



Commercial Use Authorization - Application Request Form

Name: _____ Fed Tax ID #: _____

Company Name: _____

Mailing Address: _____

City/State/Zip: _____

Physical Address (if different from mailing address): _____

City/State/Zip: _____

Business Phone: _____ Fax: _____

Cell Phone: _____ Other: _____

Email: _____ Website URL: _____

Business is being conducted as (check one):

- Sole Proprietorship Partnership Corporation Limited Liability Company

Other: _____

Person(s) authorized to sign on behalf of the business (name and title): _____

Type of CUA requested (check all that apply):

- | | | |
|---|---|--|
| <input type="checkbox"/> Vessel Caretaking | <input type="checkbox"/> Minor Vessel Repair | <input type="checkbox"/> Launch, Retrieval & Boat Hauling – Vessels & Houseboats (Privately Owned Only) |
| <input type="checkbox"/> Guided Hunting | <input type="checkbox"/> Guided Kayak/Canoe & Instruction | <input type="checkbox"/> Guided Fishing – Colorado River |
| <input type="checkbox"/> Guided Hiking/Backpack | <input type="checkbox"/> Guided Hiking/Backpack w/ Packstock | <input type="checkbox"/> Guided Fishing – Lake Powell |
| <input type="checkbox"/> Guided Scuba & Instruction | <input type="checkbox"/> Land-Based Tours (Backcountry Roads) | <input type="checkbox"/> Waterski/Wakeboard Instruction |
| <input type="checkbox"/> Marine Salvage | <input type="checkbox"/> Guided Hiking/ Canyoneering | <input type="checkbox"/> Stand-Up Paddleboard Instruction |
| <input type="checkbox"/> Photography Workshop- Land Based | <input type="checkbox"/> Photography Workshop- Water Based | |

Description of Services to be provided under the CUA: _____

Locations where services will be provided (check all that apply):

- | | | | |
|----------------------------------|--------------------------------------|--------------------------------------|--|
| <input type="checkbox"/> Wahweap | <input type="checkbox"/> Stateline | <input type="checkbox"/> Bullfrog | <input type="checkbox"/> Halls Crossing |
| <input type="checkbox"/> Hite | <input type="checkbox"/> Backcountry | <input type="checkbox"/> Lake Powell | <input type="checkbox"/> Lees Ferry – Guided Fishing Only |

COMMENTS: _____

I certify the information provided on this form is true and accurate to the best of my knowledge.

SIGNATURE: _____ DATE: _____

Mail this request form to:

National Park Service
Glen Canyon National Recreation Area
Attn: CUA Program
P.O. Box 1507
Page, AZ 86040-1507

or Fax: 928-608-6326