

# NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

## Division of Lands and Forests

625 Broadway, 5th Floor, Albany, New York 12233-4250  
P: (518) 402-9405 | F: (518) 402-9028 | Landsforests@dec.ny.gov  
www.dec.ny.gov

## **TEMPORARY REVOCABLE PERMIT** **APPLICATION INSTRUCTIONS**

### **\$25 NON-REFUNDABLE APPLICATION FEE**

A twenty-five dollar (\$25) non-refundable application fee in the form of a check or money order should be made payable to *NYS Department of Environmental Conservation* and submitted to the appropriate DEC Regional office (see page 4). *Expedited TRPs, educational institutions and federal, state, county and local governments are exempt from this fee.*

### **APPLICATION DEADLINES**

In order to ensure that a TRP is issued on time, please submit the attached application to the DEC regional office by the requested time frame. For **Research TRP** activities within the Forest Preserve, the DEC should receive the application **by February 28th** for work to be performed that year. For **TRP Renewals** or **Extensions** for an activity within the Forest Preserve, the application should be received by DEC **at least 60 days in advance** of the needed TRP date. **All other TRPs**, the application should be received by DEC **at least 30 days in advance** of the needed TRP date.

### **LOCATION MAP**

A map of the State land unit depicting the area on the unit where the requested TRP activity is to take place must be included with the application. To locate and print a map of the State land unit, go to **Google Maps** - <http://maps.google.com>, search for the State land unit name or town where unit is located, turn on satellite imagery, zoom in, print map, and mark the location of where the TRP activity is requested to take place.

### **CERTIFICATE OF LIABILITY INSURANCE**

- *sample Acord® 25-S form on reverse side* -

A Certificate of Liability Insurance is required for all Routine & Non-Routine TRPs. **In addition, a copy of the applicants Insurance Endorsement is required for Non-Routine TRP's.** Upon receipt and review of a TRP application, a DEC representative will notify applicant whether insurance is required. If required, applicant must indemnify the State of New York against any and all claims for injury to property or person or death arising out of or relating to the operations of the applicant/permittee under the TRP. Applicant must submit a current *Acord® 25-S (Commercial Certificate of Liability Insurance)* form. *\*Executive state agencies (DOT, OPRHP, SUNY) and federal agencies are exempt from providing certificate.* **Certificate of Liability Insurance must contain the following:**

- 1) Applicant or organization name and address must be the same as "Insured" name and address;
- 2) "The People of the State of New York, Its Officers, Agents and Employees" must be listed as "Additional Insureds;" and
- 3) Not less than a Combined Single Limit for Bodily Injury and Personal Injury Liability of \$1,000,000 per occurrence and \$2,000,000 aggregate; and \$50,000 for Property Damage.

The applicant will be responsible for maintaining insurance coverage for the full duration of the TRP. *\*If insurance coverage expires prior to the expiration of the TRP, the applicant must provide the Department with a **minimum of 30 days** written notice prior to the cancellation of coverage, or the TRP will be deemed invalid.*

### **PERFORMANCE SECURITY**

Performance security may be required for a TRP where the Regional Manager determines that the TRP activity could have a potentially adverse environmental or public safety impact, could require site restoration, or is necessary to ensure full compliance with applicable terms and conditions.





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>SAMPLE</b>	CONTACT NAME:	
	PHONE (A/C, No. Ext):	FAX (A/C, No):
E-MAIL ADDRESS:		
PRODUCER CUSTOMER ID #:		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED  TRP applicant or organization name & address must match insured name & address	INSURER A :	
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

**COVERAGES**

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	Minimum Recommended
	<b>GENERAL LIABILITY</b>			Policy Number	Date(s) of requested TRP activity must be within the Policy coverage period, in order for TRP to be valid.		EACH OCCURRENCE	1,000,000
<input type="checkbox"/>	COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	50,000
<input type="checkbox"/>	CLAIMS-MADE <input type="checkbox"/> OCCUR						MED EXP (Any one person)	
<input type="checkbox"/>							PERSONAL & ADV INJURY	1,000,000
<input type="checkbox"/>							GENERAL AGGREGATE	2,000,000
<input type="checkbox"/>							PRODUCTS - COMP/OP AGG	
	<b>AUTOMOBILE LIABILITY</b>							
<input type="checkbox"/>	ANY AUTO					COMBINED SINGLE LIMIT (Ea accident)		
<input type="checkbox"/>	ALL OWNED AUTOS					BODILY INJURY (Per person)		
<input type="checkbox"/>	SCHEDULED AUTOS					BODILY INJURY (Per accident)		
<input type="checkbox"/>	HIRED AUTOS					PROPERTY DAMAGE (Per accident)		
<input type="checkbox"/>	NON-OWNED AUTOS							
	<b>UMBRELLA LIAB</b>							
<input type="checkbox"/>	EXCESS LIAB	<input type="checkbox"/>	OCCUR			EACH OCCURRENCE		
<input type="checkbox"/>		<input type="checkbox"/>	CLAIMS-MADE			AGGREGATE		
<input type="checkbox"/>	DEDUCTIBLE							
<input type="checkbox"/>	RETENTION \$							
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>							
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/>	Y / N	N / A		WC STATUTORY LIMITS	OTHER	
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. EACH ACCIDENT		
						E.L. DISEASE - EA EMPLOYEE		
						E.L. DISEASE - POLICY LIMIT		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

The People of the State of New York, Its Officers, Agents, and Employees are named as additional insureds.

