

**BEAUFORT COUNTY PASSIVE PARK PROGRAM
GEOCACHING/LETTERBOXING PERMIT APPLICATION**

DATE: _____

CACHE/LETTERBOX OWNER INFORMATION:

Name: _____ Caching Nickname: _____

Address: _____

Phone: _____ Email: _____

CACHE INFORMATION:

Cache/Letterbox Name (as listed on website): _____

Type of Cache/Letterbox: __Micro __Regular __Virtual

Container Description: _____

Container Contents: _____

REQUESTED CACHE/LETTERBOX LOCATION:

Park name: _____

Physical Description of Location: _____

Photo included __Yes__No GPS Coordinates: _____

Description of hiding place: _____

FOR COUNTY USE ONLY:

Permit # _____ Date Issued: _____

APPROVED BY: _____