

SPECIAL USE PERMIT APPLICATION

South Carolina State Park Service

Location:

Management Classification:

Please use attachments for any section where additional space is needed.

Applicant Name:

Organization (if applicable):

Address:

City:

State:

Zip:

Phone:

ext.

Fax:

e-mail:

Type of Use:

Detailed description of use:

Including set-up and breakdown time, please indicate duration of use:

Start date:

End date:

With regards to the actual *use* or *event*, indicate date(s) and times:

Estimated number of persons (include agents, participants, and/or attendees):

List facilities and describe areas to be used:

Will equipment, signs or other items be placed on the premises to support use? **Yes** **No**

**If yes,
explain:**

Will installation of utilities be required to accommodate use? **Yes** **No**

**If yes,
explain:**

Will any type of construction be necessary to accommodate use? **Yes** **No**

**If yes,
explain:**

Will any type of animal(s) be present in association with use? Yes No

If yes, explain:

Will any food, drink or alcoholic beverage be sold or made available to the general public during use? Yes No

If yes, explain:

Will any goods, services or memberships be sold in association with use? Yes No

If yes, explain:

Will any type of fee be charged in association with use? Yes No

If yes, explain:

This form should be accompanied by a non-refundable \$25.00 application fee. Applicant understands that this document does not create an agreement or contract, and that approval of this request, if granted, may require alterations and/or deletions of the information provided, as well as additional requirements on the part of the requestor.

Signature: _____

Date:

After reviewing the Special Use Permit policy, please submit this signed application and application fee to:

“ATTN: Park Manager” at the address of the park where the use is being requested.