



PERMIT APPLICATION

Event Name: _____

Contact Person: _____

Address: _____

Email address: _____

Phone Number: _____

State Park: _____

Specific Location: _____

Date Requesting: _____

Start Time: _____ End Time: _____

Number in Party: _____ Number of Vehicles: _____

Describe event to be held: _____

Fee: _____

Permittee's Signature: _____ Date: _____

Park Manager's Signature: _____ Date: _____

Send completed form and payment to: _____

Please discuss any special conditions that may apply to your permit with the Park Manager prior to completing this form. All approved special conditions are listed on the back of form.

Certificate of Insurance required by forms ACORD-25 (*weddings/elopements are exempt*)

The Permittee agrees to defend, indemnify, and hold harmless the State of New York, OPRHP, and their officers, employees and agents from and against any claims, damages, losses and expenses arising out of or relating to the permit.

Prior to the start of the permit, Permittee must provide proof of Commercial General Liability with limit not less than \$1 million for each occurrence and Aggregate Coverage with limit not less than \$2 million per accident or occurrence on an ACORD-25 Certificate of Insurance to include the organization name, event location, and event date along with the following wording for Additional Insured: "The State of New York, OPRHP, and their officers, employees, and agents are named as additional insured"

Certificate Holder must be the State of New York, OPRHP, 625 Broadway, Albany, NY 12238

Participants responsible for paying the vehicle use fee on day of the event.

For official use only:

MRR# _____

Date Received: _____

Amount Received: _____

Issued by: _____

