

# ALASKA BACKCOUNTRY/WILDERNESS USE PERMIT APPLICATION

[Applicable only in Denali National Park and Preserve (former Mount McKinley National Park and Kantishna area pursuant to 36 CFR 13.904) and Glacier Bay National Park and Preserve (Alsek Corridor pursuant to 36 CFR 1108 and Glacier Bay proper pursuant to 36 CFR 13.1108)]



[PARK] [Name of Permits Program Office] [Address] [City, ST Zip Code] Telephone: (####) ####-#####

[NOTE TO PARKS: The fields in the "Applicant Information Section" below and records retention statement in the footer are mandatory for every park to show on their form. You may not change any fields in the list or add any fields to the list. Changes or additions must be approved by OMB through the Bureau Information Collection Clearance Officer, Phadrea Ponds [970-267-7213].

| APPLICANT INFORMATION<br>(All Fields in this Section are Mandatory for Every Park)   |  |   |  |
|--|--|---|--|
| When approved by NPS park official, this single-visit permit authorizes:   |  |   |  |
| Last Name  | First Name                                 | Middle Initial  |  |
| Street or Physical Address   |  |   |  |
| City   | State/Province Postal Code                 | Country   |  |
| <b>NOTE TO PARKS:</b> You may select from the menu of information fields below to customize your park-specific permit, <i>with the exception of the fields in the "Applicant Information Section" above and records retention statement in the footer which are mandatory for every park to show on their form, you <u>do not</u> have to use and may remove any of the remaining fields. You <u>may not change</u> any fields <u>or add</u> any fields to the list. Some fields may need to be replicated multiple times to accommodate multiple responses (e.g., method of travel, emergency points-of-contact, itinerary, etc.) Changes or additions must be approved by OMB through the Bureau Information Collection Clearance Officer, Phadrea Ponds [970-267-7213].</i> |  |   |  |
|  | MISCELLANEOUS INFORMATION                  |   |  |
| Contact Phone Home Email Add<br>Cell<br>Work   |  |   |  |
| Date of Birth Fax Driver's L   | icense/Identification ## Issuing State     | or Province Issuing Country                               |  |
| Do you have an America the Beautiful Pass? Yes Do you have an Interagency Access or Senior Pass? Yes If "Yes", pass #:   |  |   |  |
| Group/Organization Type (Boy/Girl Scouts, SUP, Church,<br>Youth Camp, etc.) No. of Permits Requested (Large Groups, Multiple Leaders)  |  |   |  |
| Group Name   | No. of Trips Requested                     | No. of People Per Trip                                    |  |
| Commercial Guided Trip?     No. of Pe       Yes     No   | ople in Party No. of Youth < Age {#}       | No. of Adults > Age {#}                                   |  |
| Names of Group Members   |  |   |  |
| Commercial Use Authorization (CUA) Permit # Research Permit and Reporting System (RPRS) Permit #   |  |   |  |
| Emergency Point-of-Contact       Family         Name       Friend         Colleague  | Emergency Point-of-Contact<br>Phone Number | Emergency Point-of-Contact<br>City/State/Province/Country |  |
| Will you bring a service dog?  |  |   |  |
| Have you previously completed or received a mandatory permit orientation or briefing? 🗌 Yes 🗌 No 🛛 If yes, when:   |  |   |  |

