

New York State Office of Parks, Recreation & Historic Preservation
Western District – Genesee Region
One Letchworth State Park, Castile, NY 14427-9716

ISSUED BY: _____

DATE: _____

+++ NIGHT SNOWMOBILE PERMIT +++

NAME: _____ PHONE #: (____) _____
(Last) (First) (MI)

ADDRESS: _____

(City) (State) (Zip Code)

SNOWMOBILE INFORMATION

REGISTRATION NUMBER*: _____ EXPIRATION DATE _____

YEAR & MAKE: _____ COLOR: _____

INSURANCE COMPANY *: _____

EXPIRATION DATE: _____

EMERGENCY NOTIFICATION

NAME: _____ PHONE NUMBER: (____) _____

RELATION: _____

ADDRESS: _____

(City) (State) (Zip Code)

***Please Note: photocopy of insurance card & registration must be
Included with this permit application.**

**MAIL: COMPLETED APPLICATION, COPY OF INSURANCE CARD, COPY OF
REGISTRATION AND A SELF-ADDRESSED, STAMPED LEGAL ENVELOPE TO:**

Snowmobile Permits
One Letchworth State Park
Castile, NY 14427-1124