**CERTIFICATE HOLDER****CANCELLATION**

NYS DEC (Regional Office Address)	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE

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ACORD 25 (2009/09)

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\* Versions updated periodically, please submit the most recent version.

**\*\*\*SAMPLE ENDORSEMENT\*\*\***

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL INSURED – CERTIFICATE HOLDERS**

This endorsement modifies insurance provided under the following:

**COMMERCIAL GENERAL LIABILITY COVERAGE PART**

**SECTION II – WHO IS AN INSURED** is amended to include any Certificate Holder, identified as an additional insured, on a Certificate of Insurance issued by (your insurance company name here) or our authorized representative, but only for liability arising out of the negligence of the named insured.

The limits of insurance applicable to these additional insureds are the lesser of the policy limits of those limits specified in a contract or agreement. These limits are inclusive of and not in addition to the limits of insurance shown in the declarations.

**YOU MUST SUBMIT THE ENDORSEMENT ALONG WITH  
THE CERTIFICATE OF LIABILITY INSURANCE FORM (ACORD 25)**

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## TEMPORARY REVOCABLE PERMIT

### ADDITIONAL PERMITS & APPROVALS

Certain activities or events may require additional permits or permissions, which the applicant will be responsible for obtaining. Below are some of the additional permits commonly needed for requested activities on State land. Other DEC permit requirements can be found at:

<https://www.dec.ny.gov/63.html>.

#### CAMPING PERMITS

For group sizes of 10 or more individuals or camping for more than three (3) days in one place where no other large, organized group activities will occur should contact the Regional New York State Forest Ranger to obtain a camping permit. See <http://www.dec.ny.gov/outdoor/41282.html>.

#### CROWN POINT STATE HISTORIC SITE (CPSHS) AND JOHN BROWN FARM STATE HISTORIC SITE (JBFSHS)

Applications for proposed activities on the CPSHS or the JBFSHS will need to be submitted through the appropriate Office of Parks, Recreation and Historic Preservation (OPRHP) contact listed at the bottom of the following page.

#### RESTRICTED MOTOR VEHICLE ACCESS PERMITS FOR PEOPLE WITH MOBILITY IMPAIRMENTS (CP-3 PERMITS)

People with mobility impairments may apply for this type of permit which allows them additional motor vehicle access to certain areas on State land that are normally closed to motorized use. To learn more, see [www.dec.ny.gov/outdoor/34035.html](http://www.dec.ny.gov/outdoor/34035.html).

#### FISH, WILDLIFE & MARINE SPECIAL LICENSES & PERMITS

DEC issues licenses for "special uses" involving New York's fish, wildlife and marine resources. These special licenses assist DEC and the public in maintaining compliance with State laws and DEC regulations for the purpose of protecting the quality, quantity and welfare of New York's fish and wildlife resources. To learn more, see <http://www.dec.ny.gov/permits/359.html> or contact DEC's Special Licenses Unit, (518) 402-8985.

#### CONSTRUCTION ACTIVITIES NEAR PROTECTED STREAMS OR WETLANDS

Activities that may impact a protected stream or wetland, defined under Articles 15, 24, and 25 of the Environmental Conservation Law. For additional information, please see DEC's public website: Wetlands Program - [www.dec.ny.gov/lands/305.html](http://www.dec.ny.gov/lands/305.html), Freshwater Wetlands - [www.dec.ny.gov/permits/6058.html](http://www.dec.ny.gov/permits/6058.html).

#### RIGHTS-OF-WAY AND EASEMENTS

For the use and maintenance of rights-of-way or easements on Forest Preserve or State Forests, a deed or agreement is required to verify the applicant's interest. This is not required for temporary access on State Forests on existing roadways, farm roads, traditional beach access areas and the like.

#### PERMISSION TO ACCESS ADJACENT PRIVATE PROPERTY

For an activity requesting trail construction or maintenance leading to a private property, the applicant must provide DEC with the adjacent property owner's written permission to allow the trail on his/her property.

