

## **COMMERCIAL USE AUTHORIZATION APPLICATION**

OMB Control No. 1024-0268 Expiration Date: 10/31/2023



Saint-Gaudens National Historical Park 139 Saint-Gaudens Road Cornish, NH 03745 603-675-2175

Refer to application instructions at the end of this application. Some parks have additional requirements for businesses that offer services to visitors relating to the safety and welfare of the visitors and protection of the resources. These requirements may include applicable operating licenses, certificates showing proof of training, operating plans, emergency response plans, group size limitations, etc.

1.	frequ	Service for which you are applying: [attach diagram, attach additional pages, if necessary, include locations within the park, frequency, estimated number of participants (per trip and annually), number of vehicles, support equipment (trailers, generators etc.)]				
2.	Will	Will you be providing this service in more than one park? Yes ☐ No ☐ If "Yes", list all parks and services provided.				
3.	Appl	icant's Legal Busir	ness Name: [Include any additional name	s (DBA) under which you will operate.]		
4.		ner and Authorized Agents: (Give the name(s) of the owners and name(s) of the persons designated as Authorized Agents your business. Authorized Agents have the power to sign on your behalf.)				
5.		ng Addresses IARY CONTACT IN	FORMATION (Dates to contact you at th	is address, if seasonal.		
	Addr	ess:				
	City,	State, Zip:				
	Emai	il:	Websit	ð:		
	Day	Phone:	Evening Phone:	Fax:		
	If sar Addr City, Emai	me as "Primary Cont ess: State, Zip: il: site:	TINFORMATION (Dates to contact you a act Information, check here ☐ and go to	question 6.		
	Day	Phone:	Evening Phone:	Fax:		
6.	Wha	t is your Business	Type? (Please check one below)			
		Sole Proprietor				
		Partnership (Print names.)	the names of each partner. If there are r	nore than two partners, please attach a complete	list of their	
	Nam	e:				
	Nam	e:				
		Limited Liability Co	ompany			
		Corporation				
		Non-Profit (Please	attach a copy of your IRS Ruling or Dete	rmination Letter)		
	П	Other				
-	D		As and Namelson	niveties Deter		

7. Business License – State and Number: Expiration Date:

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## **Employer Identification Number (EIN):**

9.

9.	Liability Insurance: Provide proof of liability insurance. The CUA operator must maintain General Liability insurance naming the United States of America as additional insured. Minimum coverage amount is \$500,000 per occurrence. Some activities will require increased coverage or other types of liability insurance; see Park-Specific CUA Insurance Requirements ("Attachment A").						
10.	Will your business operate vehicles/vessels/aircraft within NPS boundaries? Yes ☐ No ☐						
	formation for vehicles/vessels/aircraft chartered from and operated by another company is NOT required. If "Yes," please give a escription of each vehicle. Use additional paper, if necessary.						
	Make/Model of Vehic	ile	Year		Max # Passenger Capacity	Own/Rent/Lease	
	Make of Aircraft		Tail	Number	Max # Passenger Capacity	Own/Rent/Lease	
	Make/Model of Vessel	Registratio		Length	Max # Passenger Capacity	Own/Rent/Lease	
11.	Additionally Required Documentation: Parks may require proof of licenses, registrations and certificates, etc. Provide copies of additionally required documentation identified in "Attachment B".				ocumentation		
12. DOI Employment:  Are you, your spouse, or minor children employed within the U.S. Department of the Interior?							
	Yes ☐ No ☐ If "Yes", please provide information below:						
	Employee Name: Title:						
	Bureau or Office where employed:						
If you selected yes, to 12., please contact your servicing ethics office for further guidance prior to submitting this for servicing ethics offices can be found at, https://www.doi.gov/ethics.				s form. A list of			
13. Violations: To your knowledge, have you, your company, or any current or proposed employees been convictions of State, Federal, or local law within the last 5 years? Are you, your company, or any current or propunder investigation for any violations of State, Federal, or local law or regulation? See instructions.							
Yes No If "Yes", please provide the following information. Attach additional pages, if necessary.							
	Date of violation or incident under investigation:						
	Name of business or person(s) charged:						
	Please identify the law or regulation violated or under investigation:						

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Please identify the State, municipality, or Federal agency that initiated the charges:
Additional Detail (optional):
(Results) Action Taken by Court:
Fee: Please include the Application Fee as outlined in Attachment B.
Signature: False, fictitious or fraudulent statements of representations made in this application may be grounds for denial or revocation of the Commercial Use Authorization and may be punishable by fine or imprisonment (U.S. Code, Title 18, Section 1001). All information provided will be considered in reviewing this application. Authorized Agents must attach proof of authorization to sign below.  By my signature, I hereby attest that all my statements and answers on this form and any attachments are true, complete, and
accurate.
Signature Date

14.