| For the purposes of improving your visit, the NPS may seek to understand more about your experience. Are you willing to be contacted by the NPS to participate in future visitor surveys and/or social science studies? Yes No   |   |   |  |
|--|---|---|--|
| TYPE OF BACKCOUNTRY/WILDERNESS USE REQUESTED<br>(Check All That Apply)   |   |   |  |
| Camping  | Backpacking   | Mountaineering  | Fishing  |
| Hiking   | Rafting   | Mountain Climbing   | Hunting  |
| Canoeing   | Packrafting   | Rock Climbing   | Motorboating   |
| Cross Country Skiing   | Kayaking  | Bouldering  | Mountain Biking  |
| Snowshoeing  | Sea Kayaking  | Canyoneering  | Snowmobiling   |
| Snowboarding   | Drift boat floating   | Scuba Diving  | ATVOHV Use   |
| Pack and Saddle Stock Us   | e Dog<br>Mushing/Sledding   | Other   |  |
|  | MODE OF   | TRANSPORTATION  |  |
| Motor Vehicle(s) (Including C  | RVs and Motorcycles)  | Snowmobile(s)   |  |
| State/Province Regis   | stration/Plate #  | State/Province  | Registration/Plate #   |
| Make Mode  |   | Make  | Model  |
| Color Renta  | al? Yes No  | Color   | Rental Yes No  |
| Parking Location   |   | Parking Location  |  |
| Airoroft   |   |   |  |
| Aircraft   |   | Watercraft  |  |
| Registration N-Number  |   |   | aft(s), pack raft(s), drift boat(s),   |
|  |   | Types: Canoe(s), kayak(s), ra<br>motorized vessel(s), other:<br>Type Number   |  |
| Registration N-Number<br>Make Model<br>Number Color<br>Landing Area (Drop Off)   |   | Types: Canoe(s), kayak(s), ramotorized vessel(s), other:TypeNumberMakeModel   | Colors   |
| Registration N-NumberMakeModelNumberColorLanding Area (Drop Off)Landing Area (Pick Up)   |   | Types: Canoe(s), kayak(s), ramotorized vessel(s), other:TypeNumberMakeModelLengthHorsepowe  | Colors   |
| Registration N-Number<br>Make Model<br>Number Color<br>Landing Area (Drop Off)   | □ No  | Types: Canoe(s), kayak(s), ra<br>motorized vessel(s), other:TypeNumberMakeModelLengthHorsepoweState/ProvinceHull F  | Colors   |
| Registration N-NumberMakeModelNumberColorLanding Area (Drop Off)Landing Area (Pick Up)Commercial Air TaxiYes   | □ No  | Types: Canoe(s), kayak(s), ra<br>motorized vessel(s), other:TypeNumberMakeModelLengthHorsepoweState/ProvinceHull FLaunch LocationLTake Out LocationL  | Colors<br>er<br>Registration #   |
| Registration N-NumberMakeModelNumberColorLanding Area (Drop Off)Landing Area (Pick Up)Commercial Air TaxiYes   | □ No  | Types: Canoe(s), kayak(s), ra<br>motorized vessel(s), other:TypeNumberMakeModelLengthHorsepoweState/ProvinceHull FLaunch LocationLTake Out LocationTrailer Parking Location   | Colors<br>er<br>Registration #   |
| Registration N-Number Make Model<br>Number Color<br>Landing Area (Drop Off)<br>Landing Area (Pick Up)<br>Commercial Air Taxi Yes<br>Name of Company  | UIPMENT (Check All That Ap  | Types: Canoe(s), kayak(s), ra<br>motorized vessel(s), other:TypeNumberMakeModelLengthHorsepoweState/ProvinceHull FLaunch LocationLTake Out LocationL  | Colors<br>er<br>Registration #<br>Launch Date<br>Take Out Date<br>Appropriate)   |
| Registration N-Number Make Model<br>Number Color<br>Landing Area (Drop Off)<br>Landing Area (Pick Up)<br>Commercial Air Taxi Yes<br>Name of Company  | UIPMENT (Check All That Ap<br>Fields marked with an * are r                                     | Types: Canoe(s), kayak(s), ramotorized vessel(s), other:         Type       Number         Make       Model         Length       Horsepowe         State/Province       Hull I         Launch Location       I         Take Out Location       I         Trailer Parking Location       Rental         Yes       No   | Colors<br>er<br>Registration #<br>Launch Date<br>Take Out Date<br>Appropriate)   |
| Registration N-Number Make Model<br>Number Color<br>Landing Area (Drop Off)<br>Landing Area (Pick Up)<br>Commercial Air Taxi Yes<br>Name of Company  | UIPMENT (Check All That Ap<br>Fields marked with an * are r                                     | Types: Canoe(s), kayak(s), ramotorized vessel(s), other:         Type       Number         Make       Model         Length       Horsepowe         State/Province       Hull H         Launch Location       L         Take Out Location       Rental         Yes       No         Diply & Indicate Quantity Where  | Colors<br>er<br>Registration #<br>Launch Date<br>Take Out Date<br>Appropriate)<br>es section   |
