



Commonwealth of the Northern Mariana Islands  
Department of Lands and Natural Resources



***Division of Fish and Wildlife***  
***Smiling Cove Marina Office Tel. (670) 323-6070***  
**P.O. Box 10001, Saipan, MP 96950**

## **SPECIAL EVENT PERMIT APPLICATION FORM**

NAME OF APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ Tel: \_\_\_\_\_  
\_\_\_\_\_ Email: \_\_\_\_\_  
\_\_\_\_\_ Office: \_\_\_\_\_  
\_\_\_\_\_ Mobile: \_\_\_\_\_

AUTHORIZED REPRESENTATIVE: \_\_\_\_\_

CONTACT #: \_\_\_\_\_

NAME OF EVENT: \_\_\_\_\_

DATES OF EVENT: \_\_\_\_\_

BRIEF ACTIVITIES DURING EVENT: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

### **ACKNOWLEDGEMENT**

By signing and accepting to use the Smiling Cove Marina Facility you agreed to abide to the Smiling Cove Marina (SCM) Rules and Regulation. Please familiarize yourself with SCM rules and regulation. The management of the SCM reserves the right to terminate this permit should the Permittee is found to be non-compliance with the SCM rules and regulation OR future permit request will be denied. PERMIT CONDITION IS FORTHCOMING UPON APPROVAL