15.

**Printed Name** 

#### **NOTICES**

### **Privacy Act Statement**

Authority: The authority to collect information on the attached form is derived from 16 U.S.C. 5966, Commercial Use Authorizations.

Title

**Purpose:** The purposes of the system are (1) to assist NPS employees in managing the National Park Service Commercial Services program allowing commercial uses within a unit of the National Park System to ensure that business activities are conducted in a manner that complies with Federal laws and regulations; (2) to monitor resources that are or may be affected by the authorized commercial uses within a unit of the National Park System; (3) to track applicants and holders of commercial use authorizations who are planning to conduct or are conducting business within units of the National Park System; and (4) to provide to the public the description and contact information for businesses that provide services in national parks.

**Routine Uses:** In addition to those disclosures generally permitted under 5 U.S.C.552a(b) of the Privacy Act, records or information contained in this system may be disclosed outside the National Park Service as a routine use pursuant to 5 U.S.C. 552a(b)(3) to other Federal, State, territorial, local, tribal, or foreign agencies and other authorized organizations and individuals based on an authorized routine use when the disclosure is compatible with the purpose for which the records were compiled as described under the system of records notice for this system.

**Disclosure:** Providing your information is voluntary, however, failure to provide the requested information may impede the processing of your commercial use authorization application.

### **Paperwork Reduction Act Statement**

In accordance with the Paperwork Reduction Act (44 U.S.C. 3501), please note the following. This information collection is authorized by The Concession Management Improvement Act of 1998 (54 USC 101911). Your response is required to obtain or retain a benefit in the form of a Commercial Use Authorization. We will use the information you submit to evaluate your ability to offer the services requested and to notify the public what services you will offer. We may not conduct or sponsor and you are not required to respond to a collection of information unless it displays a currently valid Office of Management and Budget control number. OMB has assigned control number 1024-0268 to this collection.

#### **Estimated Burden Statement**

We estimate that it will take approximately 2.5 hours to prepare an application, including time to review instructions, gather and maintain data, and complete and review the proposal. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Information Collection Officer, National Park Service, 12201 Sunrise Valley Drive, MS-242, Reston, VA 20192. Please do not send your completed form to this address; but rather to the address at the top of the form.

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The following explanations correspond directly with the numbered items on the Application Form. Please read this entire document prior to completing the application. Include the nonrefundable application fee when submitting this application.

### **COMMERCIAL USE AUTHORIZATION APPLICATION INSTRUCTIONS**

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- 1. Enter the service you are proposing to provide. These are the services which are currently approved in the park:
  - Guided hiking/jogging/running when there is not snow on the ground
  - Guided Horseback riding when there is not snow on the ground
  - Art or photography workshops
  - · Other Workshops (i.e. Yoga)

If the service you are proposing to provide is not a currently approved service listed above, contact the park CUA office at the number above.

