SPECIAL RECREATION PERMIT
POST USE SUMMARY REPORT

Permit Number _____ Permit Area_____
Company Name _____ Reporting period _____ to _____

1. **Total User Days:**
   To determine the total user days, add the user days indicated on the Trip Logs for all day trips and overnight trips.
   a) Clients, Total User Days ……. _____
   b) Staff, Total User Days ……. _____
   c) Total User Days …….. _____

2. **Permit Fee Calculation**
   a) Total Receipts …… $_____
   b) Permit Fee Rate (3%) …… _____x 0.03_
   c) Actual Use Fee [Multiply Line 2b) x Line 2a), enter result here] …… $_____
   d) Credit from Previous Payments …… $_(-)_____
   e) Subtract Credit from Actual Use Fee [Line 2c) – Line 2d] …….. $_____
   f) **BALANCE DUE,** If Line 2e) is MORE than zero, that is your permit fee balance due … $_____
   Please submit payment in full for the Balance Due with your post use report.
   g) **CREDIT DUE,** If Line 2e) is LESS than zero, that is the amount you overpaid …… $_____
   Overpayment will be credited towards next year's permit fee unless a refund is requested in writing; A request for refund may be included with the Post Use Report in the space for comments below. If your actual use fee is less than the minimum annual fee of $95, only the amount paid over $95 will be credited.

3. Please describe all accidents or injuries which occurred during the season (date, location, actions taken)

_____
_____
_____
_____
_____

4. Please describe any management problems associated with your permit, the use of public land or related issues you feel need management attention.

_____
_____
_____
_____
_____

4. Other Comments:

_____
_____
_____
_____
_____

Permittee's Signature _____ Date _____

Permittee's Name _____