



ALASKA BACKCOUNTRY USE PERMIT APPLICATION



GLACIER BAY NATIONAL PARK & PRESERVE

Visitor Information Station
P.O. Box 140/ 1 Park Road
Gustavus, AK 99826
(907) 697-2627

| APPLICANT INFORMATION (All Fields in this Section are Mandatory) | | | |
|--|--|--|---|
| When approved by NPS park official, this single-visit permit authorizes: | | | |
| Last Name | First Name | Middle Initial | |
| Street or Physical Address | | | |
| City | State/Province | Postal Code | Country |
| MODE OF TRANSPORTATION | | | |
| Watercraft | | | |
| Name <input style="width: 40px;" type="text"/> | Type <input style="width: 40px;" type="text"/> | | |
| Make <input style="width: 40px;" type="text"/> | Model <input style="width: 40px;" type="text"/> | | |
| Length <input style="width: 40px;" type="text"/> | Horsepower <input style="width: 40px;" type="text"/> | | |
| Hull Registration # <input style="width: 40px;" type="text"/> | State/Province <input style="width: 40px;" type="text"/> | | |
| Rental? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Colors <input style="width: 40px;" type="text"/> | |
| ITINERARY DETAILS | | | |
| Start Date <input style="width: 40px;" type="text"/> | End Date <input style="width: 40px;" type="text"/> | Entry Location <input style="width: 40px;" type="text"/> | Exit Location <input style="width: 40px;" type="text"/> |
| <input type="checkbox"/> Alternate Dates | | | |
| <input style="width: 40px;" type="text"/> | to <input style="width: 40px;" type="text"/> | | |
| <input style="width: 40px;" type="text"/> | to <input style="width: 40px;" type="text"/> | | |
| Trip Length (# of nights – 6 max.) | | | |
| <input style="width: 40px;" type="text"/> | | | |
| | Date | Location | |
| Night 1 | <input style="width: 40px;" type="text"/> | <input style="width: 40px;" type="text"/> | |
| Night 2 | <input style="width: 40px;" type="text"/> | <input style="width: 40px;" type="text"/> | |
| Night 3 | <input style="width: 40px;" type="text"/> | <input style="width: 40px;" type="text"/> | |
| Night 4 | <input style="width: 40px;" type="text"/> | <input style="width: 40px;" type="text"/> | |
| Night 5 | <input style="width: 40px;" type="text"/> | <input style="width: 40px;" type="text"/> | |
| Night 6 | <input style="width: 40px;" type="text"/> | <input style="width: 40px;" type="text"/> | |

| MISCELLANEOUS INFORMATION | | | |
|--|--|--|---|
| Contact Phone* | Email Address* | | |
| Commercial Guided Trip?* Yes <input type="checkbox"/> No <input type="checkbox"/> | No. of People in Party* [] | No. of Youth < Age 18 * [] | No. of Adults > Age 17* [] |
| Names of Group Members: [] | | | |
| Emergency Point-of-Contact Name | <input type="checkbox"/> Family <input type="checkbox"/> Friend <input type="checkbox"/> Colleague | Emergency Point-of-Contact Phone Number [] | Emergency Point-of-Contact City/State/Province/Country [] |
| Will you bring a service dog? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| For the purposes of improving your visit, the NPS may seek to understand more about your experience. Are you willing to be contacted by the NPS to participate in future visitor surveys and/or social science studies? Yes <input type="checkbox"/> No <input type="checkbox"/> | | | |
| EQUIPMENT | | | |
| <input type="checkbox"/> Radio(s) * | Type(s) [] | | |
| <input type="checkbox"/> Cellular Telephone(s) * (include type, service provider, phone # and quantity) | Type(s) [] | Service Provider(s) & Phone #(s) [] | |
| <input type="checkbox"/> Satellite Telephone(s) * (include type, service provider, phone # and quantity) | Type(s) [] | Service Provider(s) & Phone #(s) [] | |
| <input type="checkbox"/> Personal Locator Beacon(s) or Device(s) * (include type and service provider) | Type(s) [] | Service Provider(s) & Phone #(s) [] | |
| <input type="checkbox"/> First Aid Kits | | Type <input type="checkbox"/> Minor <input type="checkbox"/> Major | Quantity [] [] |
| * Notice Regarding the Use of Cell Phones, Satellite Phones, and Personal Locator Devices Communication devices may be helpful, but do not guarantee your safety or rescue. It is your responsibility to accept the risks inherent with your trip and to be self-reliant in the event of an emergency. | | | |
| U.S. Coast Guard Approved Personal Flotation Devices | | | Quantity |
| <input type="checkbox"/> Offshore Lifejacket – Type 1 | | | [] |
| <input type="checkbox"/> Near Shore Buoyant Vest – Type II | | | [] |
| <input type="checkbox"/> Flotation Aid – Type III | | | [] |
| <input type="checkbox"/> Throwable Device – Type IV (boat cushions, ring buoys, horseshoe buoys, throw bags, and throw lines) | | | [] |
| <input type="checkbox"/> Special Use Device – Type V (includes include work vests, deck suits, and hybrids for restricted use) | | | [] |
| <input type="checkbox"/> Inflatable Life Jackets | | | [] |

