kept free of trash.

16. A copy of the face page of the special use permit must be available in every delivery vehicle utilized during the operations.

17. Due to numerous large, permitted recreational events that occur on the Vail Pass recreational path there are specific dates or time windows when no deliveries will be authorized. These dates will be sent to the permittee with the permit.

B. PROPOSED OPERATING PROCEDURES

1. *List each and every activity proposed to be performed under this authorization (emergency bike repair, retrieval operations, rental only, delivery of privately owned bicycles, guided trips, etc) and describe how you plan to operate each one:*

2. *List the approximate dates each activity will occur:*

3. *Explain how a potential client will make reservations for a trip, how much advanced notice is required or do you accommodate "walk-in" requests? Where do you initiate trips from – one place, several locations, etc. Are all rental bikes returned to these same locations after the trip?*

4. *Explain in detail how you or your employees will run the approved activities:*

5. *Describe the methods you use to recruit, hire and train your employees, both at the start of each season and for those employees who sign on mid-season:*

6. *What has been the normal and maximum group size for each delivery?*
Normal Number clients _____
Maximum Number clients _____
For guided trips, what is your maximum client to guide ratio?

7. *List your drop off times at Vail Pass, including times slotted for guided trips if applicable:*

8. *Explain the methods for sanitation including food, trash and human waste your clients are instructed in:*

9. *Describe "Leave No Trace," and resource protection educational/interpretive practices to be used to educate clients or participants and reduce potential resource and/or user conflict impacts from this activity:*

10. *All vehicles (including bicycles) and employees must be made identifiable by display of company name or logo. Please explain how you will accomplish this:*

11. *Explain the maintenance procedures and scheduling the permit holder performs on each rental bicycle, vehicles, trailers and safety equipment:*

III. SAFETY

1. All injuries, accidents, or medical emergencies involving clients or employees, or damage to public or government property in excess of \$250.00, in connection with the operation of this permit and occurring on National Forest Lands will be reported as soon as practicable after the incident to the appropriate FS Permit Administrator or Ranger District Office (District Ranger Office issuing the permit). Additionally, the holder shall contact the Authorized Officer as soon as practicable, but no more than one business day, following incidents that occur on National Forest System (NFS) lands within the authorized area

after:

- a. Any incident resulting in death, permanent disability, or personal injuries that are life-threatening or that are likely to cause permanent disability;
- b. A search and rescue operation to locate a person; or
- c. Any incident that had or has high potential for serious personal injury, significant property damage, or significant environmental or other natural resource damage, including but not limited to avalanches, landslides, flooding, fire, structural failures or release of hazardous substances.

When notifying the Authorized Officer of an incident, the holder shall specify when, where, and how it occurred, and who was present or affected by the event. The Permit Holder will follow-up all incidents with a complete written report to the Forest Service within 10 business days of the incident.

Key Phone Numbers of FS Personnel:

- Permit Administrators: Eagle/Holy Cross – Robert Rodriguez (970) 827-5178
Dillon Ranger District - Jackie Brown (970) 262-3453
- District Recreation Staff: Eagle/Holy Cross – Max Forgensi (970) 827-5157, cell (970) 485-0896
Dillon - Ken Waugh (970) 262-3446
- District Ranger (Authorized Officer): Eagle/Holy Cross - David Neely (970) 827-5150
Dillon - Bill Jackson (970) 262-3451

2. In case of a serious injury, fatality or lost person(s) report, the Forest Service and (Eagle or Summit) County Sheriff shall be notified immediately.

3. All requests for search and rescue, including any injury, accident, or medical emergency requiring helicopter evacuation must be coordinated through the local County Sheriff by dialing 911 (ensure you have contacted the correct county). Additional emergency dispatch numbers for the appropriate local counties will be known by all employees. The Permit Holder will also obtain a copy of the Sheriff Office's report of the incident and will submit the same report to the Forest Service within 10 business days of the incident.

4. The Permit Holder will provide as safe an environment for all customers, guests, and employees as is reasonably possible under the permitted use conditions. It is the responsibility of the Permit Holder, if an accident, injury, or medical emergency involving a client or employee occurs, to care for and transport the victim as required by the circumstances, and within the scope of their medical training, to a location where the victim can receive professional medical help. Care should also be taken to remove or protect other clients and the public from similar risk or injury.

5. A first aid kit will be available in at least one of the delivery vehicles of each group and it is recommended that a first aid kit be supplied with each group delivered. Guided trips shall have a first aid kit available during each trip. (A suggested list of 1st aid kit contents is included as attachment A)

6. The Permit Holder and all employees who deliver bicycles to NF lands and trip guides will have, as a

minimum, current American Red Cross Standard First Aid and CPR cards (8 hours) or an equivalent First Aid and CPR certificate. These qualification shall be available for review by the Forest Service upon request. A listing of qualifications and certifications (attachment B) shall be submitted with this Plan.