*\*Trails leading from private land to State land or a Conservation Easement for the benefit of the private landowner or their invitees will not be permitted.*

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## CONTACTS

DEPARTMENT OF ENVIRONMENTAL CONSERVATION	
<p><b>DEC Region 1 - Long Island</b>  <i>Nassau &amp; Suffolk Counties</i>  <b>SUNY at Stony Brook, 50 Circle Rd, Stony Brook, NY 11790</b>                      John Wernet, <a href="mailto:john.wernet@dec.ny.gov">john.wernet@dec.ny.gov</a>                      (631) 444-0285</p>	<p><b>DEC Region 6 - Western Adirondacks, Upper Mohawk Valley &amp; Eastern Lake Ontario</b>  <i>St. Lawrence County</i>  <b>190 Outer Main Street, Suite 103, Potsdam, NY 13676</b>                      Henry Dedrick, <a href="mailto:henry.dedrick@dec.ny.gov">henry.dedrick@dec.ny.gov</a>                      (315) 274-3342</p> <hr/> <p><i>Jefferson &amp; Lewis Counties</i>  <b>7327 State Route 812, Lowville, NY 13367</b>                      Keith Rivers, <a href="mailto:keith.rivers@dec.ny.gov">keith.rivers@dec.ny.gov</a>                      (315) 376-3521</p> <hr/> <p><i>Herkimer &amp; Oneida Counties</i>  <b>225 North Main St, Herkimer, NY 13350</b>                      Scott Healy, <a href="mailto:scott.healy@dec.ny.gov">scott.healy@dec.ny.gov</a>                      (315) 866-6330</p>
<p><b>DEC Region 2 - New York City &amp; Staten Island</b>  <i>Bronx, Kings, New York, Queens, Richmond</i>  <b>1 Hunter's Point Plaza, 47-40 21st St, Long Island City, NY 11101</b>                      Timothy Wenskus, <a href="mailto:timothy.wenskus@dec.ny.gov">timothy.wenskus@dec.ny.gov</a>                      (718) 482-7087</p>	<p><b>DEC Region 7 - Central New York</b>  <i>Broome, Cayuga, Chenango, Cortland, Madison, Oswego, Onondaga, Tioga, Tompkins Counties</i>  <b>2715 State Highway 80, Sherburne, NY 13460</b>                      Christopher Sprague, <a href="mailto:christopher.sprague@dec.ny.gov">christopher.sprague@dec.ny.gov</a>                      (607) 753-3095 x216</p>
<p><b>DEC Region 3 - Lower Hudson Valley</b>  <i>Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester Counties</i>  <b>21 South Putt Corners Rd, New Paltz, NY 12561-1696</b>                      Mike Callan, <a href="mailto:michael.callan@dec.ny.gov">michael.callan@dec.ny.gov</a>                      (845) 256-3000</p>	<p><b>DEC Region 8 - Western Finger Lakes &amp; Lower Lake Ontario</b>  <i>Chemung, Genesee, Livingston, Monroe, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, Yates</i>  <b>7291 Coon Rd, Bath, NY 14810</b>                      Tad Norton, <a href="mailto:tad.norton@dec.ny.gov">tad.norton@dec.ny.gov</a>                      (585) 226-2466</p>
<p><b>DEC Region 4 - Capital Region</b>  <i>Albany, Columbia, Delaware, Greene, Montgomery, Otsego, Rensselaer, Schenectady, Schoharie</i>  <b>1130 North Westcott Rd, Schenectady, NY 12306-2014</b>                      Bill Schongar, <a href="mailto:william.schongar@dec.ny.gov">william.schongar@dec.ny.gov</a>                      (518) 357-2155</p>	<p><b>DEC Region 9 - Western New York</b>  <i>Allegany, Cattaraugus, Chautauqua, Erie, Niagara, Wyoming Counties</i>  <b>182 East Union St, Allegany, NY 14706</b>                      Pat Marren, <a href="mailto:patrick.marren@dec.ny.gov">patrick.marren@dec.ny.gov</a>                      (716) 851-7048</p>
<p><b>DEC Region 5 - Eastern Adirondacks &amp; Lake Champlain</b>  <i>Forest Preserve specific TRP requests</i>  <b>1115 NY Rt. 86, Ray Brook, NY 12983</b>                      Robert Daley, <a href="mailto:robert.daley@dec.ny.gov">robert.daley@dec.ny.gov</a>                      (518) 897-1276</p> <hr/> <p><i>State Forest specific TRP requests</i>  <b>232 Golf Course Rd., Warrensburg, NY 12885</b>                      Bryan Ellis, <a href="mailto:bryan.ellis@dec.ny.gov">bryan.ellis@dec.ny.gov</a>                      (518) 623-1275</p>	
OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION (OPRHP)	
<p>Crown Point State Historic Site  <b>21 Grandview Drive, Crown Point, NY 12928</b>                      Lisa Polay, <a href="mailto:lisa.polay@parks.ny.gov">lisa.polay@parks.ny.gov</a>                      Phone: (518) 597-4666</p>	<p>John Brown Farm State Historic Site  <b>115 John Brown Road, Lake Placid, NY 12946</b>                      Brendan Mills, <a href="mailto:brendan.mills@parks.ny.gov">brendan.mills@parks.ny.gov</a>                      Phone: (518) 523-3900</p>

