

## **State Parks Special Use Permit Application**

Please fill in all areas below as completely as possible. If a question does not apply, use N/A. Allow up to thirty days for processing. Please enclose a \$25 nonrefundable processing fee for each event, made payable to the Treasurer of Virginia.

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Shenandoah River State Park, 350 Daughter of Stars Dr., Bentonville, VA 22610, or to <a href="mailto:Shenandoahriver@dcr.virginia.gov">Shenandoahriver@dcr.virginia.gov</a>.

Permit Requested by:
Name of Organization:
Represented by:
Title:
Street Address:
City, State and Zip:
Telephone: ()
Email:
Fax:
Name of Event:
Location (State Park/Area in Park):
Date (Month/Day/Year):, 20
Time Beginning: Ending:
Number of people involved or attending:
Necessary to set up in advance? Yes 🗌 No 🔲 When?
Any exhibits or displays? Yes 🗌 No 🔲 Number and type:
Any special requirements? (show type, location, number and responsibility for cost and
set up)
Electricity:

Water:			
Signs:			
Stage or Platform:			
Public Address System:			
Port-a-Johns:			
Picnic Tables:			
Any special personnel? (show type, location, number and responsibility for obtaining			
cost)			
Law Enforcement:			
Parking Attendants:			
Rescue Squad (First Aid):			
Fire Department:			
Guest(s) of Honor (Who/How Identified):			
Entertainment (Who/When/Location):			
Items to be sold (Type/By):			
Sales Tax Arrangements (Type/Collected by/Prizes):			
Health Dept Requirements for Food Handlers (Type/By):			
Control Point (Type/Location/Who):			
Traffic Flow Control (Type/Location/Who):			
Potential Safety Hazards (Type/Location/Who):			
Registration or Attendance Fees: Yes 🗌 No 🗌			
Amount: Collected By:			
Livestock or animals (Type/Number/Location):			
Clean up (When/By):			
Please summarize below the planned event and all involved activities:			
Signature: Date:			
Comments:			
Signature: Date:			