7. Safety equipment, appropriate for the activity(ies) permitted shall be provided and made available to customers, clients and employees, pursuant to the Permit Holder's insurance requirements. Examples of this equipment may include helmets, tire repair kits, communications devices, reflective vests or decals, maps, etc for bicycling.

*List all safety equipment to be provided**:*

8. During the client instruction or pre-trip briefing, the Permit Holder will discuss safety regarding the environment to be encountered, steep grade and curves of the bike path and the activities authorized under this special use permit including what the clients should do in the event that a client is injured.

*Explain in detail the procedures to be taken in the event of injuries, accidents or medical emergencies involving clients or employees and how you will report them**:*

9. *Describe your accident prevention program**:*

10. *Describe how you determine if clients are competent enough to safely ride a bicycle in terms of physical ability to ride a bike, under the influence of drugs or alcohol, appear intoxicated, etc. and what you will do if you determine they cannot.*

11. *Describe the first aid equipment that will be available for use in the event of an emergency and the location (s) where it is stored.***

12. *Describe the communication systems that will be used during general operations and for emergencies. Include contingency plans for failed equipment or weather and other emergencies.***

13. *For all operations, explain in detail the protocols used for go or no-go decisions, (trip cancellation) hazard predictions, travel precautions, and route selections.***

14. *Describe the procedures to account for all clients and employees at the end of the day or trip.***

*** If your company or operation has a Safety Plan for the activities involved that covers all of these topics, attach it in lieu of answering these questions.*

IV. COMPLAINT/ CONFLICT RESOLUTION

It is in the Permit Holder's best interest to resolve conflicts that occur with the general public, clients, other permit holders and other forest users. If a complaint is filed against the holder, the Forest Service will investigate the complaint to the extent warranted. Complaints filed with the Forest Service will be forwarded to the Permit Holder via letter or certified e-mail. The Permit Holder will have 30 days from the postmark date to respond to the Authorized Officer regarding the complaint and its resolution. If the Permit Holder fails to respond, the Authorized Officer may make a decision in regards to the complaint without further input from the holder and points may be assessed during the annual performance evaluation and/or in the permit file. Failure to accept a notification letter or e-mail will be considered the same as failure to respond.

Describe how conflicts with other forest users will be prevented and/or minimized and the ride etiquette you will promote (explain how you will inform clients about passing other bicycles, pedestrians, roller-blades, stopping on the path, speeding. Etc):

V. ADDITIONAL PERMIT SPECIFIC PROVISIONS

Explain in detail any procedures and/or operations specific to the permitted use that you believe may not be adequately covered elsewhere in this operating plan.

VI. SUPERVISION OF CHILDREN UNDER THE AGE OF 18 (if applicable)

In December of 2012 the Forest Service issued Interim Directive No, 2709.11-2012-4 which adds new requirements for any special use authorizations that involve supervision of children under the age of 18 by the holder or the holder's agent.

Holders are required to perform a criminal background check for any employees who work with children under the age of 18.

Any allegations of sexual abuse, observed serious physical injuries, or life-threatening neglect of children under the age of 18 be immediately reported to the local social services and law enforcement agencies with authority to take emergency action to protect children who are abused or neglected (the local agencies) and as soon as practicable thereafter to the authorized officer.

A schedule for providing periodic training of prospective reporters of child abuse or neglect must be established by the holder. The training must cover the signs of child abuse and neglect and the reporting requirement when child abuse or neglect is suspected.

N/A -(No employees supervise children under the age of 18)

- 1. Explain in detail any operations specific to the permitted use that involves children under the age of 18 that are not adequately covered elsewhere in this operating plan.*
- 2. Explain in detail how you will complete criminal background checks for any employee who will work with children under the age of 18, how those records will be maintained:*
- 3. Explain the procedures with which the local law enforcement and/or social services agency will be notified of any report of child neglect or abuse:*
- 4. Explain your schedule of periodic training regarding child abuse:*

The name, address, telephone number, facsimile number, and e-mail address of the local law enforcement and social services agencies for the area(s) in which we operate is included as Attachment G

ATTACHMENT A

SUGGESTED OUTFITTER GUIDE FIRST AID KIT LISTS

First Aid Kit:

Quantity	Contents
4	4" x 4" Gauze pads (for minor bleeding)
2	8" x 7" Combine (bulk) dressing (for major bleeding)
5	Band-aid bandages
2	3" or 4" Roller gauze
2	Occlusive dressings
1	Triangular bandage
1	4" or 6" Elastic wrap (Ace bandage)
1	Sam splint or Wire splint
2 pairs	Exam gloves
1	CPR Pocket mask with 1 way valve
2	Oral airway (adult / child)
2	Nasal airway (adult / child)
1	Blister kit (moleskin, second skin)
3 each	Povidone iodine packets, Antiseptic packets, Alcohol swabs
1 pair	Trauma scissors
1 pair	Splinter tweezers
1	Medical kit (aspirin, ibuprofen, tylenol, benadryl, oral glucose, etc)
1 roll	Medical tape
4 each	Chemical hand, foot and body warmers