| Registration N-Number         Make       Model         Number       Color         Landing Area (Drop Off)         Landing Area (Pick Up)         Commercial Air Taxi         Yes         Name of Company         EQ         Approved Bear Resistant F  | UIPMENT (Check All That Ap<br>Fields marked with an * are r                                     | Types: Canoe(s), kayak(s), ramotorized vessel(s), other:         Type       Number         Make       Model         Length       Horsepowe         State/Province       Hull R         Launch Location       L         Take Out Location       Rental         Yes       No         Diply & Indicate Quantity Where         efferenced in the Special Notice         Bear Spray  | Colors Co |
| Registration N-Number         Make       Model         Number       Color         Landing Area (Drop Off)         Landing Area (Pick Up)         Commercial Air Taxi       Yes         Name of Company         EQ         Approved Bear Resistant F         Avalanche Transceiver(s)   | UIPMENT (Check All That Ap<br>Fields marked with an * are r                                     | Types: Canoe(s), kayak(s), ramotorized vessel(s), other:         Type       Number         Make       Model         Length       Horsepowe         State/Province       Hull R         Launch Location       L         Take Out Location       Rental         Yes       No         oply & Indicate Quantity Where         eferenced in the Special Notice         Bear Spray         Avalanche Shovel(s)  | Colors Co |
| Registration N-Number         Make       Model         Number       Color         Landing Area (Drop Off)         Landing Area (Pick Up)         Commercial Air Taxi       Yes         Name of Company         EQ         Approved Bear Resistant F         Avalanche Transceiver(s)         Camp Stove(s)   | <b>UIPMENT</b> (Check All That Ap<br>Fields marked with an * are r<br>Food Storage Container(s) | Types: Canoe(s), kayak(s), ramotorized vessel(s), other:         Type       Number         Make       Model         Length       Horsepowe         State/Province       Hull R         Launch Location       L         Take Out Location       Rental         Yes       No         Doply & Indicate Quantity Where         eferenced in the Special Notice         Bear Spray         Avalanche Shovel(s)         Climbing Helmet(s)  | Colors<br>Pr Registration # Launch Date Take Out Date Appropriate)<br>Pr Ses Section Electric Bear Fence Avalanche Probe Pole(s) Climbing Rope(s) (length )  |
| Registration N-Number         Make       Model         Number       Color         Landing Area (Drop Off)         Landing Area (Pick Up)         Commercial Air Taxi       Yes         Name of Company         EQ         Approved Bear Resistant F         Avalanche Transceiver(s)         Camp Stove(s)         Compass                                     | <b>UIPMENT</b> (Check All That Ap<br>Fields marked with an * are r<br>Food Storage Container(s) | Types: Canoe(s), kayak(s), ramotorized vessel(s), other:         Type       Number         Make       Model         Length       Horsepowe         State/Province       Hull R         Launch Location       L         Take Out Location       Rental         Yes       No         Doply & Indicate Quantity Where         eferenced in the Special Notice         Bear Spray         Avalanche Shovel(s)         Climbing Helmet(s)         GPS Device(s)  | Colors  Pr Registration # Launch Date Take Out Date Appropriate)  Ses Section Electric Bear Fence Avalanche Probe Pole(s) Climbing Rope(s) (length ) Maps  |
| Registration N-Number         Make       Model         Number       Color         Landing Area (Drop Off)         Landing Area (Pick Up)         Commercial Air Taxi         Yes         Name of Company         EQ         Approved Bear Resistant F         Avalanche Transceiver(s)         Camp Stove(s)         Compass         Human Waste Disposal/Pare | <b>UIPMENT</b> (Check All That Ap<br>Fields marked with an * are r<br>Food Storage Container(s) | Types: Canoe(s), kayak(s), ramotorized vessel(s), other:         Type       Number         Make       Model         Length       Horsepowe         State/Province       Hull If         Launch Location       L         Take Out Location       It         Trailer Parking Location       Rental         Yes       No         Doply & Indicate Quantity Where         eferenced in the Special Notice         Bear Spray         Avalanche Shovel(s)         Climbing Helmet(s)         GPS Device(s)         Whistle | Colors  Pr Registration # Launch Date Take Out Date  Appropriate)  Pr Ses Section  Electric Bear Fence Avalanche Probe Pole(s) Climbing Rope(s) (length ) Maps Headlamp/Flashlight   |

