

APPLICATION FORM
for
COMMERCIAL USE AUTHORIZATION (CUA)
(Formerly Incidental Business Permit)

U.S. DEPARTMENT OF THE INTERIOR



National Park Service
240 West 5th Avenue, Room 114
Anchorage, Alaska 99501

Ph: (907) 644-3362 or 644-3533 Fax: (907) 644-3813 or (907) 644-3814

Website: <http://www.nps.gov/akso/concessions/index.cfm>

Email: brenda_coleman@nps.gov

Application Processing Time

Please submit the application well in advance of your proposed start date. The processing time depends in part on the number of park units for which you are seeking authorization and the depth of review required. The approval process may take up to three months but is generally completed within 30 days.

FOR OFFICE USE ONLY

CUA# _____ Received: _____
Act Rpt Rec'd _____
Gross Rpt Rec'd _____
Check# _____
Amount: Rec'd _____
Online Payment# _____
Payment Waived _____

This application is for “out-of-park” commercial visitor services that must originate and terminate outside of the boundaries of the park area or within an inholding. Activities such as advertising, soliciting business, collecting fees or selling any goods or services within the park boundaries are **NOT** allowed.

PLEASE TYPE OR PRINT IN INK.
ANSWER ALL QUESTIONS COMPLETELY OR MARK “N/A” IF NOT APPLICABLE

You may apply for a one or two-year CUA. The term of a CUA may not exceed 2 years and no preferential right of renewal or similar provisions for renewal may be provided.

YOU MAY APPLY FOR A ONE-YEAR OR TWO-YEAR CUA

1) This request is for a CUA for: 2011 2012 *(check both if you want a 2-year CUA)*

2)

3)

4) What is your Business Type (Please check appropriate box below)?

- Corporation (State: _____)
- Sole Proprietorship
- LLC
- Partnership (Names: _____)
- Other (Specify Type _____)

5) Contact Information (Summer)

Address			
City	State	Zip	Country
Ph (day)	Ph (eve)	Fax	
Email			
Website			

Contact Information (Winter)

Same As Summer

Address			
City	State	Zip	Country
Ph (day)	Ph (eve)	Fax	
Email			
Website			

6) If you held a CUA last year, has there been any change in ownership during the past two years?
 No Yes If you answered “yes, please give details below:

7) Are you, your spouse or minor children currently employed by the National Park Service (NPS)?
 No Yes If you answered “yes, please give details below:

(1) Name, Title & Park Unit: _____

(2) Name, Title & Park Unit: _____

8) Alaska Business License Number _____ Expiration Date of License: _____.

If the Alaska Division of Occupational Licensing has determined you are not required to obtain an Alaska Business License, please attach provide proof of that determination.

9) Please provide **NAMES** and **TITLES** of all employees and owners, etc.

Note: First Aid and/or CPR certification is a requirement for Klondike Gold Rush National Historical Park, Denali National Park & Preserve and Wrangell-St. Elias National Park & Preserve. First Aid/CPR certification is not required for other park units; however, if you have this certification, please provide it.

Name (All Owners and Employees)	Title <i>e.g.: Guide</i>	First Aid Cert Expires	CPR Cert Expires	Certifying Agency (e.g.: American Red Cross)
		Month _____ Year _____ N/A _____	Month _____ Year _____ N/A _____	
		Month _____ Year _____ N/A _____	Month _____ Year _____ N/A _____	
		Month _____ Year _____ N/A _____	Month _____ Year _____ N/A _____	
		Month _____ Year _____ N/A _____	Month _____ Year _____ N/A _____	

10) AIRCRAFT OPERATORS Please check appropriate box: Part 91 Part 135

- My FAA Air Carrier Operating Certificate Number is _____.
(Part 135 operators must attach a copy of their FAA Certification to this application.)
- For Part 91 & Watercraft operators Only: Will the business provide transport service to hunters, their equipment or game to/from any NPS preserve under the CUA on an incidental basis?
- Yes No N/A
- If “yes”, will you provide any related accommodations to your clients such as camps, lodges, etc.
- Yes No

11) Please provide information on your Aircraft which will be used under the CUA. You may use additional paper if more space is needed or attach a paper that identifies your aircraft, however that paper must provide all the information requested below:

TAIL NUMBER	MAKE / MODEL	WHEEL J	FLOAT J	SKIS J	COLOR(S)

- 12) Are you a licensed by the State of Alaska to provide Big Game Transport Service?**
 Yes No N/A
(Licensed big game transporters must attach a copy of their license to this application.)

