

INCIDENTAL BUSINESS PERMIT APPLICATION FORM

for
COMMERCIAL SERVICES
within
C & O Canal National Historical Park
1850 Dual Highway, Suite 100
Hagerstown, Maryland 21740
Phone: 301-745-5817

Applicant Name:	Social Security #:
Organization Name:	Tax Identification #:
Address:	Main Telephone #:
Address:	Secondary Telephone #:
City:	Fax #:
State:	Cell Phone #:
	Email Address:

As an applicant, are you? (Mark one box with "X")

- Individual
 Corporation
 Partnership/Association
 State Government/State Agency

If you are an individual or partnership, are you also a citizen(s) of the United States?

- Yes No

Please Attach the Following Information:

1. Current brochures (one each)
2. Advertising Materials
3. Description of client charges and fees (what client fees cover). Attach Rate Sheet
4. Documentation of Insurance Coverage (Certificate of Insurances) meeting National Park Service requirements. Liability insurance should state the National Park Service as "Additional Insured".
5. Description of Proposed Service: Please include: season or main period of operation, who is your client/audience, services offered to clients, location, frequency, party size, does this service include the use of motorized equipment or stock animals, etc.
6. List all areas of park that you want to use. Use towpath miles, location descriptions, location names, etc. (i.e., towpath from mile 0 to mile 100, Lock 34 river access point, 15 Mile Creek Campground)
7. Instructor/Guide Certification: Please identify all instructors/guides who would be working under your permit. Attach copies of current licenses/certifications. (Include a statement addressing your requirements for employment, staff training programs, etc. Include a copy of employees' current CPR/First Aid certificates. Please provide the park with written notification of any staffing changes during your operating season.)
8. Safety Plan. (Including, but not limited to evacuation and emergency procedures, contact points, use of cellular phones, first aid equipment and training, etc.)
9. Type of vehicles in the operation and the capacity of each.

Have you ever, or are you currently providing commercial services under a license/permit issued by a state or federal land management agency? If "yes", please indicate the agency(ies), location(s), dates, type of service(s) offered, and all previous names used in these operations.

- Yes No

I HEREBY CERTIFY that I am of legal age and authorized to do business in the state of Maryland and/or Washington, D.C. that I have personally examined the information contained in this application and that this information is correct to the best of my knowledge.

Applicant's Signature

Date

Title 18, U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or fraudulent statements or representations as to any matter within its jurisdiction.

APPLICANTS: Information provided will be used to determine whether a permit will be issued. Please return the completed application form, any additional information and a check or money order for **\$300.00** payable to the **National Park Service** to:
C & O Canal National Historical Park
1850 Dual Highway
Suite 100
Hagerstown, Maryland 21740.

Should there be any questions regarding this application or the permit process, please contact the Special Park Use Coordinator at 301-745-5817.

Note that this is an application only, and does not serve as permission to conduct business in or any other use of the park. If your request is approved, a permit containing applicable conditions and regulations will be sent to the person designated on the application. **The permit must be signed and returned to the park prior to conducting business.**

Paperwork Reduction Act Statement: This information is being collected to allow the park manager to make a value judgment on whether or not to allow the requested use. All the applicable parts of the form must be completed. A Federal 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 OMB control number.

ADDITIONAL INFORMATION ON INSURANCE AND INDEMNITY - Minimum Requirements:

The following is general information regarding insurance and indemnity requirements. Exact insurance requirements and liability minimums specific to your proposed commercial service activity, are noted in the conditions of the sample Incidental Business Permit (copy below).

A. GENERAL. The permittee shall hold harmless, defend and indemnify the United States of America, its agents and employees for losses, damages or judgments and expenses on account of fire or other peril, bodily injury, death or property damage of any nature whatsoever, and by whomsoever made, arising out of the activities of the permittee, and his/her employees, subcontractors or agents under this license. The types and amounts of insurance coverage purchased by the permittee shall be approved by the Superintendent. The permittee shall, annually, or at the time insurance is purchased, provide the Superintendent with a Statement of Insurance and Certificate of Insurance as evidence of compliance with this section and shall provide the Superintendent thirty (30) days written notice of any material change in the permittee's insurance program hereunder.

The Superintendent will not be responsible for any omissions or inadequacies of insurance coverage and amounts in the event the insurance purchased by the permittee proves to be inadequate or otherwise insufficient for any reason whatsoever.

B. PUBLIC LIABILITY. The permittee shall provide Comprehensive General Liability insurance against claims occasioned by actions or omissions of the permittee in carrying out the activities and operations authorized hereunder. Such insurance shall be in an amount commensurate with the degree of risk and the scope and size of such activities authorized herein, but in any event, the minimum limits of liability shall be **\$1,000,000** per occurrence covering bodily injury and property damage. If claims reduce available insurance below the required per occurrence limits, the permittee shall obtain additional insurance to restore the required limits. An umbrella or excess liability policy, in addition to a Comprehensive General Liability Policy, may be used to achieve the required limits.

From time to time, as conditions in the insurance industry warrant, the Superintendent reserves the right to revise the minimum required limits.

All liability policies are to specify that the insurance company shall have no right of subrogation against the United States of America or shall provide that the United States of America is named an additional insured.

The permittee shall also obtain the following additional coverage at the same limits as required for the permittee's comprehensive general liability insurance unless other limits are specified below:

- (1) Automobile Liability - To cover all owned, non-owned and hired vehicles operated inside the park by the permittee; Comprehensive Automobile Liability, Uninsured Motorist coverage, and Statutory "No-Fault" coverage, as required by the state of Maryland and/or the District of Columbia. Coverage is required if vehicles are used in the operation.

MINIMUM AMOUNT: **\$500,000** (or higher depending on the vehicle capacity)

- (2) Worker's Compensation - Statutory worker's compensation and employees' liability as required by the state of Maryland and/or the District of Columbia.