OMB Control No. 1024-0022

Expiration Date XX/XX/XXXX

NPS Form 10-404AK (Rev. 06/2020)

National Park Service

Climbing Hardware (list here)

| Cellular Telephone(s) *<br>(include type, service provider, phone # and quantity)                    | Type(s)  | Service Provider(s     | s) & Phone #(s) |
|--|--|------------------------|-----------------|
| Satellite Telephone(s) *<br>(include type, service provider, phone # and quantity)                   | Type(s)  | Service Provider(s     | s) & Phone #(s) |
| Personal Locator Beacon(s) or Device(s) *<br>(include type and service provider)                     | Type(s)  | Service Provider(s     | s) & Phone #(s) |
| Radio(s) *   | Type(s)  |                        |                 |
| Emergency signaling devices  | Type<br>U.S. Air Force type signal<br>Signal panel<br>Signal flare<br>Signal strobe<br>Other (list): | mirror                 | Quantity        |
| Tent or Shelter  | Type(s)  | Color(s)               | Quantity        |
| (Including hammock)  |  |                        |                 |
| Bicycle or Mountain Bike   | Type(s)  | Color(s)               | Quantity        |
| Snow Sled/Sledge   | Type(s)  | Color(s)               | Quantity        |
| Pack & Saddle Stock  | Type(s)  |                        | Quantity        |
| First Aid Kits   |  | Type<br>Minor<br>Major | Quantity        |
| U.S. Coast Guard Approved Personal Flotation Devices   |  |                        | Quantity        |
| Offshore Lifejacket - Type 1   |  |                        |                 |
| Near Shore Buoyant Vest - Type II  |  |                        |                 |
| Flotation Aid - Type III   |  |                        |                 |
| Throwable Device - Type IV (boat cushions, ring buoys,   | horseshoe buoys, throw bag   | gs, and throw lines)   |                 |
| Special Use Device - Type V (includes include work vests, deck suits, and hybrids for restricted use |  |                        |                 |
| Inflatable Life Jackets  |  |                        |                 |
|  |  | Type(s)                | Color(s)        |
| Backpack   |  |                        |                 |
|  |  | Type(s)                | Size(s)         |
| Footwear   |  |                        |                 |
|  |  | # of Sleds             | # of Dogs       |
| Dog Team/Sled(s)   |  |                        |                 |

| ITINERARY DETAILS  |   |                            |                                       |
|--|---|----------------------------|---------------------------------------|
| Start Date   | End Date  | Entry Location             | Exit Location                         |
| Night Da   | te Campsite /Camp Location /Us  | e Area/Trail or Route      |                                       |
| Night 1  |   |                            |                                       |
| Night 2  |   |                            |                                       |
| Night 3  |   |                            |                                       |
| Night 4  |   |                            |                                       |
| Night 5  |   |                            |                                       |
| Night 6  |   |                            |                                       |
| Night 7  |   |                            |                                       |
| Additional Choices: If all choices above are unavailable, the Backcountry Information Center will retry using options selected |   |                            |                                       |
| below:   | <b>—</b> · · · · · · · · · · · · · · · · · · ·                                    |                            |                                       |
| # of Campsites   | Trip Length (# of nights)   | Group Size M               | linimum Group Size                    |
|  |   |                            |                                       |
| Flexible Itinerary?  | Similar/Nearby Campsites  | Alternate Dates            | Earliest Start Date Latest Start Date |
| Yes No   | Reverse Itinerary   | to                         |                                       |
| MISCELLANEOUS  |   |                            |                                       |
|  | Notice Regarding the Use of Cell Phor   | es, Satellite Phones, and  | Personal Locator Devices              |
| Special Notice *   | Communication devices may be helpful, to accept the risks inherent with your trip |                            |                                       |
| Remarks  |   |                            |                                       |
| Special<br>Instructions  |   |                            |                                       |
| SIGNATURES   |   |                            |                                       |
| Visitor's Signature  | Date  | Issuing Officer's Signatur | e Date/Time                           |
|  |   |                            |                                       |
|  |   |                            | ·                                     |