ATTACHMENT D

MINIMUM INSURANCE REQUIREMENTS

The set of three numerical figures listed in the first row below represent the minimum coverage requirements for a split limit insurance policy for the proposed use. In order, the coverage limits are for third-party property damage; personal injury or death to one person; and personal injury or death to more than one person. The second row represents the minimum coverage requirement for a combined single limit insurance policy for the proposed use.

The Permit Holder must inform the FS of which type of policy (split or combined single) they will retain and submit the certificate of insurance a minimum of 15 days prior to receiving the special use permit.

- \$25,000/\$500,000/\$500,000 – Split Limit Coverage policy
- \$500,000 – Combined Single Limit policy

Sample Certificate of Insurance

Attachment E: Sample Accord Form

ACORD CERTIFICATE OF LIABILITY INSURANCE		OP/JD	BJT	DATE (MM/DD/YYYY)	
PASSENGER Westmar Insurance Services P. O. Box 208016 Stockton, CA 95208-9016 Phone: 800-633-3443 Fax: 800-466-8076		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
INSURERS AFFORDING COVERAGE INSURER A INSURER B INSURER C INSURER D INSURER E		NAIC #			
COVERAGES THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN SUBJECT TO THE FOLLOWING NAMES ABOVE FOR THE POLICY PERIOD INDICATED. IF ANY OTHER NAMES ARE REQUIRED, THEY SHOULD BE LISTED IN THE COMMENTS SECTION OF THIS CERTIFICATE. THIS CERTIFICATE MAY BE ISSUED OR POLICIES AND COVERAGE LIMITS INDICATED MAY HAVE BEEN MODIFIED BY ANY CLAIMS.					
RESPONSE LETTER CODE	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A X	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN. AGGREGATE LIMIT APPLICABLE PER POLICY BODILY INJURY PROPERTY DAMAGE		04/10/09	04/10/10	1. BODILY INJURY TO ONE PERSON: \$ 1,000,000 2. BODILY INJURY TO MORE THAN ONE PERSON: \$ 500,000 3. PROPERTY DAMAGE: \$ 500,000 4. GENERAL AGGREGATE: \$ 1,000,000 5. BODILY INJURY TO ONE PERSON: \$ 300,000 6. BODILY INJURY TO MORE THAN ONE PERSON: \$ 200,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> NON-OWNED <input type="checkbox"/> OWNED <input type="checkbox"/> RENTED <input type="checkbox"/> OTHER				COMBINED SINGLE LIMIT (PER POLICY): \$ BODILY INJURY TO ONE PERSON: \$ BODILY INJURY TO MORE THAN ONE PERSON: \$ PROPERTY DAMAGE (PER POLICY): \$
	GARAGE LIABILITY <input type="checkbox"/> NON-OWNED <input type="checkbox"/> OWNED				AUTO ONLY, CA RESIDENCE: \$ AUTO ONLY, CA RESIDENCE: \$ AUTO ONLY, CA RESIDENCE: \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR & CLAIMS MADE <input type="checkbox"/> OCCUR ONLY <input type="checkbox"/> CLAIMS MADE ONLY				FACTORY OCCURRENCE: \$ AGGREGATE: \$ AGGREGATE: \$ AGGREGATE: \$
	MERCHANTS COMMISSION AND EMPLOYERS LIABILITY <input type="checkbox"/> MERCHANTS COMMISSION <input type="checkbox"/> EMPLOYERS LIABILITY <input type="checkbox"/> OFF-CERAMIC/STONE/PRODUCTIVE <input type="checkbox"/> OFF-CERAMIC/STONE/PRODUCTIVE <input type="checkbox"/> OFF-CERAMIC/STONE/PRODUCTIVE				MERCHANTS COMMISSION: \$ EMPLOYERS LIABILITY: \$ OFF-CERAMIC/STONE/PRODUCTIVE: \$ OFF-CERAMIC/STONE/PRODUCTIVE: \$ OFF-CERAMIC/STONE/PRODUCTIVE: \$
	OTHER				
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS / SPECIAL PROVISIONS Certificate holder is an additional insured but only with respect to its interest in the named insured's operations.					
CERTIFICATE HOLDER U. S. Government C/o USDA Forest Service 601 S. Weber Street Colorado Springs, CO 80903			CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT. BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. REPRESENTATIVE: <i>[Signature]</i>		

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