Form 10-115 Rev. 11/15/2016

## UNITED STATES DEPARTMENT OF THE INTERIOR

National Park Service

Grand Canyon National Park

Park Contact: Permits Coordinator, GRCA\_Permits\_Mail@nps.gov

Phone Number: 928-638-7707
COMMERCIAL USE AUTHORIZATION
UNDER THE AUTHORITY OF P.L. 105-391 Section 418, (54 U.S.C. 101925)

Commercial Road-Based Tour			Permit Number: CUA GRCA 5600 3280 Official Use Only			
2. Authorization Holder (Type information below)			Authorization: Begins: MAL	Th 4 2019		
JCONTACT NAME (Owner	or Authorized Agent)	Tomas CBUN (surver), Stepan NOCUT (corduct)		mber 31, 2019		
LORGANIZATION/COMPA	ESO tra	avel a.s.	↓EMAIL ADDRESS	` radek.adamec@esotravel.c		
17 (4)	orunova	oni 22	n/a - rental v	ehicles		
Prah	a, Czech F	Republic, 17000	↓TELEPHONE NUMBER/↓ FAX NUMBER +420-233-377-711, +420-233-377-71			
must be restored to its Park open to the gen 4. Summary of	original conditi eral public as o authorized act	ion at the end of the au lesignated by the atta ivity: (see attached she	ribed land or facilities in the above thorization): Areas within Grand iched authorization conditions. eets for additional information and	Canyon National		
holder is auti Activities bel	orized to cond ow the Rim are	luct Rim-based sights not approved under	eeing and traveling by improved this CUA.	l roadway.		
the park area. Th	The commercial is permit does no be boundaries of	ot authorize the holder to	must originate and terminate outside advertise, solicit business, collect fee	of the boundaries of s, or sell any goods or		
☐ In-Park: The c the park area	ommercial servic	e described above must o	originate and be provided solely within	n the boundaries of		
5. NEPA/NHPA □Categorical Excl		For Internal Use Only VFONSI	, Other Approved Plans			
6. Reasonable fee: (C	ost recovery rec	uired at a minimum)		ACC.		
Application Fee:	☑ Required	□Not Required	Amount - \$300,00	A 187		
Management Fee: 7. Insurance:	☑ Required	□Not Required	Amount Start October 1, 2019	<u>9</u> .		
Liability:	□ Required	□Not Required	Coverage Amount \$1,000,000			
Auto:	⊠ Required	□Not Required	Coverage AmountS See condition	ons for limits		
ISSUANCE of this at authorization subject to	Ithorization is the terms, cov	subject to the condition renants, obligations, an	ons below. The undersigned herel d reservations, expressed or implic	by accepts this ed herein.		
8. SIGNATURES		11/6		. ****		
Authorization Holder:	Signatu	Ve // /	/ Title Chief of	30 Jan 2019		
Authorizing NPS Officia	l: Signatu	nglas d. Lei	Title	21.11		
Authorizing NPS Officia			Permit Coordinator	2125/19		
(additional if required)	Signatu	ire	Permit Coordinator	Date		

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# UNITED STATES DEPARTMENT OF THE INTERIOR

## **National Park Service** YOSEMITE NATIONAL PARK

Park Contact: Ruth Middlecamp Phone Number: 209-379-1854 or 1851

COMMERCIAL USE AUTHORIZATION
UNDER THE AUTHORITY OF P.L. 105-391 Section 418. (54 U.S.C. 101925)

1. Authorized Activity: <u>Commercial Passenger Transportation</u>				Permit Number: YOSE-19- 156			
2.	. Authorization Holder Information:			Auth Date: January 01, 2019			
Business Name: ESO travel a.s.				Expiration Date: January 31, 2020			
Coı	Contact Name: holder: Tomas CIKAN,			Transportation Authority:			
Address: Korunovacni 22  Praha, Czech Republic, 17000				TCP- na DOT- na MC- na Calif. PUC Authority # Dept. of Transportation Authority #			
			00				
Pho	one and Fax: +420-233	3-377-711, +42	0-233-377-716				
3.	must be restored to open to the general Summary of authors.	its original cor al public and do orized activity	ndition at the end of the esignated by the atta : Commercial passen	scribed land or facilities in the above ne authorization): Areas within Yosen sched permit conditions and attachr ger transportation of passengers into is designated for buses is allowed. (S	nite National Park nents.  and out of Yosemite		
	additional informat			is designated to buses is allowed. (L	see attached sheets for		
	the park area. T	This permit does	services described abo s not authorize the holics ies of the park area.	ove must originate and terminate outs der to advertise, solicit business, collec	ide of the boundaries of et fees, or sell any goods		
	☐ In-Park: The copark area	mmercial service	e described above must	originate and be provided solely within	the boundaries of the		
5.	NEPA/NHPA Con ⊠Categorical Exch		√FONSI □ EIS □	Other Approved Plans PEPC NUMBE	R: 41792		
6.	Reasonable fee: (C Application Fee: Administrative Fee: Management Fee:	Cost recovery re  ☐ Required  ☑ Required  ☐ Required	equired at a minimum Amount  Not Required  Not Required	Received Amount <u>\$450.00</u> Amount			
7.	Insurance: Liability: Auto:	⊠Required ⊠Required	□Not Required □Not Required	Coverage Amount <u>\$1 million/occ</u> Coverage Amount <u>As required by</u>			
IS at	SSUANCE of this au uthorization subject to	thorization is to the terms, cov	subject to the conditenants, obligations, and	ions below. The undersigned hereby and reservations, expressed or implied	accepts this herein.		
8.	SIGNATURES		11/1/2				
Α	uthorization Holder:		<i>y</i> / 1	Owner and CEO	30 Jan 2019		
A	uthorizing NPS Official	: /S/SE Signatu	IERI CHACO	Title Acting Chief of Business & Revenue Mgnut Title	Date  02-22-2019  Date		