13) FOREIGN AIR CARRIERS:

Have you obtained operations specifications from the Federal Aviation Administration? No Yes
Please attach a copy of the FAA Letter to your application.

Title 49 U.S.C. § 41301, requires foreign air carriers to maintain proper authorization to conduct scheduled and charter flights into and within the United States. For more information, please contact the Anchorage International Field Unit (IFU), FAA Flight Standards District Office at (907) 271-2000, or go to their website at: www.faa.gov/about/office_org/field_offices/ifo/anchor_ifu/.

WATERCRAFT OPERATORS

Contact the Alaska Department of Motor Vehicles for State registration requirements for motorized and non-motorized watercraft at 907-269-5590 or via the Internet at <http://www.state.ak.us/dmv/reg/boat.htm>
 (Note: The use of personal watercraft (including airboats) is prohibited for commercial purposes in the National Park Units. **Personal Watercraft** refers to a vessel, usually less than 16 feet in length which uses an inboard, internal combustion engine powering a water jet pump as its primary source of propulsion. The vessel is intended to be operated by a person or persons sitting, standing or kneeling on the vessel, rather than within the confines of the hull. Brand names include, but are not limited to, Jet Ski, Sea-Doo, Waterrunner, Wet Jet and Surf Jet. **Airboat** means a vessel that is supported by the buoyancy of its hull and powered by a propeller or fan above the waterline.). The use of High Speed Amphibian technology based vehicles (Quadski, Aquada, Humdinga, etc) in the park is also prohibited.

- 14) Will your business operate WATERCRAFT within NPS boundaries? No Yes**

Please provide information on your watercraft which will be used under the CUA.

Watercraft Type (e.g. kayaks, inflatable raft, canoe, etc.)	Capacity (# passengers)	DMV Registration # or US Coast Guard Doc Number (this column applies to motorized boats)	Registration Expires On?	Color (s)	Length (feet)	Is It Motorized?	Name of Watercraft
		AK-_____ -or- USCG#_____ N/A_____					
		AK-_____ -or- USCG#_____ N/A_____					
		AK-_____ -or- USCG#_____ N/A_____					
		AK-_____ -or- USCG#_____ N/A_____					
		AK-_____ -or- USCG#_____ N/A_____					
		AK-_____ -or- USCG#_____ N/A_____					
		AK-_____ -or- USCG#_____ N/A_____					

15) Six Pack License (Coast Guard) Number: _____, Expires on _____, N/A

16) Will your business operate motor vehicles (cars, trucks, van, bus, etc) within NPS boundaries?
 No Yes

Please provide information on your motor vehicles which will be used under the CUA.

MAKE OF VEHICLE	MODEL	YEAR	COLOR	MAX # PASSENGERS

17) CHOOSING YOUR PARK UNIT AND ACTIVITIES

Note: All guides and clients of CUA holders must have in their possession all required state licenses for the service/activity being pursued, e.g. fishing, and hunting. These must be current and available for inspection upon request by any park or state official in the park unit(s).

PARK NAME: _____	
<p>List Services to be Provided by Permittee (not Client's Activities)</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p> <p>5. _____</p> <p>6. _____</p> <p>7. _____</p>	<p>Please specify the locations within this park unit where you will provide the Services you listed on the left.</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p> <p>5. _____</p> <p>6. _____</p> <p>7. _____</p>
<p>1. When (date) will this Service take place in the park unit(s) _____</p> <p>2. What is the Estimated Number of Guides per trip for this park unit? _____</p> <p>3. What is the Estimated Number of Clients per trip for this park unit? _____</p> <p>4. What is the estimated date you want to begin operating in the park unit(s)?</p> <p>5. Have you obtained all required State and/or Federal permits, licenses, etc associated with the service you will provide in the park unit? _____ (e.g. fishing license).</p>	

