State Parks, Forests and Historic Sites

Special Use Permit Application

In order to apply for a Special Use Permit, please complete the following application and return it via email to specialusepermits@dep.nj.gov. The appropriate Park office will then contact you regarding submission of the non-refundable application fee. If applying for an event at Liberty State Park, please send the completed application directly to libertystateparkpermits@dep.nj.gov. Note: An event is not approved until a final permit is issued and signed by all parties; additional fees may be required to obtain final approval.

| | Applicati | on Fee: (Pleas | e check the box that applies) | | | | | | | |
|---------------------|-----------------------------|----------------|--|---|--|--|--|--|--|--|
| | | | Out-of-State Commercial Out-of-State Non-Commercial | \$200.00 □ \$75.00 □ | | | | | | |
| APPLICANT NAME: | 2 | | | | | | | | | |
| COMPANY / ORGANIZAT | ION: | | COMPANY / ORGANIZATION WEB | SITE: | | | | | | |
| TYPE OF EVENT: | PE OF EVENT: NAME OF EVENT: | | | | | | | | | |
| ADDRESS: | | CITY: | STATE: | ZIP: | | | | | | |
| PHONE: | CE | ELL: | FAX: | | | | | | | |
| EMAIL: | | | | | | | | | | |
| | | | | Service Code Waiver requests for generate works. Attach separate page(s) if needed. | | | | | | |

LIST PREFFERED DATE(S) AND TIME(S) OF EVENT AND ANY SETUP AND/OR BREAKDOWN DAYS REQUIRED (Park will confirm date based on availability)

| 1 | 2 | | 3 | | | |
|---|--------|--------|--------|--|--------|--------|
| (Date) | (Time) | (Date) | (Time) | | (Date) | (Time) |
| PROPOSED LOCATION OF | EVENT: | | | | | |
| ESTIMATED ATTENDANCE | | | | | | |
| ARE YOU FAMILIAR WITH | No 🗆 | | | | | |
| WILL THERE BE AN ADMISS | No 🗆 | | | | | |
| WILL YOU HAVE A PRODUCTION / SPECIAL EVENT COMPANY? Yes 🗆 | | | | | | |
| DOES YOUR SPECIAL EVE | No 🗆 | | | | | |
| DOES YOUR EVENT INCL | No 🗆 | | | | | |
| NAME OF BOAT: | LENG | ГН: | DRAFT: | | | |

The applicant by his or her signature certifies that: 1. All the information given is correct. Giving false information will result in the denial or revocation of a permit. 2. All rules and regulations listed under NJ State Park Service Code N.J.A.C. 7:2 (<u>https://www.nj.gov/dep/rules/rules/njac7_2.pdf</u>) governing the use of State Park property and facilities are understood and will be fully complied with by the applicant. 3. The applicant, while using the facilities made available by the State of New Jersey, will not discriminate on the basis of race, color, religion, sex, national origin, age or disability. 4. Applicant has reviewed the Special Use Permit Guidelines and agrees to provide a Certificate of Insurance meeting or exceeding the minimum requirements detailed in Section C. 5. Applicant is aware that information provided on this application may be subject to review and inspection under the Open Public Records Act (N.J.S.A 47:1A-1 (<u>www.state.nj.us/grc/pdf/act.pdf</u>).

NAME OF APPLICANT:__

SIGNATURE OF APPLICANT: ____

DATE:



New JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION, State Parks, Forests and Historic Sites



Internal Use Only: **PERMIT#**