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### UNITED STATES DEPARTMENT OF THE INTERIOR

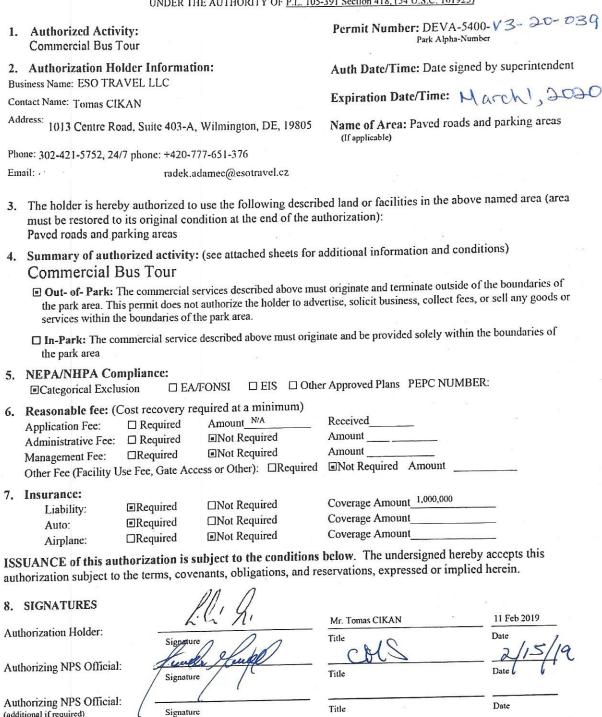
Death Valley National Park

P.O. Box 579

Death Valley, California 92328 DEVA Permits@nps.gov 760-786-3241

## COMMERCIAL USE AUTHORIZATION

UNDER THE AUTHORITY OF P.L. 105-391 Section 418, (54 U.S.C. 101925)



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# UNITED STATES DEPARTMENT OF THE INTERIOR

# **National Park Service**

Joshua Tree National Park Park Contact: Jeannie Wilson Phone Number: (760)367-5518

# COMMERCIAL USE AUTHORIZATION

UNDER THE AUTHORITY OF P.L. 105-391 Section 418, (54 U.S.C. 101925)

1.	Authorized Activity:     Road based Transportation Services			Permit Number: PWR-5600-CUA19538 Park Alpha-Number		
Bu Co Ad Wi Phe	Authorization Hold siness Name: ESO TRAVI intact: Tomas Cikan, Idress: 1013 Centre Road, S illmington, DE 19805 one: (302) 421-5752 Fax: (nail:	EL USA, LLC Suite 403-A		Auth: Date/Time: Jan 01, 2019 Dawn  Expiration Date/Time: Dec 31, 2019 Midnight  Name of Area: All Park roads that are appropriate  (If applicable)		
3.	The holder is hereby must be restored to i	authorized to	use the following descri	ibed land or facilities authorization): Leave	in the above named area (area No Trace	
4.	Summary of authorized activity: (see attached sheets for additional information and conditions)  All road based tours and sightseeing with incremental stops at suitable scenic pullouts  X Out- of- Park: The commercial services described above must originate and terminate outside of the boundaries of the park area. This permit does not authorize the holder to advertise, solicit business, collect fees, or sell any goods or services within the boundaries of the park area.					
	☐ In-Park: The compark area	mercial service of	described above must orig	inate and be provided so	olely within the boundaries of the	
5.	NEPA/NHPA Com XCategorical Exclusion		ISI 🗆 EIS 🗆	Other Approved Plans	PEPC NUMBER: N/A	
6.	Application Fee: Administrative Fee: Management Fee: Market Price:	☐ Required ☐ Required ☐ Required ☐ Required	uired at a minimum)  Amount  X□Not Required  X□Not Required  X□Not Required  ess or Other): X Required	Amount Amount Amount		
	Insurance: Liability: Auto: Boat: Airplane:	x□Required x□Required □Required □Required	Not Required Not Required XNot Required XNot Required	Coverage Amount Coverage Amount Coverage Amount Coverage Amount	1.5 Million	
aut	SUANCE of this auth horization subject to the	orization is su he terms, cover	bject to the conditions nants, obligations, and r	s below. The undersign eservations, expressed	gned hereby accepts this d or implied herein.	
8. Au	SIGNATURES uthorization Holder:	Tomas Cikan Signature	lil In'	Managing Director, CEO	9 Apr, 2019 Date	
Αι	uthorizing NPS Official:	Mily Jan Signature		Acting Chief Range	- 1//	
	athorizing NPS Official: ditional if required1)	Signature		Title	Date	

<sup>&</sup>lt;sup>1</sup> NPS Regional Director approval is required if Gross Receipts are expected to exceed \$100,000