PARK NAME: _____	
<p>List Services to be Provided by Permittee (not Client's Activities)</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p> <p>5. _____</p> <p>6. _____</p> <p>7. _____</p>	<p>Please specify the locations within this park unit where you will provide the Services you listed on the left.</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p> <p>5. _____</p> <p>6. _____</p> <p>7. _____</p>
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PARK NAME: _____

List Services you will Provide to your clients

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

Please specify the locations within this park unit where you will provide these Services.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

1. **When (date) will this Service take place in the park unit(s)**_____
2. **What is the Estimated Number of Guides per trip for this park unit?** _____
3. **What is the Estimated Number of Clients per trip for this park unit?** _____
4. **What is the estimated date you want to begin operating in the park unit(s)?**
5. **Have you obtained all required State and/or Federal permits, licenses, etc associated with the service you will provide in the park unit?** _____ (e.g. fishing license).

PARK NAME: _____

List Services you will Provide to your clients

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

Please specify the locations within this park unit where you will provide these Services.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

6. **When (date) will this Service take place in the park unit(s)**_____
7. **What is the Estimated Number of Guides per trip for this park unit?** _____
8. **What is the Estimated Number of Clients per trip for this park unit?** _____
9. **What is the estimated date you want to begin operating in the park unit(s)?**
10. **Have you obtained all required State and/or Federal permits, licenses, etc associated with the service you will provide in the park unit?** _____ (e.g. fishing license).

Note: the following questions relate to violations. Failure to accurately and completely disclose violations may be grounds to deny issuance of the CUA. A record of conviction and/or pending charges for violations is not an absolute bar to being issued a CUA. Such information will be considered only if there is a substantial relationship between the circumstances of the conviction and/or pending charge and the service for which you are applying.

18) Within the past 5 years, have you, the company (business entity) or any individual serving as an officer, principal, partner or employee with this business entity or any previous business entity, been convicted of or forfeited collateral for any violations of state, federal, or local law or regulation?

Yes No

Date of Violation: _____

Was this a conviction? _____ Was Collateral forfeited? _____

Name of Business or person(s) _____

Place of Violation? _____

Court Name _____

Give Details _____

(Results) Action Taken by Court _____

19) Is the company (current entity) or previous business entity, or any owners of this business entity or previous business entity now under charges for any violation of state, Federal, or local law or regulation?

Yes No (This not include minor traffic violations)

Date of Violation: _____

Place of Violation? _____

Who is the Charge against? _____

Who made the Charge(s) _____

Give Details of charge(s) _____

Current Status: _____

20) *Within the past 5 years, have any of your current or proposed employees been convicted of or forfeited collateral for any state, federal, or local law or regulation; OR are they now under charges for any violation of state, federal or local law or regulation?

Yes No (*Employees identified below may be precluded from working for the operator)

Date of Violation: _____, Place of Violation: _____

Was this a conviction? _____ Was Collateral forfeited? _____

Name of Employees or Proposed Employees Involved _____

Place of Violation? _____, Court Name _____

Give Details _____

Current Status _____

21) Signature: False, fictitious or fraudulent statements of representations made in this application may be grounds for denial or revocation of the Commercial Use Authorization and may be punishable by fine or imprisonment (U.S. Code, Title 18, Section 1001). All Information provided will be considered in reviewing this application.

By my signature, I hereby attest that all my statements and answers on this form and any attachments are true, complete, and accurate to the best of my knowledge.

Signature: _____ **Printed Name** _____

Title: _____ **Date:** _____

FOR NPS USE: Approval Dates			
ALAG _____,	ANIA _____,	BELA _____,	CAKR _____,
KATM _____,	KLGO _____,	KOVA _____,	DENA _____,
SITK _____,	WRST _____,	YUCH _____,	GAAR _____,
			GLBA _____,
			KEFJ _____,
			LACL _____,
			NOAT _____,

National Park Service

Check List for Submitting Application Packet

Commercial Use Authorization

DUE DATE: Please submit the attached Application at least **30 days in advance of your proposed start date** to allow sufficient processing time. Applications not received within that timeframe will still be processed; however the permit may not be issued by your proposed start date.

