

United States Department of the Interior

NATIONAL PARK SERVICE

Fire Island National Seashore 120 Laurel Street, Patchogue New York 11772



APPLICATION FOR SPECIAL USE PERMIT OVER-SAND VEHICLE USE

Type of Permit: (If submitting multiple applications, please fill out a separate application)				
□ Resident □ Contractor Vehicle Access □ Gas Transport/Refuse/Carting □ Municipal □ Official				
Complete the following				
Applicant/Driver Information:				
Applicant's Name last first m.i. suffix				
Fire Island Year Round Resident: Y N (Circle)				
Driver's License number State Expiration date				
Applicant/Company Address:				
Mailing Address (if different from above):				
Telephone: () Cell: () Email:				
Additional Drivers (attach an additional sheet if needed):				
Name: Driver's License number/State exp. date				
Name: Driver's License number/State exp. date				
Name: Driver's License number/State exp. date				
Emergency Contact's Name Telephone Number				
Requested start date of permit:				
Requested use area or route (Fire Island Destination):				
Requested duration of permit: Annual Other				
Vehicle Information:				
Type of Vehicle:				
□ Car/pass/Sm SUV. □Van/lt. truck □Utl. Van/Truck □ Bus □RV/Camper/Trailer				
☐ ATV/UVT ☐ 18-Wheeler ☐ Oversize Load				
VIN/ID Number				
License Plate/Registration number State Expiration Date				
Year: Make Model Color				
WeightNumber of Axles				
Maximum Number of Passengers:4-wheel drive vehicle Y N (circle)				

NPS Form 10-933 New 06/2013

OMB Control No. 1024-0026 Expires 08/31/2016

Vehicle Inspection Information	:			
ls your vehicle required to underg	go State inspections? Yes / No	Expiration date:		
nsurance Information: Complete the following and attach copy of valid insurance card.				
Company	Policy number			
lf applicable, select your busin	າess, and provide the followinເ	g information:		
Contractor Sanitation/Refuse	Plumbing/Heating Electric	cal Public Utility Municipal		
Delivery Transportation (bus,	, taxi, etc.) Other (specify)			
Business Name (if applicable)	Contractor/Bu	siness License:		
Reason for needing vehicle acce	ess (attach an additional sheet if r	needed)		
no false or misleading information	n or false statements have been g	on given is complete and correct, and that given. Date:		
provided will be used to determine who	ether a permit will be issued. Send the money order made payable to Nationa	luct special activity in the park. The information e completed application along with the application al Park Service to Commercial Services Office at		
information from your check to make a one-t	time electronic fund transfer from your accou o make an electronic fund transfer, funds ma	ck as payment, you authorize us either to use int or to process the payment as a check transaction. y be withdrawn from your account as soon as the same ial institution.		
with information required by this application. or not to allow the requested use. Applicant to collection of fees and charges by the Nati	This information is being collected to allow is are required to provide their social security	furnished with the following information in connection the park manager to make a value judgment on whether or taxpayer identification number for activities subject ation from the application may be transferred to nvestigations or prosecutions.		
the park managers the information needed t	to decide whether or not to allow the request ensidered. You are not required to respond to	e Paperwork Reduction Act (44 U.S.C. 3501) to provide ed use. All applicable parts of the form must be this or any other Federal agency-sponsored information		
Estimated Burden Statement: Public repo	orting burden for this form is estimated to ave	erage 15 minutes per response including the time it takes		

Title 18 U.S.C. Section 1001 makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or fraudulent statements or representations as to any mater within its jurisdiction.

to read, gather and maintain data, review instructions and complete the form. Direct comments regarding this burden estimate or any aspects of this form to the Information Collection Clearance Officer, National Park Service, 1849 C Street, NW (1237), Washington, D.C. 20240.

