Authorization ID: #AUTH_ID# Contact ID: #HOLDER ID#

Expiration Date: #EXPIRATION_DATE#_

Use Code: #USE CODE#

FS-2700-25 (09/2020) OMB NO. 0596-0082

U.S. DEPARTMENT OF AGRICULTURE FOREST SERVICE TEMPORARY SPECIAL - USE PERMIT AUTHORITY: #AUTHORITY_NAME#

#HOLDER_NAME#, hereinafter called the Holder, is hereby authorized to use, subject to the terms and conditions of this permit, National Forest System land identified within the unit area and described as #TOWNSHIP_SECT_RANGE# #FIRST_DIVISION# #FIRST_DIV_NAME_NUMBER#, #SECOND_DIVISION# #SECOND_DIV_NAME_NUMBER#, #THIRD_DIVISION# #THIRD_DIV_NAME_NUMBER# as shown on the		
attached Exhibit(s) . This authorization covers approximately #USE_ACRES# acres and/or #USE_MILES# miles.		
The holder is authorized to conduct the following activities and/ or install the following temporary improvements on the permitted area:		
#PURPOSE#		
TERMS AND CONDITIONS		
1. Use under this permit shall begin on and end on #EXPIRATION_DATE#. The permit shall not be extended.		
2. The fee for this use is It shall be paid in advance and is not refundable.		
3. The holder shall conduct the authorized activities according to the attached approved plans and specifications, Exhibit(s) .		
4. The holder shall not install any improvements not specifically identified and approved above.		
5. No soil, trees, or other vegetation may be destroyed or removed from National Forest System lands without specific prior written permission from the authorized officer.		
6. The holder shall comply with all Federal, State, county, and municipal laws, ordinances, and regulations which are applicable to the area or operations covered by this permit.		

all damage, other than ordinary wear and tear, to National Forest System lands, roads and trails caused by the holder's activities.

8. The holder has the responsibility of inspecting the use area and adjoining areas for dangerous trees, hanging

7. The holder shall maintain the improvements and premises to standards of repair, orderliness, neatness, sanitation, and safety acceptable to the authorized officer. The holder shall fully repair and bear the expense for

- limbs, and other evidence of hazardous conditions which would pose a risk of injury to individuals. After securing permission from the authorized officer, the holder shall remove such hazards.
- 9. The holder shall be liable for any damage suffered by the United States resulting from or related to use of this permit, including damages to National Forest resources and costs of fire suppression.
- 10. The holder shall hold harmless the United States from any liability from damage to life or property arising from the holder's occupancy or use of National Forest lands under this permit.

enjoyment by the holder of the privileges thereof.	
12. This permit is subject to all valid existing rights and clair	ms outstanding in third parties.
13. This permit may be revoked upon breach of any of the officer. Upon expiration or revocation of this permit, the hold	
those owned by the United States, and shall restore the site upon in writing. If the holder fails to remove the improvement States, but that will not relieve the holder of liability for the co	nts, they shall become the property of the United
14. This permit is a license for the use of federally owned la This permit is not transferable. The holder shall not enter in the authorized premises and improvements.	
15. Appeal of any provisions of this permit or any requirement at 36 CFR 251, Subpart C, or revisions thereof.	ents thereof shall be subject to the appeal regulations
16. This permit is accepted subject to the conditions set for	th herein, condition(s) and Exhibit(s)
attached to and made a part of this permit.	
17. The above clauses shall control if they conflict with add	itional clauses or provisions.
#INSERT TERM HERE#	
I have read and understand the terms and conditions and agree to abide by them.	
HOLDER	U. S. DEPARTMENT OF AGRICULTURE Forest Service
Ву:	By:
Address:	Name:
	Title: (Authorized Officer)
Phone #:	,
Date:	Date:

11. The holder agrees to permit the free and unrestricted access to and upon the premises at all times for all lawful and proper purposes not inconsistent with the intent of the permit or with the reasonable exercise and

Use this form to document monitoring of compliance with special use authorizations and inspections of the area or improvements authorized by special use authorizations in accordance with FSM 2716. Insert additional lines as needed. Identify the authorization involved in the monitoring or inspection, the purpose of the monitoring or inspection, the name of the monitor or inspector, and the date of the monitoring or inspection. Identify any deficiencies encountered; consider attaching a map or photograph to enhance identification. Discuss any deficiencies with the holder, and note the date of the discussion. Corrective actions may be identified and scheduled in the operating plan with the authorized officer's concurrence. Keep the report in the case file and provide a copy to the holder.

Failure to correct deficiencies identified and scheduled must be documented in a notice of noncompliance to the holder. The notice of noncompliance must specify the items of noncompliance and their factual and legal basis. In addition, the notice must identify the timeframe for correcting the noncompliance and the consequences for failure to correct it within that timeframe. Send the notice by certified mail or hand deliver it.

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 0596-0082. Response to this collection of information is mandatory. The authority to collect the information is the Organic Administration Act, 16 U.S.C. 551. The time required to complete this information collection is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible agency or USDA's TARGET Center at (202) 720-2600 (voice and TYY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at How to File a Program Discrimination Complaint and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

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