National Park Service Fort Union National Monument P.O. Box 127 Watrous, NM 87753 505-425-8025



Application for Special Use Permit Commercial Filming/Still Photography

Please supply the information requested below. **Attach additional sheets, if necessary, to provide required information**. A nonrefundable processing fee of \$100.00 must accompany this application unless the requested use is an exercise of a First Amendment right. You must allow sufficient time for the park to process your request; check with the park for guidelines. You will be notified of the status of the application and the necessary steps to secure your final permit. Your permit may require the payment of cost recovery charges and proof of liability insurance naming the United States of America as also insured.

Enter either a social security number OR a tax ID number: we do not require both.		
Applicant Name:	Applicant Company:	
Social Security #:	Tax ID #:	
Street/Address:	Street/Address:	
City/State/Zip Code:	City/State/Zip Code:	
Telephone #:	Contact name:	
Cell phone #:	Telephone #:	
Fax #:	Fax #:	
Email:	Email:	
Project name:	Telephone #:	
Location manager:	Cell phone #:	
	Email:	
TYPE OF PROJECT: Still photography	☐ideo/motion picture/film	
Detailed description of onsite activiti	es: (attach additional pages as necessary)	

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LOCATION SCHEDULE:

Each date and each location must have an individual entry – use additional pages as necessary.						
DATE	LOCATION	Start Time	End Time	Interior or Exterior	Activity: Set-Up/ Film / Non-Filming /Breakdown	# of cast & crew*
*numbei	r in this column should i	nclude all	individua	als present at th	ne location	
	nprises anyone in front of , park visitors, cooperators			•		•
Do you ir	ntend to utilize talent? [☐ Yes ☐	No			
If yes, prov	vide a full description of w	ho they are	e and how	they will be utili	zed:	

Do you intend t	o utilize talent? 🗌 Yes	□No	
If yes, provide a fo	ull description of who the	y are and how they will be ι	ıtilized:
Description of equ	uipment including backdr	ops, sets, props, etc., to be a	added to or constructed on park lands:
ELECTRICAL REC	DUIREMENTS: (explain)		
Generator(s):	quantity Yes,	size	
Lighting:		□ None □ Reflectors of	only Yes
Explain:			
Road Use:		Date/tin	ne:
Road closure requ	uested? 🗌 No 🖫 🖺 Yes		
Driving shots	DyDrive Towhots	Eulpisi&v&Away	☐ Wet down road
Camera/Equipme	nt on Road Shoulder		☐ Camera/Equipment or
CAMERAS (check	k all that apply)		
Hand Tripod_	Dolly Dolly w/track	footage Crane or jib ar	m Arm footage

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Portable crane Car mou	nt Camera car, shot m	aker, or process trailer
OPERATIONAL INFORMA	TION:	
Vehicles:		
Number of Cars, SUVs or I	ight pick-up trucks	
Number of Vehicles great	er than a 10,000 lbs. (class	s 3 or higher)
NOTE: Large or oversized	vehicles may not be able to	be accommodated or additional steps may need to be
taken to ensure that no dar	mage to park resource occu	ırs.
BASE CAMP LOCATION:	(attach diagram):	
SPECIAL ACTIVITIES		
INVOLVEMENT OF MINO	RS:	
Children:	□ None	∐YeAge #arigehildren
LIVESTOCK and/or TRAIL	NED ANIMALS:	
Number and type of anima	l: Manne	er of transportation:
Staging/corralling needs (a	ttach plan if necessary):	
AIRCRAFT: No Yes	(explain)	
as a condition of your perm	nit.	. Landings must be specifically requested and approved cs, etc): \(\sum \text{No} \sum \text{Ye} \forall \text{dentify} \)
Effects Technician Name: _		Phone #
License # (if applicable)		Permit # (if applicable)
STUNTS: No Ye (expla	iin)	
Coordinator	Phone #	Email
Any other unusual or hazar	dous activities? 🗌 No Y e	s (explain)

Have you physically visite	ed the requested ar	ea?		□Y □N
When answering yes t	o any of the follo	owing quest	tions, provide additiona	al information:
Do you have, or are you agency for this activit	, , , .	mit with ano	ther Federal, State or loca	al Y_N
Have you had previous p	ermits from the Na	ational Park S	ervice?	□Y□N
Have you ever been deni	ed a permit or had	a permit rev	roked?	\square Y \square N
Have you forfeited a bor	nd or other security	for filming o	on Federal lands?	□Y□N
Are there any pending in filming permit	vestigations agains	st you which	involve a commercial	□Y□N
Do you plan to advertise	or issue a press rel	ease about t	his activity?	□Y□N
Do you anticipate any security concerns? If yes, explain.			\square Y \square N	
request including: story	y boards or scripts, cy medical plan, of	set construc		n evaluating your permit ty plans, sanitary facilities, ilding and site clean-up.
Are you applying for this		of another no	orcon or company?	MY MN
	· ription (including c	ontact inforn	nation) of all other indivic	
CONTACTS:				
Person on location res	ponsible for adhe	erence to all	terms & conditions of	the permit:
Name:		Title:		_
Phone:	_ Cell Phone:		Email:	
Person on location res	ponsible for coor	dinating act	tivities with the NPS:	
Name:		Title:		_
Phone:	_ Cell Phone:		Email:	
Person at the company	y office to contac	t for follow	up information and bil	lling:
Name:	Title	:	Phone:	
Email:				

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OMB Control No. 1024-0026 Expires 08/31/2016 I hereby state that the above information given is complete and correct, and that no false or misleading information or false statements have been given. All estimates are reliable to the best of my knowledge and I have the full authority to represent the applicant/production company and the project described above.

Signature _____ Title ____ Date ____

Company Name	
***********	*********
Note: this is an application only, and does not serve as information provided will be used to determine wh application along with the application fee in the form	ether a permit will be issued. Send the completed
National Park Service to	at the Park address found on the first
page of this application.	

If your request is approved, a permit containing applicable terms and conditions will be sent to the person designated on the application. The permit must be signed by the responsible person and returned to the park for final approval by the Park Superintendent.

Notice to Customers Making Payment by Personal Check: When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

NOTICES

Privacy Act Statement: The Privacy Act of 1974 (5 U.S.C. 552a) provides that you be furnished with the following information in connection with information required in this application. This information is being collected to allow the park manager to make a value judgment on whether or not to allow the requested use. Applicants are required to provide their social security or taxpayer identification number for activities subject to collection of fees and charges by the National Park Service (31 U.S.C. 7701). Information from the application may be transferred to appropriate Federal, State, and local agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

Paperwork Reduction Act Statement: We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) to provide the park managers the information needed to decide whether or not to allow the requested use. 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 30 minutes per response including the time it takes to read, gather and maintain data, review instructions and complete the form. Direct comments regarding this burden estimate or any aspects of this form to the Information Collection Clearance Officer, National Park Service, 1849 C Street NW (1237), Washington, D.C. 20240.

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 mater within its jurisdiction.