Business Name: _____

1. ___ Completed & Signed Application
2. ___ Fee Payment (Fees are non-refundable)
(Payments can be made online using your CUA number (CUAId) at www.pay.gov with a credit card, debit card or check. If paying online and you know or have your CUAID number, please call us. Payment can also be made via mail – make checks payable to: National Park Service).
3. ___ Insurance Certificate (with US Government as an additional insured)
4. ___ Visitor Acknowledgement of Risk
5. ___ Big Game Transporter License
6. ___ **Mountaineering Guides** must submit a Standard Operating Plan
7. ___ FAA Operating Certificate (Part 135)
8. ___ Letter of Operations Specifications from FAA (Foreign Air Carriers)

Reminder: Including a copy of your Certificate of Insurance along with this application will speed the process. This is generally the largest cause of delays in processing.

Mail this Application and Fee Payment to:

**National Park Service
Concessions Office
240 West 5th Avenue, Room 114
Anchorage, Alaska 99501**

Note: Applicants paying by check in the mail must provide either their tax payer identification number or social security number directly on their check. The Debt Collection Improvement Act of 1996 requires persons “doing business” with a federal agency to provide this information for debt collection purposes.

Park Management Fees: Please write a separate check for each park that has a management fee.

Denali Management Fee
Glacier Bay Management Fee
Katmai-Aniakchak-Alagnak Wild River (all on one check)
Lake Clark Management Fee
Western Arctic Region Management Fee (one check)
Wrangell Management Fee

FEE SCHEDULE FOR COMMERCIAL USE OPERATORS

National Park Service

Concessions Office

240 West 5th Avenue, Room 114

Anchorage, Alaska 99501

Ph: (907) 644-3362 Fax: (907) 644-3813

Definitions

(The Application & Administrative Fees are Non-Refundable)

Application Fee represents the costs incurred by the park service in mailing, distributing and initial review to make sure the information supplied is sufficient to form a decision. This fee is non-refundable, whether or not the authorization is approved. All applicants must pay this fee.

Administrative Fee is based on cost associated with the administrative process of the decision and the approval of the authorization. The Administrative Fee is due at the time the application is submitted and is non-refundable, whether or not the authorization is approved. All applicants must pay this fee.

Management Fee is charged by certain parks and is based on the actual costs incurred by all park divisions involved in monitoring, supporting or cleanup and restoring after the use.

Recreational Use Fee: Funds from this fee are used to reduce identified non-recurring maintenance, infrastructure repair, and to assist resource management.

Application, Administrative & Management Fee

Please submit fee as specified along with your Application

Number of Parks	Application & Administrative Fee Two-Year CUA	Application & Administrative Fee One-Year CUA	Annual Management Fee
1	\$300	\$200	Please also include \$100 per park unit specified below: --Denali National Park & Preserve --Glacier Bay National Park & Preserve --Wrangell-St. Elias National Park & Preserve --Western Arctic National Parklands Unit * <i>(*Bering Land Bridge, Cape Krusenstern, Kobuk Valley & Noatak National Preserve)</i>
2	\$400	\$250	
3	\$500	\$300	
4	\$600	\$350	
5	\$700	\$400	
6	\$800	\$450	

In addition to the **Application & Administrative Fee**, those operating in Denali, Wrangell-St. Elias, Western National Parklands or Glacier Bay must include the **Annual Management Fee**. **Example:** A 2-year CUA for 3 park units, of which two are Denali and Noatak National Preserve, the fee would be: \$500 plus a \$100 Management Fee for Denali and a \$100 Management Fee for Western Arctic National Parklands Unit (meaning Bering Land Bridge), for a total of \$700.

Please note that Western Arctic National Parklands (for fee purposes only) is considered a Unit. The \$100 Annual management fee for that unit covers any of the four in that unit - the fee for Western Parklands is not \$100 per park area within that unit.

ELECTRONIC FUND TRANSFERS: All checks will be converted to an electronic fund transfer (EFT). This means we will copy your check and use the account information on it to electronically debit your account for the amount of the check. You will not receive your original check back after it has been electronically processed. The check will be destroyed, however, a copy will be maintained for recordkeeping.

PLEASE WRITE SEPARATE CHECKS FOR EACH PARK UNIT'S MANAGEMENT FEES.