Vehicle Inspection Information:				
Is your vehicle required to undergo State inspections? Yes / No Expiration date:				
Insurance Information: Complete the followin	g and attach cop	by of valid insurance card.		
Company Policy nur	mber			
If applicable, select your business, and provi	de the following	information:		
Contractor ☐ Sanitation/Refuse☐ Plumbing/He	eating Electrica	al□ Public Utility□ Municipal □		
Delivery Transportation (bus, taxi, etc.)	Other (specify)			
Business Name (if applicable)	_ Contractor/Bus	iness License:		
Reason for needing vehicle access (attach an add	ditional sheet if no	eeded)		
The applicant by his or her signature certifies that	www.madlady.mas.com	n given is complete and correct, and that		
no false or misleading information or false statement				
Signature: Pr	int Name:	Date:		
Note: this is an application only, and does not serve as provided will be used to determine whether a permit will b fee in the form of a cashier's check or money order made the Park address found on the first page of this application.	permission to condu e issued. Send the payable to National	ct special activity in the park. The information completed application along with the application		
Notice to Customers Making Payment by Personal Check: Whinformation from your check to make a one-time electronic fund tra When we use information from your check to make an electronic fuday we receive your payment, and you will not receive your check	ansfer from your account and transfer, funds may	or to process the payment as a check transaction. be withdrawn from your account as soon as the same		
Privacy Act Statement: The Privacy Act of 1974 (5 U.S.C. 552a) with information required by this application. This information is be or not to allow the requested use. Applicants are required to provi to collection of fees and charges by the National Park Service (31 appropriate Federal, State, local agencies, when relevant to civil, or	eing collected to allow th de their social security on U.S.C. 7701). Informati	e park manager to make a value judgment on whether r taxpayer identification number for activities subject on from the application may be transferred to		
Paperwork Reduction Act Statement: We are collecting this information needed to decide whether or not completed in order for your request to be considered. You are not collection unless it displays a currently valid OMB control number.	ot to allow the requested required to respond to the	use. All applicable parts of the form must be		
Estimated Burden Statement: Public reporting burden for this for to read, gather and maintain data, review instructions and complet this form to the Information Collection Clearance Officer, National	te the form. Direct comr	nents regarding this burden estimate or any aspects of		

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NOTICES

This is an application *only*, and does not serve as permission to conduct any special activity in the park. The information provided will be used to determine whether a permit will be issued. Send the completed application along with the application fee in the form of a , cashier's check, money order or personal check made payable to the <u>National Park Service</u> to <u>Permits Office</u> at the park address found on the first page of this application.

If your request is approved, a permit containing applicable terms and conditions will be sent you. The permit must be signed by the responsible person and returned to the park for final approval by the Park Superintendent before the permitted activity may begin.

Customers Making Payment by Personal Check

When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

Privacy Act Statement

Authority: 16 U.S.C. 1, National Park Service Organic Act; 16 U.S.C. 3, Rules and regulations of national parks, reservations, and monuments; timber; leases, 16 U.S.C. 3a, Recovery of costs associated with special use permits; and 16 U.S.C. 460i–6d, Commercial Filming.

Purpose: The purposes of the system are (1) to provide a park superintendent with information to approve or deny requests for activities that provide a benefit to an individual, group or organization, rather than the public at large; and (2) to assist park staff to manage the activity to ensure that the permitted activity does not interfere with the enjoyment of the park by visitors and that the natural and cultural resources of the park are protected.

Routine Uses: In addition to those disclosures generally permitted under 5 U.S.C.552a(b) of the Privacy Act, records or information contained in this system may be disclosed outside the National Park Service as a routine use pursuant to 5 U.S.C. 552a(b)(3) to other Federal, State, territorial, local, tribal, or foreign agencies and other authorized organizations and individuals based on an authorized routine use when the disclosure is compatible with the purpose for which the records were compiled as described under the system of records notice for this system.

Disclosure: Voluntary, however, failure to provide the requested information may impede individual from obtaining a permit from the National Park Service.

Information Regarding Disclosure of Your Social Security Number Under Public Law 93-579 Section 7(b): Your Social Security Number (SSN) is needed to identify records unique to you. Applicants are required to provide their social security or taxpayer identification number for activities subject to collection of fees and charges by the National Park Service. Failure to disclose your SSN may prevent or delay the processing of your application. The authority for soliciting your SSN is 31 U.S.C. 7701. The information gathered through the use of the SSN will be used only as necessary for processing this application and collecting and reporting any delinquent financial obligations. Use of the social security number will be carried out in accordance with established regulations and published notices of system of records.

Paperwork Reduction Act Statement

We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) to provide the park managers the information needed to decide whether or not to allow the requested use. All applicable parts of the form must be completed in order for your request to be considered. You are not required to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

Estimated Burden Statement

Public reporting burden for this form is estimated to average 15 minutes per response including the time it takes to read, gather and maintain data, review instructions and complete the form. Direct comments regarding this burden estimate, or any aspects of this form, to the Information Collection Clearance Officer, National Park Service, 12201 Sunrise Valley Drive, Mail Stop 242, Reston, VA 20192. Please do not send your form to this address.