VISITOR'S PERMIT (Ref. FSM 2323)	FORM APPROVED OMB NO. 0596-0019	(15) TRAVEL PLAN List or code all zones to be traversed, in sequence of travel, and number of nights to be spent in each zone. In areas where specific campsites are assigned, list and code each site and the number of nights assigned.	TRAVEL ZONES (or campsite)			NIGHTS
WHEN SIGNED, THIS SINGLE – VISITOR PERMIT AUTHORIZES	_					
(1) NAME (First, Middle Initial, and Last)						
(2) MAILING ADDRESS (Optional)						
(3) CITY AND STATE (4) ZIP CODE						
(5) TO VISIT (and to build campfires in accordance with regulations)						
(6) DATES (Give best estimates of start and finish dates) From month/day						
Through month/day						
(7) LOCATION OF ENTRY POINT						
(8) LOCATION OF EXIT POINT						
(9) PRIMARY METHOD OF TRAVEL						
(10) NUMBER OF PEOPLE IN GROUP		(16) REMARKS		I		
(11) NUMBER OF PACK AND SADDLE STOCK		†				
(12) NUMBER OF DOGS		-				
(13) NUMBER OF WATERCRAFT OR VEHICLES (Check Regulations – Vehicles not allowed in many permit areas)						
I agree to abide by all laws, rules and regulations which apply to this area and will do my best to see that everyone in our group does likewise.						
(14) VISITOR'S SIGNATURE	DATE	(17) ISSUING OFFICER'S SIGNATURE				
			FOREST CODE		OFFICE	E CODE
VISITORS MUST HAVE THIS PERMIT IN POSSESSION DURING STAY IN REQUIRED PERMIT AREAS						

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0596-0019. The time required to complete this information collection is estimated to average 3 minutes per response.

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