

**Bureau of Reclamation
Recreation Use Data Report, Part II - Concessionaires
To Be Completed By Concessionaires and Reclamation and/or Managing Partner, If Applicable**

| | |
|---------------------------------------------------------------------|-----------------------------------------------|
| Shaded areas to be completed by Reclamation and/or managing partner | Other areas to be completed by Concessionaire |
|---------------------------------------------------------------------|-----------------------------------------------|

Paperwork Reduction Act: The purpose of this form is to provide information to the Bureau of Reclamation for evaluating and improving the recreation services and programs that it provides to the public. Response is mandatory. The reporting burden for this form is estimated to average 30 minutes, which includes the time for reviewing instructions and completing and reviewing the form. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. Please direct comments regarding the burden estimate or any other aspect of these forms to the Bureau of Reclamation, Attention: 84-57000, P.O. Box 25007, Denver, CO 80225.

Privacy Act Statement: No Privacy Act Information is being collected; therefore, no direct link to the individual(s) filling out this form will be available.

| | | | | |
|-------------------------------------------------|--|-------------------------|--|------------------|
| 1. Background Information | | | | |
| Reclamation Project: | | | | |
| Recreation/Wildlife Area: | | | | |
| Recreation/Wildlife Management Entity: | | | | |
| Address: | | | | |
| City: | | State: | | Zip Code: |
| E-Mail Address: | | | | |
| Contact Name: | | Contact Phone: | | |
| Management Contract Agreement Number: | | | | |
| Approval Date: | | Expiration Date: | | |
| Last Reclamation Review/Inspection Date: | | | | |

| 2. Concessions Use Authorization | | | |
|-----------------------------------|----------------------------------------------------------|------------------|-----------|
| Use Authorization Title: | | | |
| Use Authorization Number: | | | |
| Name of Concession Operation: | | | |
| Legal Name of Owner(s): | | | |
| Address: | | | |
| City: | | State: | Zip Code: |
| E-Mail Address: | | | |
| Issued By: | | | |
| Approval Date: | | Expiration Date: | |
| Renewal Option: | Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| Renewal Term Length: | | | |
| Concession Agreement Authority: | | | |
| Annual Financial Report Prepared: | Yes <input type="checkbox"/> No <input type="checkbox"/> | | |

3. Sub-Concessions: Identify the sub-concessions that have been issued by the concessionaire. Leave table blank if there are no sub-concessions.

| Business Name | Address | Contact Name | Authority | Service Provided |
|---------------|---------|--------------|-----------|------------------|
| | | | | |
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| | | | | |

4. Non-profit Organization/Facilities: Identify the organization, authority used to enter into the use authorization, and the type of use provided within the concession area. Also identify the facilities owned or operated by the non-profit.

| Organization | Authority and Type of Use Authorization | Type of Use Provided | Facilities Owned/Operated |
|--------------|-----------------------------------------|----------------------|---------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

5. Twelve-Month Reporting Period:

From: (Month/Day/Year)

To: (Month/Day/Year)

Note: Report only requires an annual update at the end of reporting period use by the concessionaire

6. Concession Area of Operation

| | Acres | | Miles (decimal) |
|--------------------------------------|-------|-------------------------------------------|-----------------|
| Total Area Occupied by Concession: | | Concession Area Surfaced Roads: | |
| Total Concession Land Surface Area: | | Concession Non-Surfaced Roads: | |
| Total Concession Water Surface Area: | | Shoreline Occupied by Concession: | |
| | | Total of all designated trails and paths: | |

7. Length of Season for Concession Operation

From: Month and Day

To: Month and Day

Peak Season Months

Off Season Months

8. Number of Visitors

Number for Peak Season Reporting Period

Number for Off Season Reporting Period

Total

9. Concession Review and Evaluation

Date of Last Review and Evaluation:

Type of Review:

External: Yes No

Local: Yes No

Significant Findings:

| 10. Fees | | |
|-----------------------------------|------------------|-----------------------------------|
| Fee Type (list all types of fees) | Fee Amount Daily | Fee Amount Annual (if applicable) |
| | | |
| | | |
| | | |
| | | |

| 11. Revenues/Expenses For Peak and Off Season Reporting Period | | | |
|----------------------------------------------------------------|--|-----------------------------------|--|
| Gross Receipts: | | Fees Paid To: | |
| Concession | | Reclamation | |
| Sub-concession(s) | | Managing Entity | |
| Other (identify) | | Other (Identify) | |
| Total Gross Receipts of Concessionaire | | Total Fees Paid by Concessionaire | |

12. Exclusive Uses: If exclusive uses occur on the area, provide a description of the use and quantities:

| 13. Inventory of Recreation Facilities, Designated Areas, and Opportunities: | | | | | | | | | | | | | | |
|------------------------------------------------------------------------------|--------------------|----|---|---|------------------------------|-----|----|---|----------------|--|-----------|--|--|--|
| Facility/Designated Area | No. = Total Number | | | | DW = Drinking Water | | | | E= Electricity | | S = Sewer | | | |
| | No. | DW | E | S | Facility/Designated Area | No. | DW | E | S | | | | | |
| A. Camping | | | | | H. Boating | | | | | | | | | |
| Campgrounds | | | | | Boat launch ramps | | | | | | | | | |
| Total number of campsites | | | | | Vehicle/trailer parking lots | | | | | | | | | |
| Tent only campsites | | | | | Boat ramp courtesy docks | | | | | | | | | |
| RV campsites | | | | | Vault restroom buildings | | | | | | | | | |
| RV campsites w/hookups | | | | | Flush restroom buildings | | | | | | | | | |
| Group campsites | | | | | Marine fueling station | | | | | | | | | |
| Boat-in campsites | | | | | Sanitary pump out stations | | | | | | | | | |
| Shade shelters | | | | | Dry boat storage locations | | | | | | | | | |
| Vault restroom buildings | | | | | Rental slips in marina | | | | | | | | | |
| Flush restroom buildings | | | | | Rental moorings | | | | | | | | | |