- 2. Respond "No" or list other parks where you will be providing this service.
- 3. Enter the legal name of your business. If you have a secondary name under which you are doing business (d.b.a.), please enter that name also.
- 4. Give the name(s) of owners and name(s) of persons designated as Authorized Agents for your business. Authorized Agents have the power to sign on your behalf.
- 5. Provide contact information for both the main season and the off-season. Your contact information may also be published in the NPS Commercial Services Directory.
- 6. Check the box that identifies your type of business.
- 7. If the state in which you operate or the state where your business is domiciled requires a state business license, provide the state, license number and year of expiration.
- 8. Provide your Employer Identification Number (EIN). The Debt Collection Improvement Act of 1996 requires us to collect an EIN or Social Security Number (SSN). The NPS will not collect SSNs, only EINs. The EIN is issued by the Internal Revenue Service. You may receive a free EIN at <a href="http://www.irs.gov/Businesses/Small-Businesses-&-Self-Employed/How-to-Apply-for-an-EIN">http://www.irs.gov/Businesses/Small-Businesses-&-Self-Employed/How-to-Apply-for-an-EIN</a>. We will use the EIN that you provide as needed to collect debts.
- 9. Provide proof of General Liability Insurance naming the United States of America, as additional insured in the amounts designated in the application. Provide proof of vehicle/vessel/aircraft liability insurance if you own, rent, or lease vehicles/vessels/aircraft and transport visitors by those means or if those owned, rented, or leased vehicle/vessel/aircraft are engaged in providing the service (i.e., hauling horses used in the activity). Insurance companies must be rated at least A- by the most recent edition of A.M. Best's Key Insurance Reports (Property-Casualty edition) or similar insurance rating companies (Moody's, Standard and Poor's, or Fitch). You may be subject to additional insurance requirements. Refer to "Attachment A".
- 10. Provide a description of each owned, rented, or leased vehicle/vessel/aircraft you will utilize during the course of the proposed commercial service. Information for vehicles/vessels/aircraft chartered from and operated by another company is not required.
- 11. Provide copies of additional documentation as required by "Attachment B".
- 12. Indicate if you, your spouse, or parent (if you are a minor child) is employed by the U.S. Department of the Interior (Department). Departmental ethics regulations at 5 C.F.R. § 3501.103(c) prohibit Department employees, their spouses, and minor children, from acquiring or retaining permits, leases, and other rights in Federal lands granted by the Department. This prohibition includes any commercial use authorization to conduct commercial activities or services on Department property.
- 13. Provide details if your business or business owners or current employees or proposed employees have been convicted or are currently under charges for violation of State, Federal, or local law or regulation in the last 5 years. Do not include minor traffic tickets.
- 14. Include payment of the Application Fee \$50. See "Attachment" B.
- 15. Please sign and date your application. If the person SIGNING this application is an Authorized Agent for the business, proof of signing authority must accompany this application.

Attachment A: Insurance Requirements

Attachment B: List of Approved Services, Additionally Required Documentation, and Fee Information

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**Additional Information:** The National Park Service has terms and conditions on all commercial service agreements. The following terms and conditions will apply to all Commercial Use Authorizations. There may be additional terms and conditions based on the services provided. These may include but are not limited to limits on locations, times, group size, and employee licenses and certifications and providing such information to the park superintendent for approval.

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#### **CONDITIONS OF THIS AUTHORIZATION**

- 1. False Information: The holder is prohibited from knowingly giving false information. To do so will be considered a breach of conditions and be grounds for revocation: [RE: 36 CFR 2.32(a) (3)].
- 2. Legal Compliance: The holder shall exercise this privilege subject to the supervision of the area Superintendent. The holder shall comply with all applicable laws and regulations of the area and terms and conditions of the authorization. The holder must acquire all permits or licenses of State or local government, as applicable, necessary to provide the services described above, and, must operate in compliance with all applicable Federal, State, and local laws and regulations, including, without limitation, all applicable park area policies, procedures and regulations. All vehicles/vessels/aircraft are required to be registered and the operators are required to have the proper licenses to operate them commercially, as required by law or regulation.
- 3. Rates: The holder shall provide commercial services under this authorization to visitors at reasonable rates satisfactory to the area Superintendent.
- 4. Operating Conditions: The holder shall provide the authorized commercial services to visitors under operating conditions satisfactory to the area Superintendent.
- 5. Liabilities and Claims: This authorization is issued upon the express condition that the United States, its agents and employees shall be free from all liabilities and claims for damages and/or suits for or by reason of any injury, injuries, or death to any person or persons or property of any kind whatsoever, whether to the person or property of the holder, its agents or employees, or third parties, from any cause or causes whatsoever while in or upon said premises or any part thereof during the term of this authorization or occasioned by any occupancy or use of said premises or any activity carried on by the holder in connection herewith, and the holder hereby covenants and agrees to indemnify, defend, save and hold harmless the United States, its agents, and employees from all liabilities, charges, expenses and costs on account of or by reason of any such injuries, deaths, liabilities, claims, suits or losses however occurring or damages growing out of the same.
- 6. Insurance: Holder agrees to carry general liability insurance against claims occasioned by the action or omissions of the holder, its agents and employees in carrying out activities and operations under this authorization. The policy shall name the United States of America as additional insured. Holder agrees to have on file with the park copies of the above insurance with the proper endorsements.
- 7. CUA Fees: At a minimum, the holder shall reimburse the park for all costs incurred by the park as a result of accepting and processing the application and managing and monitoring the authorized activity. Administrative costs for the application process must be paid when the application is submitted. Monitoring fees and any additional costs incurred by the park to support the commercial activity will be paid annually or on a more frequent basis as determined by mutual agreement between the Holder and the area Superintendent.
- **8. Benefit:** No member of, or delegate to, Congress, or Resident Commissioner shall be admitted to any share or part of this authorization or to any benefit that may arise from this authorization. This restriction shall not be construed to extend to this Contract if made with a corporation or company for its general benefit.
- 9. Transfer: This authorization may not be transferred or assigned without the written consent of the area Superintendent.
- **10. Termination:** This authorization may be terminated upon breach of any of the conditions herein or at the discretion of the area Superintendent.
- **11. Preference or Exclusivity:** The holder is not entitled to any preference to renewal of this authorization except to the extent otherwise expressly provided by law. This authorization is not exclusive and is not a concession contract.
- **12. Construction:** The holder shall not construct any structures, fixtures or improvements in the park area. The holder shall not engage in any groundbreaking activities without the express, written approval of the area Superintendent.
- 13. Reporting: The holder is to provide the area Superintendent upon request a statement of its gross receipts from its activities under this authorization and any other specific information related to the holder's operations that the area Superintendent may

