



**APPLICATION FOR SPECIAL USE PERMIT
COMMERCIAL FILMING / STILL PHOTOGRAPHY
(Long Form)**



Upper Delaware Scenic & Recreational River

274 River Road
Beach Lake, PA 18405
Bonnie K. Sheard, Permit Coordinator
570-729-8251, ext. 2221
Bonnie_sheard@nps.gov

Please supply the information requested below. **Attach additional sheets, if necessary, to provide required information.** A nonrefundable processing fee of \$100.00 will be billed to you through a Bill for Collection unless the requested use is an exercise of a First Amendment right. *Do not include any payment with this application.* You must allow six (6) weeks 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 an additional insured.

*** Enter either a social security number OR a tax ID number; we do not require both.**

Applicant Name				Company/Organization Name			
Social Security Number*				Employer Identification Number/Tax Identification Number*			
Street Address				Street Address			
City	State	Zip Code	Country	City	State	Zip Code	Country
Telephone Number				Contact Name			
Cell Phone Number				Telephone Number			
Fax Number				Fax Number			
Email Address				Email Address			
PROJECT INFORMATION							
Project Name				Telephone Number		Cell Phone Number	
Location Manager				Email Address			
Type of Project <input type="checkbox"/> Video/Motion Picture/Movie <input type="checkbox"/> Still Photography							
Detailed Description of Onsite Activities (attach additional pages, if necessary)							
LOCATION SCHEDULE							
<i>* number in this column should include all individuals present at the location</i>							
Date	Location	Start Time	End time	Interior/ Exterior	Activity: Set-Up/Film/ Non-Filming/Breakdown	Number of Cast/Crew*	

Applicant Name			Company/Organization Name			

TALENT				
Talent comprises anyone in front of the camera and includes, but is not limited to, actors, hosts, correspondents, presenters, park visitors, cooperators, volunteers, National Park Service and concessioner staff, etc.				
Do you intend to utilize talent? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", provide a full description below of who they are and how they will be utilized. (attach additional pages, if necessary)				
EQUIPMENT				
Description of equipment, backdrops, sets, props (attach additional pages, if necessary). Please note if any of the following will be included: weapons, animals, minors, nudity.				
ELECTRICAL REQUIREMENTS				
Description of electrical requirements (attach additional pages, if necessary).				
Generators? If "Yes", provide quantity and size. <input type="checkbox"/> Yes <input type="checkbox"/> No			Quantity	Size
LIGHTING REQUIREMENTS				
Lighting? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "Yes", explain below)		Reflectors Only? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Description of lighting requirements (attach additional pages, if necessary).				
ROAD USE				
Will you require the use of roads? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", please explain:				
Do you require road closures? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If "Yes", please provide the following information (attach additional pages, if necessary)				
Starting Date	Ending Date	Starting Time	Ending Time	Location
		<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	
		<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	
		<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	
		<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	
		<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Types of Shots:		<input type="checkbox"/> Driving <input type="checkbox"/> Drive-by <input type="checkbox"/> Towing <input type="checkbox"/> Wet down road <input type="checkbox"/> Drive-ups and away <input type="checkbox"/> Other (explain):		

CAMERA EQUIPMENT							
Camera/Equipment Location: (Check all that apply)	<input type="checkbox"/> Road shoulder	<input type="checkbox"/> Road median					
	<input type="checkbox"/> Other (explain):						
Types of Equipment: (Check all that apply)	<input type="checkbox"/> Hand	<input type="checkbox"/> Tripod	<input type="checkbox"/> Dolly				
	<input type="checkbox"/> Dolly w/track footage	<input type="checkbox"/> Arm footage	<input type="checkbox"/> Crane or jib arm				
	<input type="checkbox"/> Portable crane	<input type="checkbox"/> Car mount	<input type="checkbox"/> Camera car, shot maker, or process trailer				
OPERATIONAL INFORMATION							
NUMBER OF VEHICLES							
<i>NOTE: Large or oversized vehicles may not be able to be accommodated or additional steps may need to be taken to ensure that no damage to park resource occurs.</i>							
Cars, SUVs, or light pick-up trucks		Vehicles greater than a 10,000 lbs. (class 3 or higher)					
BASE CAMP LOCATION (attach diagrams)							
SPECIAL ACTIVITIES (attach additional pages, if necessary)							
INVOLVEMENT OF MINORS							
Will children be involved? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", provide number of children and age range.			<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; padding: 5px;">Quantity</th> <th style="width: 50%; padding: 5px;">Age Range</th> </tr> </thead> <tbody> <tr> <td style="height: 20px;"></td> <td></td> </tr> </tbody> </table>	Quantity	Age Range		
Quantity	Age Range						
LIVESTOCK OR TRAINED ANIMALS							
Will livestock or trained animals be used? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", provide the following:							
Type	Quantity	Manner of Transportation	Staging/Coral Requirements				
AIRCRAFT							
<i>NOTE: All aircraft use over park lands should be listed. Landings must be specifically requested and approved as a condition of your permit.</i>							
Will aircraft be used? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", explain below (attach additional pages, if necessary)							
SPECIAL EFFECTS (including weapons, pyrotechnics, etc.) (attach additional pages, if necessary)							
Effects Technician's Name		Contact Phone Number	Email Address				
License # (if applicable)		Permit # (if applicable)					
STUNTS							
Will stunts be used? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", explain below (attach additional pages, if necessary)							
Stunt Coordinator		Contact Phone Number	Email Address				
OTHER OR HAZARDOUS ACTIVITIES							
Any other unusual or hazardous activities? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", explain below (attach additional pages, if necessary)							

