OMB Control No. 1018-0102 Expires 05/31/2025



## COMMERCIAL ACTIVITIES SPECIAL USE PERMIT APPLICATION

## FISH A WHIDLIFE SERVICE

## National Wildlife Refuge System

Refuge Name:	For Official Use Only:
Address:	Approved Permit #:
Attn: (Refuge Official)	Station #:
E-Mail:	Permit Term: from to
Phone #:	
Note: We do not require all information for each use. See instruction to determine applicability of a particular item.	ons at the end of the notice and contact the refuge
1a) Identify the type of Permit you are applying for: New O Renew	ewal OModification Other O
1b) Have you applied, or do you intend to apply, to any other refuges for	for this same activity? O Yes O No
1c) If yes, which refuges?	
Applicant Information	
2) Full Name:	3) Title:
4) Business Name:	
5) Physical Address:	
City/State/Zip:	
6) Mailing Address: (if different than above)	
City/State/Zip:	
7) Business Phone #: 8) Busin	siness Fax #:
9) E-mail:	10) Business Tax ID #:
11a) Within the past 5 years, has the company (entity), its owners, or an refuge, been convicted, pled nolo contendere, forfeited collateral, or are Federal, or local law, or regulations related to fish and wildlife or permit a 11b) If you answered "YES" to question #11a, provide the individual's na action taken for each violation.	re currently under charges for any violations of any State, t activities? Yes No