SPECIAL PURPOSES PERMIT
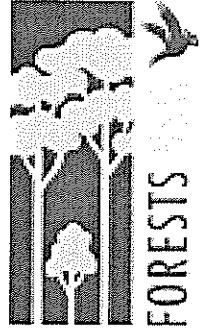
APPLICATION FORM

1. **Name of Applicant** (Use name of registered company or partnership if appropriate).

_____

_____

2. **Address** (use registered business address if appropriate)

                             Town:_____   **Postcode:**_____

Phone:_____   **Mobile:**_____   **Email:**_____

3. **Contact Person** _____   **Phone:** _____

4. **Type of Activity** (e.g: 4WD/mountain bike/horse endurance riding, rallying, etc)

_____

5. **Location and/or Route** (attach a map showing the proposed route where appropriate)

_____

_____

_____

_____

6. **Date of event** (and/or frequency if appropriate - Daily, Weekly, Monthly, etc)

_____

_____

7. **How many vehicles /participants will be involved?**

_____

_____

8. **Special Conditions Requested:**

_____

_____

9. For commercial operations, please provide evidence of **Workers Compensation Insurance and Comprehensive Motor Vehicle Insurance** for associated vehicles.

10. For commercial activities please provide evidence of **accreditation of trainers, assessors and/or supervisors of the activity.**

11. **For all activities, please provide evidence of Public Liability Insurance or a 'Hold Harmless Agreement' indemnifying Forests NSW.**

Public liability Insurance Details:

Company: Policy No: Expiry Date:

Signed: _____   Position: _____

12. **For all activities**, please complete medical evacuation and emergency plan

13. I/we acknowledge that the forestry area covered by the application for a written authority (Special Purposes Permit) may be declared public land for hunting pursuant to the *Game and Feral Animal Control Act 2002*, in which event legitimate hunting activity could be conducted in that area.

NOTE:
For all dangerous activities, a waiver and indemnity form may be required to be completed by each participant and a risk warning provided in accordance with the provisions of the Civil Liability Act 2002.

I/we hereby declare that the information provided is correct to the best of my/our understanding.

I/we will abide by all permit conditions.

Signature: _____

Date: _____

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OFFICE USE

Recommend that activity be issued with

(i)   Special Purposes Permit; or   (cross out which

(ii)   Letter of Authority.   is not applicable)

Fee Structure Proposed:

1. Admin fee: _____   4.   Supervision fee: _____

2. Usage fee: _____   5.   Work on assignment: _____

3. Inspection fee: _____   6.   Bond in Advance: ($): _____

Approved: _____

Date: _____