

SRP #  
(Agency Use Only)

**SPECIAL RECREATION PERMIT  
GUIDING & OUTFITTING OPERATING PLAN**

*The Operating Plan must accurately identify the use and activities, the use area, and the use seasons of the operations proposed on public land. Make sure the information is complete and that all proposed services, facilities and dates of use are described. Failure to respond to any of the items, or inaccurate disclosures may result in delays in processing or rejection of the application. This outline is provided for convenience only, it is not a required form, and other formats are acceptable. Additional pages may be attached as necessary.*

**I. COMPANY INFORMATION.**

A. Company Name and Address

B. Type of Company: \_\_\_Sole proprietorship \_\_\_Partnership \_\_\_Gov. Agency

\_\_\_Corporation (*Attach copies of Articles of Incorporation, Corporate Certificate from the Colorado Secretary of State, and any other business license issued by the State of Colorado or its political subdivisions.*)

C. Date Company Established: \_\_\_\_\_

Number of Years with Current Owner(s):

D. Name of Owner(s)/Partners:

\_\_\_\_\_

E. Telephone Number: \_\_\_\_\_ Emergency Telephone Number:

FAX Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Web Site \_\_\_\_\_

Name of Person Authorized to conduct business with BLM concerning this permit:

## II Purpose and Need for the Permit

- A. Describe and Demonstrate the need for the service or activity to be offered:
- B. Describe how the activity enhances the opportunity for visitors to enjoy public lands and their recreational experience:
- C. Describe how the service or activity helps meet the BLM management objectives:
- D. Show the proposed use area is suitable for and not in excess of the size needed to accomplish the purpose

## III Conduct of Your Service or Activity

- A. Activity Parameters
  - 1. Maximum and Minimum Group Size.
  - 2. Number of Staff and Ratio of Staff to Customer:
  - 3. Trip length and/or dates of activity: \_\_\_\_\_
  - 4. Activities to be engaged in including the equipment, vehicles or livestock to be used and services/activities offered.
  - 5. Methods and means of transportation, including the numbers and types of vehicles, including street legal vehicles, ATV's, boats, aircraft, and livestock.
  - 6. Describe any vending, rentals or sales of consumer products or services.  
*If none, check here [ ]*

### B. Operations Area

- 1. Provide a map at a scale of 1:100,000 of the public land operations area. Additional, more detailed maps may be required.
- 2. Include on the map, all staging areas, camping locations, attraction sites and routes of travel.

### C. Environmental Protection and Conservation of Natural Resources

- 1. How will your operations comply with the environmental protection stipulations of the permit?
- 2. How will your operations incorporate *Leave No Trace* and *Tread Lightly* principles?

D. Health, Safety and Sanitation:

1. Describe the first aid (including universal precautions) and evacuation equipment that will be present during your operations:
2. What emergency communications will be available?
3. What is your emergency evacuation plan?
4. What environmental hazards exist - exposure, flash flood, avalanche, weather, fauna, terrain, etc.? How do you manage these hazards?
5. What hazards are inherent to the activity? How are they managed?
6. What safety equipment is used and how is it inspected and maintained?
7. What are your provisions for toilet facilities, dealing with human waste and washing? How will you contain and remove trash and garbage?
8. Demonstrate how you will comply with other federal, state and local laws pertaining to your activity, including but not limited to:
  - a. If you are going to serve any food or beverage to a customer, show compliance with Colorado State Law regarding food service sanitation
  - b. If the activity will involve more than 500 people at a single activity or event, show how you will comply with Colorado State Law regarding mass gatherings.
  - c. If your activity involves the use of water craft, show how you will comply with Colorado State Boating Laws.
  - d. If you are providing in-patient or residential Wilderness Therapy for persons under age 18, show compliance with State Law for wilderness therapy programs.
9. If firearms are involved, what are the provisions for safe storage, transportation and use?
10. Does your operation use livestock for riding or packing? If so, identify the kind and number of animals to be used. Also, identify how the animals will be fed, watered and confined when not being used.

E. Staff Experience and Training

1. What level of first aid training is required?  
\_\_\_\_\_
2. What level of training or experience for the specific activity is required?  
*(attach current copies of required certifications)*
3. What is your knowledge and experience with the operations area?
4. If your activity involves visitation to cultural sites, pre-historic and /or historic sites, demonstrate a basic knowledge of the laws and regulations dealing with protection and preservation of antiquities, objects of historical interest and graves. Demonstrate a factual knowledge of the sites to be visited.

5. Have any of your company owners or employees been convicted of a federal, state or local violation regarding guiding, outfitting, resources protection, or the activity proposed for this permit? If so, provide details.

6. Has your company or its owner/ operators ever been denied a permit, had a permit revoked, or surrendered a bond related to a permit for operations on BLM, National Park Service or US Forest Service Administered Lands? If so, provide details.

F. Customer Information.

*Attach a copy of the customer contract including any risk acknowledgment and/or waivers.*

*Attach a price list.*

G. Other required permits.

1. List any permits required by other federal, state or local agencies to conduct your activity

2. Permissions or contracts required to use private lands you do not own or control.

**IV. CERTIFICATION**

I certify that the information given by me in this proposed Operating Plan is true, accurate, and complete to the best of my knowledge. I acknowledge that I (we) am (are) required to comply with the requirements and stipulations on Form 2930-1 and any additional stipulations which the Field Manager may deem necessary. I further understand that providing false information, or failure to keep this Operating Plan or other permit requirements up to date are grounds for probation, suspension or revocation of the permit.

Signature \_\_\_\_\_ Date \_\_\_\_\_