By my signature I certify that all of the information provided by me and members of my party are true and complete to the best of my knowledge.

Applicant's Signature: _____ **Date:** _____

Issuing Officer's Signature: _____ **Date:** _____

Privacy Act Statement

General: This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974), December 21, 1984, for individuals completing this form.

Authority: 54 U.S.C. §100101, NPS Organic Act; 16 U.S.C. 1131-1136, Wilderness Act; 43 U.S.C. §1701 et seq., 16 U.S.C. §6801-6814, the Federal Lands Recreation Enhancement Act; 36 CFR Part 71, Recreation Fees; 36 CFR 1.6, Permits; and 36 CFR 2.23 Recreation Fees. National Park Service Backcountry/Wilderness Use Permit requirements must be based on regulations established in 36 CFR §1.6 and §2.10 (outside of Alaska) and in 36 CFR, Part 13 (in Alaska). Prohibited in Wilderness with the following exceptions: 1) Wilderness areas located in National Park Service units in Alaska, pursuant to PL. 96-487, Alaska National Interest Lands Conservation Act (a) and 43 CFR §36.11 - Special Access; 2) Wilderness area in National Park Service units outside of Alaska where use of aircraft or motorboats have already become established, pursuant to the Wilderness Act §4(d)(1).

Purpose and Uses: To establish and verify an applicant's eligibility for a permit to conduct certain activities within the National Park System and to process permits for individual members of the public and organizations interested in obtaining a permit authorizing an activity. Information collected will be used to provide the public and permittees with permit-related information, to monitor activities conducted under a permit, to analyze data and produce reports to monitor the use park resources, to assess the impact of permitted activities on the conservation and management of protected species and their habitats, and to evaluate the effectiveness of the permit programs. The DOI and NPS may use the information to meet reporting requirements, to generate budget estimates and track performance, and to assist park staff with visitor education, fee collection, resource management and protection, recreational use planning, law enforcement and public safety personnel for such purposes as emergency contact and search and rescue efforts; to provide permit holders and participants with information about parks and their partners; and to provide reports of activities conducted under an issued permit.

Based on the disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act, the National Park Service may share information with first responders and Federal, state, and local governments to provide information needed to locate an individual or render aid in an emergency; to recover debts owed to the United States; to respond to a violation or potential violation of the law; in response to a court order and/or discovery purposes related to litigation; or other authorized routine use when the disclosure is compatible with the purpose for which the records were compiled.

Effects of Nondisclosure: It is in your best interest to answer all of the questions. The U.S. Criminal Code, Title 18 U.S.C. 1001, provides that knowingly falsifying or concealing a material fact is a felony that may result in fines of up to \$10,000 or 5 years in prison, or both. Deliberately and materially making false or fraudulent statements on this form will be grounds for not granting you a Backcountry/Wilderness Use Permit.

Paperwork Reduction Act Statement

We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) and 36 CFR 1-7, 12 and 13 which authorize the National Park Service to require applicants to fill out this form to monitor resources and to protect visitors. This information is being collected to allow the park management to make value judgements necessary to enhance the safety and enjoyment of both the visitors and wildlife. 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 8 minutes per response, including the time it takes for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Comments regarding this burden estimate or any aspect of this form should be sent to the Information Collection Clearance Officer, National Park Service, 1201 Oakridge Drive, Fort Collins, CO 80525. Do not send this application to this address. Please send to the park address at the top of the first page.

RECORDS RETENTION. TEMPORARY. Destroy 3 years after closure. (NPS Records Schedule, Protection and Safety (N1-79-08-1))