# (PARK SPECIFIC FIELDS – TO BE USED ONLY BY THE SPECIFIED PARKS

| [NAME OF PARK HERE]  |  |                  |  |  |
|--|--|------------------|--|--|
| Dry Bay Arrival (Permit Date):   | Planned Put-in Date:   | Launch Location: |  |  |
|  |  |                  |  |  |
| you must also have a put-  | NOTE: If you are travelling through Kluane National Park and Reserve (Parks Canada) on the Upper Alsek,<br>you must also have a put-in date/permit through Kluane NP&R. Please contact them at (867) 634-7207. |                  |  |  |
| I HAVE READ AND AGREE TO COMPLY WITH THE ALSEK RIVER CAMPING PERMIT GUIDELINES         Would you like the above information shared with other boaters, including commercial companies, who might want to coordinate campsites/put-ins/shuttles?         Yes       No |  |                  |  |  |
| How do you propose to handle a serious injury?<br>(Remoteness should be given a<br>strong consideration.)  |  |                  |  |  |
| A. Describe Spare Items: Repair kits and spare means of propulsion for watercraft.   |  |                  |  |  |
| B. Describe how garbage and dishwater will be disposed of and/or handled while on the trip. (A straining screen and "organics" container are recommended.)   |  |                  |  |  |
| C. Describe your human waste carryout system (brand or method). This is a mandatory requirement.   |  |                  |  |  |
|  | gency assistance (medical evacuation, search and ro<br>ocating your party from an aircraft. This includes col  |                  |  |  |

| GLACIER BAY NP&P CONTINUED - ESTIMATED ITEMIZED EXPENSES   |                          |                                       |  |
|--|--------------------------|---------------------------------------|--|
| Please list the approximate expenses directly related to your river camping trip.<br>Do not include expenses such as travel that would not be shared by all. |                          |                                       |  |
| Food:  |                          |                                       |  |
| Rental Equipment:  |                          |                                       |  |
| List Equipment:  |                          | · · · · · · · · · · · · · · · · · · · |  |
| Rented From:<br>(Name of equip. rental company)  |                          |                                       |  |
| Car Shuttle to Dalton Post or Ha   |                          |                                       |  |
| Arranged With:<br>(Name of car shuttle company)  |                          |                                       |  |
| Air Taxi from Dry Bay:   |                          |                                       |  |
| Arranged With:<br>(Name of air taxi company)   |                          |                                       |  |
| •  |                          |                                       |  |
| Other:   |                          |                                       |  |
|  |                          |                                       |  |
|  |                          |                                       |  |
|  |                          |                                       |  |
|  |                          |                                       |  |
|  | Total Cost to be Shared: |                                       |  |
|  | Number of Participants:  |                                       |  |

# NONCOMMERCIAL USE AFFIDAVIT

# (Glacier Bay National Park and Preserve - ONLY)

Your signature as trip permittee on this affidavit indicates that you have considered the terms/conditions of the permit. You are aware of the penalties, should violations occur (see next page) and that your trip is organized and will be conducted in accordance with the provisions and requirements of a **noncommercial** river camping trip as specified below:

- 1. A noncommercial river camping trip must be participatory in nature. All members of the group must share trip preparation and conduct of the trip.
- 2. The purpose of the trip must be for its recreational values. The trip will not be conducted for the following reasons:
  - a) Monetary gain for any trip participant.
  - b) Acquisition of new equipment to the advantage of an individual, group, or organization.
  - c) Amortization of equipment.
- 3. Collecting a set fee (monetary compensation), payable to a trip participant, individual, group, or organization, for conducting, leading or guiding a noncommercial river camping trip is not allowed. The trip permittee should delegate responsibility (financial and otherwise) for various aspects of trip preparation and conduct.
- 4. Trips may be considered noncommercial even though a member of the trip receives a salary, under their normal scope of employment, from an educational institution or non-profit organization, but not directly through fees contributed by members of the party.
- 5. The use of advertising in any form or through any means in order to promote, foster or solicit participation in a noncommercial river camping trip is strictly prohibited.
- 6. The permittee must be present for the entire river camping trip. The permittee must be at least 18 years of age.
- 7. The approved permit is not transferable.
- 8. One non-commercial trip per year per person is allowed, so that others may enjoy the experience.

I have read and fully understand the requirements associated with the use of this noncommercial river camping trip permit and agree to assume full responsibility for the conduct of my entire party in obeying these rules and regulations. I am fully cognizant of the penalties involved should I and/or members of my party knowingly violate these rules and regulations. All application information is collected pursuant to guidelines established in 5 USC 552 A-E (1990).

