



New York State Office of Parks, Recreation and Historic Preservation  
Finger Lakes Region

## PERMIT APPLICATION

Organization Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

State Park: \_\_\_\_\_

Specific Location: \_\_\_\_\_

Date Requesting: \_\_\_\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Number in Party: \_\_\_\_\_ Number of Vehicles: \_\_\_\_\_

Describe activity 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.*

**A Certificate of Insurance may be required.**

The certificate needs to include the organization name, event location and event date along with the following wording for "Additional Insured": "The People of the State of New York, the New York State Office of Parks, Recreation and Historic Preservation, the Finger Lakes State Park, Recreation and Historic Preservation Commission, their commissioners, officers, agents and employees."

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

Revised 7/18/05

**For official use only:**

MRR# \_\_\_\_\_

Date Received: \_\_\_\_\_

Amount Received: \_\_\_\_\_

Issued by: \_\_\_\_\_

