Commonwealth of the Northern Mariana Islands
DEPARTMENT OF PUBLIC LANDS
P.O. Box 500380 Saipan, MP 96950
Tel: (670) 234-3751/3752/3753 Fax: (670) 234-3755
Email: dpl@dpl.gov.mp

APPLICATION TO CAMP IN MANAGAHA

Name of Applicant *(First, Middle, Last)*

Mailing Address

Contact Information

Tel:_____Cell:_____Email:_____

Camping Date	**No. of Participants** *(50 maximum allowed per group)*
Start Date: _____	Adult: _____
End Date : _____	Minors *(if any):* _____

Method of Transportation to Managaha

☐ Personal vessel ☐ Chartered vessel *Contact no. of company* _____ ☐ Others *Please specify*_____

Please specify the activities you are planning to do while in Managaha

Signature of Applicant	**Date**

FOR DPL USE ONLY

Date Received: _____

Reference No.: _____

Logged By: _____

Assigned To: _____

Remarks: _____

☐ **Approve** ☐ **Disapprove**

STAMP
DATE OF RECEIPT

DPL Secretary's Signature	**Date**