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request, including but not limited to, visitor use statistics, and resource impact assessments. The holder must submit annually the CUA Annual Report (NPS Form 10-660) and upon request the CUA Monthly Report (NPS Form 10-660A).

- **14. Accounting:** The holder is to maintain an accounting system under which its accounts can be readily identified within its system of accounts classification. This accounting system must be capable of providing the information required by this authorization. The holder grants the United States of America access to its books and records at any time for the purpose of determining compliance with the terms and conditions of this authorization.
- 15. Visitor Acknowledgment of Risks (VAR): The holder is not permitted to require clients sign a waiver of liability statement or form, insurance disclaimer, and/or indemnification agreement waiving the client's right to hold the CUA holder responsible for accidents or injury occurring on NPS property. The holder is permitted to request or require a client to sign a form or statement acknowledging risk and/or indicating that certain prerequisite skills may be needed to participate in the commercial activity. The holder must provide the park with the current copy of all forms and/or statements used for this purpose and obtain written approval by the park to use the form and/or statement. A sample Acknowledgment of Risk form may be obtained by contacting the CUA office at 802-478-4160.
- 16. Intellectual Property of the National Park Service: Except with the written authorization of the Director of the National Park Service, the Holder shall not assert any legal claim that the Holder or any related entity holds a trademark, tradename, servicemark or other ownership interest in the words "National Park Service", the initials "NPS", or official name of any unit or part thereof, including but not limited to any facility, logo, distinctive natural, archaeological, cultural, or historic site, within the National Park System, or any colorable likeness thereof, or the likeness of a National Park Service official uniform, badge, logo, or insignia.
- 17. Nondiscrimination: The holder must comply with Applicable Laws relating to nondiscrimination in providing visitor services to the public and with all equal employment opportunity provisions of Title VII of the Civil Rights Act, as amended.
- 18. Notification of Employee Rights: The holder must comply with all provisions of Executive Order 13496 of January 30, 2009, (Notification of Employee Rights Under Federal Labor Laws) and its implementing regulations, including the applicable contract clause, codified at 29 CFR part 471, appendix A to subpart A, all of which are incorporated by reference into this authorization as if fully set forth in this authorization.

# SPECIAL PARK CONDITIONS COMMERCIAL USE AUTHORIZATION

### SAINT-GAUDENS NATIONAL HISTORICAL PARK

THESE CONDITIONS ARE APPLICABLE TO ALL AUTHORIZED ACTIVITES OR AREA LISTED ON THIS PERMIT. All pages of this permit must be carried by the permittee or its employees at all times while operating within Saint-Gaudens National Historical Park and will be made available for inspection upon request by a park representative. Failure to carry all pages is a violation of the terms and conditions of this permit.

- **1. Permits/Licenses** The permittee must obtain all permits or licenses of the State of Vermont or local governments, as applicable, necessary to conduct the business activities specified above and must operate in compliance with all applicable federal, state, and local laws and regulations.
- **2. Business Operations** This permit does not authorize the permittee to advertise, solicit business, collect any fees, or sell any goods or services on lands owned and controlled by the United States. The Permit is for incidental business operations when there are no fixed commercial facilities within a national park area, the commercial activity originates and terminates outside the park, no money changes hands on park lands and no commercial solicitation occurs on park lands.
- **3. Damages** The permittee shall pay the United States for any damage resulting from this use which would not reasonably be inherent in the use which the permittee is authorized to make of the land described in this permit.
- **4. Health and Sanitation** The permittee will comply with applicable public health and sanitation standards and codes. The permittee is responsible for the removal of all trash associated with the permittee's visit to the park.
- **5. Nonexclusive Authorization** The permittee will have none of the rights or privileges of P.L. 105-391, Title IV [National Park Service Concessions Management Improvement Act of 1998] specified for concession contracts. The National Park Service (NPS) does not grant the permittee a preferential or exclusive right to conduct business in any NPS administered area.

