National Park Service Yellowstone National Park P.O. Box 168

Yellowstone National Park, WY 82190 (307) 344-2722 or (307) 344-2115



Application for Special Use Permit Commercial Filming/Still Photography

Please supply the information requested below. **Attach additional sheets, if necessary, to provide required information**. A nonrefundable processing fee of \$300 must accompany this application unless the requested use is an exercise of a First Amendment right. You must allow at least 10 business days to process your request; see additional filming guidelines on the park's website. You will be notified of the status of the application and the necessary steps to secure your final permit. Your permit may require the payment of cost recovery charges. Proof of liability insurance naming the United States of America as also insured is required.

Applicant Name:	Applicant Company:
Street/Address:	Tax ID #:
City/State/Zip Code	Street/Address:
Country:	City/State/Zip Code
	Country:
Telephone #:	Contact name:
Cell phone #:	Telephone #:
Fax #:	Fax #:
Email:	Email:
	Website:
Project name:	Telephone #:
Location manager:	Cell phone #:
	Email:
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TYPE OF PROJECT: Still photography video/motion picture/film

Detailed description of onsite activities: (attach additional pages as necessary)

LOCATION SCHEDULE:

Each date and each location must have an individual entry – use additional pages as necessary.

DATE	LOCATION	Start Time	End Time	Filming talent or in thermal areas?	Activity: Set-Up/ Film / Non-Filming /Breakdown	# of cast & crew*
*number	includes all individuals	present a	at the film	ing location	<u> </u>	<u> </u>
	mprises anyone in front dents, presenters, park v					
Do you in	tend to utilize talent?	Yes	No			
If yes, pro	vide a full description of v	vho they a	re and hov	v they will be uti	lized:	
Itemized li	st of equipment: be as sp	ecific as p	ossible, o	nly items listed o	on this application will	be considered
ELECTRI	CAL REQUIREMENTS: ((explain)				
Generator	r(s) No	Yes, qua	antity	size _		
Lighting: Explain:	None Refle	ctors only	Yes	s (allowed during	g daylight or in approv	red buildings)

CAMERAS (check all that apply)

Car mount

Portable crane

Hand Tripod Dolly Dolly w/track footage Crane or jib arm Arm footage

Camera car, shot maker, or process trailer

OPERATIONAL INFORMATION:

Vehicles: NPS Form 10-932 rev 04/2016

Number of Cars,	SUVs or light p	ick-up trucks			
Please					
list:					
Number of Vehic	cles greater than	n a 10,000 lbs. (class	3 or higher)	
NOTE: Large or	oversized vehic	les may not be able t	o be accomi	modated or additional steps	may need to
be taken to ensur	e that no damaç	ge to park resource o	occurs.		
SPECIAL ACTIVI	ITIES				
STOCK Use:					
Number and type	of animal:	Metho	od of transpo	ortation:	
Staging/corralling	needs (attach p	olan if necessary):			
AIRCRAFT:	No	Yes (explain)			
NOTE: All aircraft SPECIAL EFFEC		ands should be listed Yes (ider	_	the park will not be allowed	d.
Effects Technicia	n Name:		_ Phone #		
License # (if appli	cable)		_ Permit #	(if applicable)	
STUNTS:	No	Yes (explain)			
Coordinator		Phone #		Email	
Any other unusua	ıl or hazardous a	activities?	No	Yes (explain)	
Have you physica	ally visited this p	ark? Y	N		
When answering	yes to any of	the following quest	ions, provid	de additional information:	
Do you have, or a agency for this		for, a permit with an	other Federa	al, State or local Y	N
Have you had pre	evious permits fr	om the National Parl	k Service?	Υ	N
Have you ever be	en denied a pe	rmit or had a permit r	evoked?	Υ	N
Have you forfeited	d a bond or othe	er security for filming	on Federal	Υ	N
lands? NPS Form 10-	-932 rev 04/2016			OMB Control No. 1024-002 Expires 08/31/2016	26

Person on location Name: Phone: Person on location Name: Phone: Person at the comp Name: Email: I hereby state that the information or false so	Cell Phone: responsible for coord Cell Phone: Dany office to contact to Tit are above information give statements have been goity to represent the application.	rence to all terms & conditions or Title: Email: linating activities with the NPS: Title: Email: for follow up information and bill le: ren is complete and correct, and that liven. All estimates are reliable to t licant/production company and the Title	ling: Phone: at no false or he best of my project descr	misleading knowledge a ibed above.
Person on location Name: Phone: Person on location Name: Phone: Person at the comp Name: Email: I hereby state that the information or false s	Cell Phone: responsible for coord Cell Phone: cany office to contact to Tit te above information give statements have been g	Title: Email: linating activities with the NPS: Title: Email: for follow up information and bill le: ren is complete and correct, and tha liven. All estimates are reliable to t	ling: Phone: at no false or he best of my	misleading valuedge a
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Person on location	·	Title:		
Person on location			-	
CONTACTS:				
	ich additional sheets if r		·	
	·	ontact information) of all other indivi		nies involved
Are you applying for	this permit on behalf of	another person or company? Y	N	
PROJECT ADMINIS	STRATION:			
request including: 9	story boards or scripts,	pages with information useful in set construction, parking plan, seculuse, use of any building and site of	urity plans, sa	
Do you anticipate an	y security concerns? If	yes, explain.	Υ	N
	tise or issue a press rel	lease about this activity?	Υ	N
Do you plan to adver				
filming permit		t you which involve a commercial	Y	N

Note: this is an application only, and does not serve as permission to conduct special activity in the park. The information provided will be used to determine whether a permit will be issued. Completed application must be accompanied by an application fee in the amount of \$300. Payment must be made by credit card – see payment form available on our website.

If your request is approved, a permit containing applicable terms and conditions will be sent to the person designated on the application. The permit must be signed by the responsible person and returned to the park for final approval by the Park Superintendent.

NOTICES

Privacy Act Statement: The Privacy Act of 1974 (5 U.S.C. 552a) provides that you be furnished with the following information in connection with information required in this application. This information is being collected to allow the park manager to make a value judgment on whether or not to allow the requested use. Applicants are required to provide their social security or taxpayer identification number for activities subject to collection of fees and charges by the National Park Service (31 U.S.C. 7701). Information from the application may be transferred to appropriate Federal, State, and local agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

Paperwork Reduction Act Statement: We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) to provide the park managers the information needed to decide whether or not to allow the requested use. All applicable parts of the form must be completed in order for your request to be considered. You are not required to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

Estimated Burden Statement: Public reporting burden for this form is estimated to average 30 minutes per response including the time it takes to read, gather and maintain data, review instructions and complete the form. Direct comments regarding this burden estimate or any aspects of this form to the Information Collection Clearance Officer, National Park Service, 1849 C Street NW (1237), Washington, D.C. 20240.

Title 18 U.S.C. Section 1001 makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or fraudulent statements or representations as to any mater within its jurisdiction.