Use Code:
Authorization ID:
Contact Name:
Expiration Date:

FS-2700-3f (10/09) OMB No. 0596-0082

SPECIAL USE APPLICATION & TEMPORARY PERMIT FOR OUTFITTING AND GUIDING Authority: Federal Lands Recreation Enhancement Act, 16 U.S.C. 6802(h) (Ref.: FSH 2709.11, section 41.53) PART I - APPLICATION

1. APPLICANT INFORMATION		
Applicant Name:		
Business Name:		
Applicant's Complete Address:		
Telephone Number:	Fax Number:	
E-mail Address:		
Website:		
As an applicant, are you:		
Individual	If yes, are you a citizen of the United States?	
Corporation	If yes, provide a copy of your state certificate of good standing.	
Limited Liability Company	If yes, provide a copy of your state certificate of good standing.	
Partnership or Association	If yes, provide a copy of your partnership or association agreement.	
State Government or Agency	(Includes state universities)	
Local Government or Agency	(Includes high schools)	
Nonprofit	(Please attach a copy of your IRS Form 990)	

Under the Regulatory Flexibility Act, a small entity is a firm that is "independently owned and operated" and "not

dominant in its field of operation." The United States Small Business Administration has developed size standards to identify what is considered a small business. Under these standards, a business with annual receipts of less than \$6.5 million constitutes a small business for recreation industries. Additionally, a small organization is any nonprofit enterprise that is independently owned and operated and not dominant in its field. A small government jurisdiction is a government of a city, county, town, township, village, school district, or special district with a population of less than 50,000.

Under these	criteria,	are you	a small	entity?
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2. DESCRIPTION OF PROPOSED

ACTIVITY (Input this info into Operating Plan Form)

Please include:

- . The number of service days requested (or quota equivalent).
- . The anticipated number of trips and party size.
- . Trip Itinerary with:
- . Starting and ending dates of the proposed operations.
- . Location of routes and starting and ending points for the proposed operations (include a map showing these locations).
- . Services that will be offered to clients (identify any services that will be provided by a party other than the holder).
- . A description of your client base or audience.
- . A list of government facilities you propose to use, e.g., a boat launch, parking lot, or trailhead.
- . A list of temporary improvements or signs that you propose to use.
- . A statement of whether the proposed operations involve motorized equipment.
- . A statement of whether the proposed operations involve transportation livestock, and if so, whether grazing is requested.
- . A statement of whether an assigned site is requested.
- . A description of cleanup and restoration during and after the proposed operations.

3. ADVERTISING. Provide a current brochure and current advertising materials or website address.

4. CLIENT CHARGES. Provide a description of client charges and fees and what they cover. Attach a current rate sheet.

5. GUIDE IDENTIFICATION

- . Attach a list of all guides who would be working under the permit.
- . Describe your requirements for employment and staff training programs.
- . Attach copies of current CPR and First Aid certifications, Wilderness First Responder cards, and other applicable certifications for guides. Please do not send copies of social security cards or passports. Send driver's licenses only if driving is part of the outfitting and guiding service.
- . If the state in which your activity would occur requires licensing for outfitters and guides, include a copy of relevant licenses.

6. OPERATING PLAN. Attach the Forest Service Operating Plan Form that addresses client and visitor safety, evacuation and emergency procedures, and resource protection with respect to your proposed operations and location.					
to the authorized officer (see FSM	he holder will be required to obtain liability in 1 2713.1). The insurance policy must name the certificate of insurance must be provided to the	e USDA Forest Service as an			
8. CLIENT'S ACKNOWLEDG liability form, attach a copy of that	MENT OF RISK FORM. If you plan to use t form.	an acknowledgment of risk /			
in the past 3 years. If you received relying on outfitting and guiding of held with those agencies in the pa	ts for outfitting and guiding on National Forest a performance evaluation from the Forest Sexperience with other federal or state agencies at 3 years and provide a copy of any performa association with outfitting and guiding activity	ervice, attach a copy. If you are s, list any permits that you have ance evaluations received. List all			
Commonwealth of I l certify that this information is c application only, and that the use	ify that I am of legal age and am authorized have personally examined the information correct to the best of my knowledge. I herebyse and occupancy of National Forest System issued by an authorized officer.	contained in this application and y acknowledge that this is an			
Printed Name:	Signature:	Date:			
Printed Name:	Signature:	Date:			
the United States any false, fictiti- jurisdiction. Anyone who knowing	e for any person knowingly and willfully to mous, or fraudulent statements or representationally or willfully makes or uses any false statement of the prisoned not more than five years, or both.	ns as to any matter within its			