By my signature I certify that all of the information provided by me and members of my party are true and complete to the best of my knowledge.

## Applicant's Signature:

Date:

## NOTICE OF PENALTIES (Glacier Bay National Park and Preserve - ONLY)

As river camping trip permittee, you have the responsibility for ensuring this trip and all participants comply with the terms and conditions of the permit.

In the event that any violations of the permit, any and/or all trip members may be subject to the following legal and/or administrative penalties, depending on the nature of the violation.

- A. A mandatory appearance before the U.S. Magistrate in Juneau or Anchorage, Alaska.
- B. A fine of not more than \$5,000 for each violation.
- C. Imprisonment of not more than 6 months.
- D. Forfeiture of gear and equipment used.
- E. Revocation of an approved river camping trip permit and trip termination at any point within the park, including the removal of any and/or all trip members along with their equipment from Glacier Bay National Park and Preserve with all costs borne by the permittee and trip participants.

### Privacy Act Statement

General: This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974), December 21, 1984, for individuals completing this form.

**Authority:** 54 U.S.C. §100101, NPS Organic Act; 16 U.S.C. 1131-1136, Wilderness Act; 43 U.S.C. §1701 et seq.,16 U.S.C. §6801-6814, the Federal Lands Recreation Enhancement Act; 36 CFR Part 71, Recreation Fees; 36 CFR 1.6, Permits; and 36 CFR 2.23 Recreation Fees. National Park Service Backcountry/Wilderness Use Permit requirements must be based on regulations established in 36 CFR §1.6 and §2.10 (outside of Alaska) and in 36 CFR, Part 13 (in Alaska). Prohibited in Wilderness with the following exceptions: 1) Wilderness areas located in National Park Service units in Alaska, pursuant to PL. 96-487, Alaska National Interest Lands Conservation Act (a) and 43 CFR §36.11 - Special Access; 2) Wilderness area in National Park Service units outside of Alaska where use of aircraft or motorboats have already become established, pursuant to the Wilderness Act §4(d)(1).

**Purpose and Uses:** To establish and verify an applicant's eligibility for a permit to conduct certain activities within the National Park System and to process permits for individual members of the public and organizations interested in obtaining a permit authorizing an activity. Information collected will be used to provide the public and permittees with permit-related information, to monitor activities conducted under a permit, to analyze data and produce reports to monitor the use park resources, to assess the impact of permitted activities on the conservation and management of protected species and their habitats, and to evaluate the effectiveness of the permit programs. The DOI and NPS may use the information to meet reporting requirements, to generate budget estimates and track performance, and to assist park staff with visitor education, fee collection, resource management and protection, recreational use planning, law enforcement and public safety personnel for such purposes as emergency contact and search and rescue efforts; to provide permit holders and participants with information about parks and their partners; and to provide reports of activities conducted under an issued permit.

Based on the disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act, the National Park Service may share information with first responders and Federal, state, and local governments to provide information needed to locate an individual or render aid in an emergency; to recover debts owed to the United States; to respond to a violation or potential violation of the law; in response to a court order and/or discovery purposes related to litigation; or other authorized routine use when the disclosure is compatible with the purpose for which the records were compiled.

**Effects of Nondisclosure:** It is in your best interest to answer all of the questions. The U.S. Criminal Code, Title 18 U.S.C. 1001, provides that knowingly falsifying or concealing a material fact is a felony that may result in fines of up to \$10,000 or 5 years in prison, or both. Deliberately and materially making false or fraudulent statements on this form will be grounds for not granting you a Backcountry/Wilderness Use Permit.

#### **Paperwork Reduction Act Statement**

We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) and 36 CFR 1-7, 12 and 13 which authorize the National Park Service to require applicants to fill out this form to monitor resources and to protect visitors. This information is being collected to allow the park management to make value judgements necessary to enhance the safety and enjoyment of both the visitors and wildlife. 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 8 minutes per response, including the time it takes for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Comments regarding this burden estimate or any aspect of this form should be sent to the Information Collection Clearance Officer, National Park Service, 1201 Oakridge Drive, Fort Collins, CO 80525. Do not send this application to this address. Please send to the park address at the top of the first page.