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|------------------------------------------------------------------------------|-----|---------------------|---|---|-------------------------------------------------------------------|-----|----|-----------|---|
| No. = Total Number | | DW = Drinking Water | | | E= Electricity | | | S = Sewer | |
| Facility/Designated Area | No. | DW | E | S | Facility/Designated Area | No. | DW | E | S |
| Shower facility locations | | | | | Watercraft rental locations | | | | |
| Laundry facility locations | | | | | Floating restroom | | | | |
| Campground playgrounds | | | | | Boat cleaning station | | | | |
| RV dump locations | | | | | I. Lodging, Food, Supplies, Fuel, Other Services (On-Site) | | | | |
| Equestrian campsites | | | | | Motels | | | | |
| B. Day Use Areas | | | | | Educational dorms/lodges | | | | |
| Designated day use areas | | | | | Full-service restaurant or snack bar | | | | |
| Picnic sites | | | | | Cabin rental sites | | | | |
| Group picnic sites | | | | | Trailer rental sites | | | | |
| Picnic vehicle parking lots | | | | | Swimming pools | | | | |
| Shade shelters | | | | | Water parks | | | | |
| Vault restroom buildings | | | | | Vending service locations | | | | |
| Flush restroom buildings | | | | | Groceries/supplies/gift store | | | | |
| C. Horseback Facilities | | | | | Vehicle fueling station | | | | |
| Horse stable locations | | | | | Yurts | | | | |
| D. Winter Sports | | | | | J. Fishing | | | | |
| Ski and snowshoe rental locations | | | | | Designated fisherman access sites | | | | |
| Snowmobile rental locations | | | | | Bait/tackle store locations | | | | |
| Snow park facilities | | | | | Fishing guide operations | | | | |
| E. Wildlife Viewing | | | | | Fish cleaning stations | | | | |
| Designated wildlife/fish viewing locations | | | | | Fishing pier | | | | |
| F. Other | | | | | K. Water Sports | | | | |
| Golf courses | | | | | Designated swim beaches | | | | |
| Rifle/Pistol shooting range locations | | | | | Designated non-motorized boating areas | | | | |
| Trap/Skeet/Sport Clay range locations | | | | | Designated water skiing areas | | | | |
| Domestic pet exercise areas | | | | | Designated wakeless areas | | | | |
| Archery range locations | | | | | Wind surfing areas | | | | |
| Sea plane landing areas | | | | | Swimming dock/platform locations | | | | |
| Sports fields | | | | | | | | | |
| Remote control model areas | | | | | L. Use Authorization | | | | |

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|------------------------------------------------------------------------------|-----|---------------------|---|---|----------------------------------|------------|-----------|-----------|----------|
| No. = Total Number | | DW = Drinking Water | | | E= Electricity | | | S = Sewer | |
| Facility/Designated Area | No. | DW | E | S | Facility/Designated Area | No. | DW | E | S |
| G. Trail Systems | | | | | Guided equestrian trips | | | | |
| Trailheads (number) | | | | | Guided fishing trips | | | | |
| Hiking/walking trails miles | | | | | Guided rafting trips | | | | |
| Bicycle trails miles | | | | | Guided hunting trips | | | | |
| Equestrian trails miles | | | | | Guided off-highway vehicle trips | | | | |
| Off-highway vehicle trails miles | | | | | Fishing tournaments | | | | |
| Multi-use trails miles | | | | | Athletic events | | | | |
| Hard surface trails miles | | | | | Competitive events | | | | |
| Groomed cross country ski trails | | | | | M. Other: Description | No. | DW | E | S |
| | | | | | | | | | |

14. Activity Ranking: For the facility/designated area activities listed above in Section 13, identify and rank the order of the four most popular activities by entering the letter associated with the activity categorized in Section 13. For example, if camping was the most popular activity, enter an A in the first column. If the fourth most popular activity was fishing, enter the letter J in the fourth column.

| Highest Top Four> | First | Second | Third | Fourth | Lowest <Top Four |
|-------------------|-------|--------|-------|--------|------------------|
| | | | | | |

15. Comments/Notes/Additional Data: Please specify item number. Attach additional pages, if necessary.

16. Contact Information

Bureau of Reclamation or Non-Federal Partner: The person who supplied the information for the shaded areas of this form should fill out the contact information.

| | | | |
|----------------|--|---------|--|
| Prepared By: | | Date: | |
| Telephone No.: | | E-mail: | |

Concessionaire: The person who supplied the information specific to the concession operation should fill out the contact information.

| | | | |
|----------------|--|--------|--|
| Prepared By: | | Date: | |
| Telephone No.: | | E-mail | |