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**6. Equal Employment Opportunity/Nondiscrimination -** The permittee will comply with all provisions of Executive Order No. 11246 of September 24, 1965, as amended by Executive Order No. 11375 of October 13, 1967, and of the rules, regulations, and relevant orders of the Secretary of Labor (Exhibit A).

7. Insurance – The permittee shall purchase at a minimum the types and amounts of insurance coverage as stated herein and agrees to comply with any revised insurance limits the Superintendent may require during the term of this permit. The Superintendent shall not be responsible for any omissions or inadequacies of insurance coverage and amounts if such prove to be inadequate or otherwise insufficient for any reason whatsoever.

The permittee shall provide the Superintendent a Certificate of Insurance at the inception of this permit and annually thereafter, and shall provide the Superintendent thirty (30) days written notice of any material change in the permittee's insurance program hereunder.

**General Liability** – The permittee shall obtain general liability insurance in at least the amount of three hundred thousand dollars (\$300,000) per occurrence for day hiking or trail running.

- **8. Liability Insurance Lapse or Cancellation –** Upon notification that the permittee's general liability insurance has lapsed or cancelled for any reason, the permit to operate in the park shall be suspended until new insurance is in place.
- **9. Area Use** This permit is applicable only for the use of the area, term, and conditions designated herein. The area(s) authorized for use under this permit must be left in substantially the same condition as it was prior to the activities authorized herein.
- 10. Approved Locations All trails and areas open to hiking.
- **11. Fees –** A non-refundable fee of \$250.00 for application and administration of the CUA, irrespective of the length of the CUA is required.
- **12. Reporting Accidents** An accident resulting in personal injury, death or property damage shall be reported to the Superintendent, as soon as possible. [36 CFR 2.33, 3.4, 4.4]
- **13. Employee/agent responsibly –** The permittee shall ensure that all company employees entering the park are informed of all the conditions of this permit. (The permittee may be cited for any permit violations committed by their employee and/or agent.)
- **14. Guide/Leader Registration** Each group must have one person identified as the group or trip leader who will remain with the group at all times. If the party is divided into more than one group, each group will have a trip leader. The trip leader will inform the group of all park rules and regulation and has responsibility for the group.
- 15. Jogging/Day Hike Group size Group sizes for hiking and trail running will be limited to no more than 20 people.
- **16. Waste Management –** All trash must be packed out and disposed of in an appropriate waste container. All food scraps (fruit peels, nut shells, etc.) are considered trash and must be carried out. It is a violation to feed the wildlife.
- **17. Annual and Monthly Reports** Within 30 days after December 31 of each partial or full calendar year of operation under this permit, the permittee will be responsible for submitting an annual report which summarizes total in-park visitor use, including gross revenues for the reporting period
- **18. Guide Qualifications –** The following minimum qualification must be met by each guide operating within Saint-Gaudens National Historical Park:
  - All Day Hiking/Jogging guides <u>must</u> possess a valid 40 hour basic first aid certificate plus adult CPR. A valid Wilderness
    First Responder first aid certificate plus adult CPR or more advanced first aid such as an Emergency Technician certification
    are also accepted and encouraged.
  - Guides must be at least 18 years of age.
  - Guides must be trained in basic safety and resource protections, Leave No Trace principles, park rules and regulations and in the requirements of the CUA.
  - Guides must possess previous relevant outdoor experience.
- **19. Guide Equipment** A group sized first aid kit will be carried by each group. Guides will also be prepared for emergency situations where they may need to revise their original trip plan to accommodate clients who may be struggling to complete their intended hike. For Day Hike Guides, some recommended additional items include flashlight, extra food, and water.
- **20.** Client Equipment Trip leader/guide will ensure that each member of the group has adequate food and water for the proposed itinerary, appropriate footwear, and clothing. Clients will be prepared for emergency situations where the original trip plan may need to be revised due to unforeseen emergency situations. Some recommended additional items include a flashlight and park map.

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**21. Orientations** – The trip leader must provide an orientation to clients for the proposed itinerary and be capable of revising the itinerary for the group or an individual if an emergency situation occurs. The orientation must include basic hiking etiquette when passing other hikers, Leave No Trace principles, park rules and regulations, safety procedures, litter, human waste and emergencies. Each participant will be supplied with a map (may be a photo copy) of the trail hiked.

