

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Division of Fish and Wildlife

625 Broadway, 5th Floor, Albany, NY 12233-4750

P: (518) 402-8924 | F: (518) 402-8925

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).

PRODUCER	SAMPLE	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	
	GENERAL LIABILITY			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
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC							PRODUCTS - COMP/OP AGG	\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$	
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$	
	<input type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
	<input type="checkbox"/> HIRED AUTOS							\$	
	<input type="checkbox"/> NON-OWNED AUTOS							\$	
	UMBRELLA LIAB						EACH OCCURRENCE	\$	
	<input type="checkbox"/> EXCESS LIAB						AGGREGATE	\$	
	<input type="checkbox"/> OCCUR							\$	
	<input type="checkbox"/> CLAIMS-MADE							\$	
	DEDUCTIBLE							\$	
	RETENTION \$							\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						<input type="checkbox"/> WC STATUTORY LIMITS	<input type="checkbox"/> OTHER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below						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.

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, Freshwater Wetlands - 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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DEPARTMENT OF ENVIRONMENTAL CONSERVATION	
TEMPORARY REVOCABLE PERMIT WILDLIFE CONTACTS	
<p><u>DEC Region 1 - Long Island</u> <i>Nassau & Suffolk Counties</i> SUNY at Stony Brook, 50 Circle Rd, Stony Brook, NY 11790 Region 1 Wildlife, wildlife.r1@dec.ny.gov (631) 444-0310</p>	<p><u>DEC Region 6 - Western Adirondacks, Upper Mohawk Valley & Eastern Lake Ontario</u> <i>Herkimer, Jefferson, Lewis, Oneida, & St. Lawrence County</i> 317 Washington St., Watertown, NY 13601 Andy MacDuff, andrew.macduff@dec.ny.gov (315) 785-2263</p>
<p><u>DEC Region 2 - New York City & Staten Island</u> <i>Bronx, Kings, New York, Queens, Richmond</i> 1 Hunter's Point Plaza, 47-40 21st St, Long Island City, NY 11101 Region 2 Wildlife, wildlife.region2@dec.ny.gov (718) 482-4922</p>	
<p><u>DEC Region 3 - Lower Hudson Valley</u> <i>Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester Counties</i> 21 South Putt Corners Rd, New Paltz, NY 12561-1696 Jeff Rider, jeffrey.rider@dec.ny.gov (845) 256-3098</p>	<p><u>DEC Region 7 - Central New York</u> <i>Broome, Cayuga, Chenango, Cortland, Madison, Oswego, Onondaga, Tioga, Tompkins Counties</i> 615 Erie Blvd. East, Syracuse, NY 13204 Region 7 Wildlife, R7Wildlife@dec.ny.gov (607) 753-3095</p>
<p><u>DEC Region 4 - Capital Region</u> <i>Albany, Columbia, Delaware, Greene, Montgomery, Otsego, Rensselaer, Schenectady, Schoharie</i> 1130 North Westcott Rd, Schenectady, NY 12306-2014 Mike Clark, Michael.clark@dec.ny.gov (518) 357-2355 Schenectady (607) 652-7367 Stamford</p>	<p><u>DEC Region 8 - Western Finger Lakes & Lower Lake Ontario</u> <i>Chemung, Genesee, Livingston, Monroe, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, Yates</i> 6274 East Avon-Lima Rd, Avon, NY 14414-9519 *Please specify "c/o Bureau of Wildlife" Region 8 Wildlife, R8wildlife@dec.ny.gov (585) 226-5380 Avon (607) 622-8274 Bath (585) 948-5182 Basom (315) 365-2134 Montezuma</p>
<p><u>DEC Region 5 - Eastern Adirondacks & Lake Champlain</u> <i>Clinton, Essex, Franklin, Fulton, Hamilton, Saratoga, Warren, & Washington</i> 1115 NY Rt. 86, Ray Brook, NY 12983 Paul Jensen, paul.jensen@dec.ny.gov (518) 897-1291</p>	<p><u>DEC Region 9 - Western New York</u> <i>Allegany, Cattaraugus, Chautauqua, Erie, Niagara, Wyoming Counties</i> 182 East Union St, Allegany, NY 14706 Anne Rothrock, Anne.rothrock@dec.ny.gov (716) 379-6392</p>

