

**National Park Service**  
**Haleakalā National Park**  
**P.O. Box 369 Makawao, HI 96768**  
**Phone 808-572-4440 Fax 808-572-4438**



**Application for Special Use Permit (Access)**

Please supply the information requested below. **Attach additional sheets, if necessary, to provide required information.** We notify you of the disposition of the application and the necessary steps to secure your final permit. For special events, a non-refundable processing fee should be included and your permit may require the payment of cost recovery charges and proof of liability insurance naming the United States of America as also insured. Pursuant to the 2010 NPS Interim Regulations, parks have up to 10 days to process a fully executed application that seeks to engage in a demonstration or the sale or distribution of printed matter.

<b>Applicant Name (print):</b>	<b>Organization Name (if applicable) (print):</b>
<b>Social Security #:</b> (Only required if making application fee payment by check)	<b>Authorized Representative (print):</b> (Include Letter of Designation with this Application)
<b>Street/Address (print):</b>	<b>Tax ID #</b>
<b>City/State/Zip Code (print):</b>	<b>Street/Address (print):</b>
<b>Telephone #:</b>	<b>City/State/Zip Code (print):</b>
<b>Cell phone #:</b>	<b>Telephone #:</b>
<b>Fax #:</b>	<b>Cell phone #:</b>
<b>E-mail (print):</b>	<b>Fax#:</b>
	<b>E-mail (print):</b>

**Description of Proposed Activity (attach diagram, attach additional pages if necessary):**

*Use of Park road, known as "Crater Road" (NPS designation "HALE Route 10") from park boundary near MM 10.19, to the intersection with "Summit Road" (NPS designation "HALE Route 100"), turn south, and proceed along "Summit Road" to the "Observatories Access Road" (NPS designation "HALE Route 200"), turn south and proceed along "Observatories Access Road" to the park boundary at the cattle grate near Haleakalā Observatories entrance. For the express purposes of vehicular travel over park road(s) for transportation of equipment, personnel, materials to/from facilities within Haleakalā Observatories.*

Date(s): Long-Term Special Park Use Permits (Access) *may* be granted for up to five-years. Contact the Business and Revenue Program Specialist for further information.

<b>Project Name (if applicable):</b>			
<b>Access will begin (print):</b> (date and time, typically 08:00 a.m.)	<b>Project will begin (print):</b> (date and time)	<b>Project will end (print):</b> (date and time)	<b>Access will end (print):</b> (date and time, typically 17:00 p.m.)
<b>Maximum number of daily vehicle drivers and/or repair crewmembers: HO applicants only, the total shall not include facility employees. Total shall not exceed 20 for each project. (Please provide best estimate)</b>			
<b>Maximum number of daily vehicles: HO applicants only, the total shall not include facility employees. Total shall not exceed 20 for each project and may include lowboy cranes, tractor-trailers, flatbed trucks, escort vehicles, and various work trucks, etc. (Please provide best estimate)</b>			
<b>List support personnel (contractors, etc. including addresses and telephones attach additional pages if necessary):</b>			
<b>Contractor Name (print):</b>		<b>Company Name (print):</b>	
<b>Street/Address (print):</b>			
<b>City/State/Zip Code (print):</b>			
<b>Telephone #:</b>		<b>Cell phone #:</b>	
<b>Individual in charge on site (include address, telephone and cell phone numbers):</b>			
<b>Name: (print)</b>			
<b>Address (print):</b>			
<b>Telephone #:</b>		<b>Cell phone #:</b>	

Is this an exercise of First Amendment Rights?  Y  N  
 Are you familiar with/have you visited the requested area?  Y  N  
 Have you obtained a permit from the National Park Service in the past?  Y  N  
 (If yes, provide a list of permit dates and locations on a separate page.)  
 Is there any reason to believe there will be attempts to disrupt, protest or prevent your event?(If yes, please explain on a separate page.)  Y  N

The applicant by his or her signature certifies that all the information given is complete and correct, and that no false or misleading information or false statements have been given.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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Information provided shall determine whether the NPS will issue a permit. The completed application shall be accompanied by payment of an Application Fee for **\$150.00 (USD)**. Payment by credit card (preferred method), over the phone may be arranged by contacting the Business & Revenue Office. Payment in the form of a cashier’s check or money order shall be made payable to **National Park Service**. Application and administrative charges are non-refundable. The NPS shall not consider applications until payment of the Application Fee.

**Businesses/Organizations:** Application shall be accompanied with a copy of the Business/Organization Commercial Liability Insurance Certificate (CLI) underwritten by a United States Company, or a company holding a Certificate of Authority for the State of Hawai’i, showing a minimum coverage for Commercial Liability of \$1,000,000 (\$1M) each occurrence. The minimum coverage may be adjusted higher depending on the intended use/amount of use of the Park road. The CLI shall also show a minimum coverage for Automobile Liability of \$1,000,000 (\$1M) Combined Single Limit for All Owned Autos, Hired Autos, and Non-Owned Autos. The CLI shall show Policy Number(s). Binders are not acceptable and Policy EFF/EXP shall cover the period requested in the application. The United States Government/Haleakalā National Park shall appear on the Certificate as Additionally Insured. The CLI shall be signed by an Authorized Representative. Federal/State entities are exempt from this requirement; however, non-government contractors/subcontractors listed under this application, and any future non-government contractors/subcontractors registered under the issued Permit shall comply with this requirement.

Scan this completed application as a .PDF and email (preferred method) to [hale\\_commercial\\_manager@nps.gov](mailto:hale_commercial_manager@nps.gov). You may mail this completed application to **Business and Revenue Program Specialist** at the Park address found on the first page of this application.

**Note:** This is an application only, and does not serve as permission to conduct any use of the park. If the Park approves this application, this office shall send a Permit containing applicable terms and conditions to the person designated on the application. The responsible person shall sign the Permit and return to the park prior to the event for final approval by the Park Superintendent. Travel over the Park road shall not occur under any circumstances until the Park issues a fully executed Permit for this specific purpose, and the Permittee complies with all Terms and Conditions.

## 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 by 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 or activities subject to collection of fees by the National Park Service (31 U.S.C. 7701) Information from the application may be transferred to appropriate Federal, State, local agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

**Paperwork Reduction Act Statement):** This information is being collected subject to the Paperwork Reduction Act (44 U.S.C. 3501) to allow the park manager to make a value judgment on whether or not to allow the requested use. This information collection is required to obtain or retain a benefit. All 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.

**Estimated Burden Statement:** Public reporting burden for this form is estimated to average 45 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 National Park Service, Special Park Uses Program Manager, 1849 C Street NW (2460), Washington, D.C. 20240