

**U.S. DEPARTMENT OF AGRICULTURE  
FOREST SERVICE  
MONITORING REPORT FOR SPECIAL USE AUTHORIZATIONS**

**Authority: Forest Service Manual 2716.5**

Holder's Name: \_\_\_\_\_

Name of authorized site or development: \_\_\_\_\_

Authorization ID: \_\_\_\_\_ Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Authorization Form: \_\_\_\_\_ Authority: \_\_\_\_\_ Use Code: \_\_\_\_\_

Holder Contact Information (name of representative, telephone number, and e-mail address):  
\_\_\_\_\_  
\_\_\_\_\_

Purpose of Monitoring or Inspection (see FSM 2716.51 or specify other purpose):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the activity(s) monitored or inspected comply with the authorization's terms and conditions? Yes or No (explain):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If the inspection is on site, describe in detail the condition of the authorized area or improvements:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Specify in detail actions that are necessary to correct any unsatisfactory conditions:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date Monitored or Inspected

\_\_\_\_\_  
Name of Monitor or Inspector

\_\_\_\_\_  
Date Monitoring or Inspection  
Discussed with Holder

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date Report Sent to Holder

\_\_\_\_\_  
Name of Authorized Officer

\_\_\_\_\_  
Title

## INSTRUCTIONS

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.

### PAPERWORK REDUCTION ACT STATEMENT

According to the Paperwork Reduction Act of 1995, a Federal agency may not conduct or sponsor, and a person is not required to respond to, an information collection request unless it displays a valid Office of Management and Budget (OMB) control number. The valid OMB control number for this information collection request is 0596-0082. Response to this information collection request is required to obtain or retain benefits, specifically, a special use authorization. The authority for this information collection request is Organic Administration Act, 16 U.S.C. 551. The time required to complete this information collection request is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, collecting and maintaining the data needed, and completing and reviewing the information collection request. Send comments regarding this burden estimate or any other aspect of this information collection request, including suggestions for reducing the burden, to Forest Service Information Collections Officer, [SM.FS.InfoCollect@usda.gov](mailto:SM.FS.InfoCollect@usda.gov), with OMB control number 0596-0082 in the subject line.

### PRIVACY ACT STATEMENT

Pursuant to 5 U.S.C. § 552a(e)(3), this Privacy Act statement serves to inform you of the following concerning the collection of the information on this form.

**Purpose:** The Privacy Act of 1974 requires that the Director of Recreation, Heritage, and Volunteer Resources staff and the Director of Lands, Minerals, and Geology Management staff provide the following statements to individuals from whom they request information.

**Authority:** Collection of this information solicited on this form is authorized by Organic Administration Act, 16 U.S.C. 551.

**Routine Uses:** The information collected will be used by Forest Service officials to ensure that your use of National Forest System lands is administered in accordance with applicable statutes, regulations, and directives. The information collected from you is retained in the Special Uses Data System (SUDS) and is retrieved by the Forest Service create reports for the Agency's Special Uses Program, generate bills for collection of land use fees for your authorization, monitor compliance with your special use authorization, and other matters pertaining to administration of your special use authorization. SUDS is a component of the Forest Service's Natural Resources Manager database (NRM). A complete list of the routine uses of NRM can be found in the system of records notice associated with this form, FS-24.

**Disclosure:** The submission of this information is required to obtain or retain benefits, specifically, a special use authorization.

### NONDISCRIMINATION STATEMENT

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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 TTY) 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 the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit the 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](mailto:program.intake@usda.gov).

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