OPERATIONAL INFORMATION		
Have you physically visited the requested area?		<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>When answering "Yes" to any of the following questions, provide additional information using additional pages, as necessary</i>		
Do you have, or are you applying for, a permit with another Federal, State or local agency for this activity?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you had previous permits from the National Park Service?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been denied a permit or had a permit revoked by a Federal agency?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you forfeited a bond or other security for filming on Federal lands?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any pending Federal investigations against you which involve a commercial filming activity?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you plan to advertise or issue a press release before the event?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you anticipate any security concerns? If yes, explain (attach additional sheet).		<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>NOTE: You are encouraged to attach additional pages with information useful in evaluating your permit request including: story boards or scripts, set construction, parking plan, security plans, sanitary facilities, crowd control, emergency medical plan, off-road activity, trail use, use of any building and site clean-up.</p>		
PROJECT ADMINISTRATION		
Are you applying for this permit on behalf of another person or company? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If "Yes", provide a full description (including contact information) of all other individuals/companies involved with this project (attach additional pages, as necessary)		
CONTACTS		
<i>Person on Location Responsible for Adherence to All Terms and Conditions of Permit:</i>		
Name		Title
Telephone Number	Cell Phone Number	Email Address
<i>Person on Location Responsible for Coordinating Activities With the NPS:</i>		
Name		Title
Telephone Number	Cell Phone Number	Email Address
<i>Company Point-of-contact for Follow-up Information and Billing:</i>		
Name		Title
Telephone Number	Cell Phone Number	Email Address
<i>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. 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.</i>		
Printed Name		Title
		Company Name
Signature		Date

NOTICES

IMPORTANT NOTICE TO APPLICANT

This is an application **only**, and does not serve as permission to conduct any special activity in the park. The information provided will be used to determine whether a permit will be issued. Send the completed application to the Permit Coordinator at the top of the application. Payment can be made through credit card payment in Pay.gov once a Bill for Collection is emailed to you.

If your request is approved, a permit containing applicable terms and conditions will be sent you. The permit must be signed by the responsible person and returned to the park for final approval by the Park Superintendent before the permitted activity may begin.

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 application.

Authority: The authority to collect information on the attached form is derived from Title 31, United States Code, Section 7701.

Purposes and Uses: The information being collected to allow the park manager to make a value judgment on whether or not to allow the requested use. Information from the application may be transferred to appropriate Federal, State, and local agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

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 Special Use Permit

Information Regarding Disclosure of Your Social Security Number Under Public Law 93-579 Section 7(b): Your Social Security Number (SSN) is needed to identify records unique to you. 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). Although disclosure of your SSN is not mandatory, failure to disclose your SSN may prevent or delay the processing of your application. The authority for soliciting and verifying your SSN is Executive Order 9397. The information gathered through the use of the SSN will be used only as necessary for processing this application and will be carried out in accordance with established regulations and published notices of system of records.

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, 12201 Sunrise Valley Drive, Mail Stop 242, Reston, VA 20192. Please do not send your form to this address.

Customers Making Payment

Pay.gov must be used to process application fees (when fees are required). A Tax Identification Number or Employer Identification Number (EIN) is mandatory to process your application fee. **If you do not have an Employer Identification Number/ taxpayer identification number.** A **free** EIN can be obtained from the Internal Revenue Service at <http://www.irs.gov/Businesses/Small-Businesses-&Self-Employed/How-to-Apply-for-an-EIN>.

A Bill for Collection will be emailed to you, along with instructions for payment using Pay.gov. Please pay this Bill for Collection immediately and forward a copy of the receipt for payment to bonnie_sheard@nps.gov. Your permit will not be issued unless this receipt of payment is received by the permit coordinator.