**22. Permit Compliance** – The permittee and all participants authorized herein must comply with all of the conditions of this permit, including all exhibits, amendments, application requirements, and written or verbal directives from the Superintendent. Failure to obtain a permit to provide commercial services, and have a copy of the document available for inspection at any time while in the park, are violations of the permit terms for which a citation may be issued, and may subject the commercial operator to penalties as prescribed by law or regulation, including exclusion from doing business in the park.

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# ATTACHMENT A CUA Insurance Requirements

## Commercial General Liability (CGL) Insurance

Liability insurance is required for all CUA holders under the terms of the authorization. Such insurance should be of sufficient scope to cover all potential risks and in an amount to cover claims that can reasonably be expected in the event of serious injury or death. The minimum commercial general liability insurance Is \$500,000 Liability insurance policies must name the United States of America as additional insured. The business or person that is providing the service must be the named insured (policy holder). Companies that provide transportation only are not required to have Commercial General Liability as long as the passengers do not disembark.

**Commercial Auto Liability Insurance** is required if a CUA holder transports passengers or uses in the performance of the service in the park owned/leased/rented vehicles. If a CUA holder charters the vehicle and those chartered vehicles are owned and operated by another company, the CUA holder is not required to have Commercial Automobile Liability insurance. The minimum Commercial Auto Liability Insurance for passenger transport is:

Commercial Vehicle Insurance – Passenger Transport (bodily injury and property damage)	Minimum per Occurrence Liability Limits*
Up to 6 passengers	\$1,000,000
7 – 15 passengers	\$1,500,000
16 – 25 passengers	\$3,000,000
26+ passengers	\$5,000,000

### **Insurance Company Minimum Standards**

The NPS has established the following minimum insurance **company** requirements. All insurance companies must meet the following minimum standards. These standards apply to foreign insurance companies as well as domestic companies.

- 1. All insurers for all coverages must be rated no lower than A- by the most recent edition of Best's Key Rating Guide (Property-Casualty edition), or similar insurance rating companies (Moody's, Standard and Poor's, or Fitch), unless otherwise authorized by the Service.
- 2. All insurers for all coverages must have Best's Financial Size Category of at least VII according to the most recent edition of Best's Key Rating Guide (Property-Casualty edition), or similar insurance rating companies (Moody's, Standard and Poor's, or Fitch), unless otherwise authorized by the Service
- The insurance ratings must be submitted with the CUA Application. The rating companies do not issue certificates. We
  require the insurance broker to note this rating in the Certificate. If the rating does not appear on the certificate, the insurance
  broker must provide it in another document.

### **Proof of Insurance Submission**

Applicants must submit proof of insurance with the CUA Application. The proof of insurance must:

Be written in English with monetary amounts reflected in USD
Reflect that insurance coverage is effective at time of CUA Application submission
Name as insured the business or person that is providing the service
Name the United States as additional insured
Reflect a General Commercial Liability Policy with the minimum coverage amount required in the CUA Application
Reflect required additional insurances (commercial vehicle, vessel, aircraft, etc.) with the minimum coverage amount required
in the CUA Application
Include insurance provider rating or provide in separate document

# ATTACHMENT B List of Approved Service, Additionally Required Documentation, and Fee Information

AUTHORIZED COMMERCIAL SERVICE	REQUIRED DOCUMENTATION	REQUIRED CUA FEES
Guided Day Hiking/Jogging	All Hiking/Jogging guides must possess a valid 40 hour basic first aid certificate plus adult CPR. A valid Wilderness First Responder first aid certificate plus adult CPR or more advanced first aid such as an	\$250.00

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	Emergency Technician certification are also accepted and encouraged.  • Guides must be trained in basic safety and resource protections, Leave No Trace principles, park rules and regulations and in the requirements of the CUA.	
Guided Horseback riding	<ul> <li>All horseback guides must possess a valid 40 hour basic first aid certificate plus adult CPR. A valid Wilderness First Responder first aid certificate plus adult CPR or more advanced first aid such as an Emergency Technician certification are also accepted and encouraged.</li> <li>Guides must be trained in basic safety and resource protections, Leave No Trace principles, park rules and regulations and in the requirements of the CUA.</li> </ul>	\$250
Art or photography workshops		\$250
Other Workshops (i.e. Yoga)	Determined based on the activity being permitted	\$250

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