

**LAND MANAGEMENT
STANDING ROCK SIOUX TRIBE
PO BOX D
FORT YATES ND 58538
701-854-8540
FAX 701-854-7582**

LAND SURVEY REQUEST

REQUESTING AGENCY:

Standing Rock Sioux Tribe _____
 Bureau of Indian Affairs _____

Name _____ Department _____
 Name _____ Department _____

APPLICANT INFORMATION:

Name: _____
 Address: _____
 City/State/Zip _____
 Phone: _____

SURVEY/MAP INFORMATION:

Allotment/Tract No.: _____ Description: _____
 (Sec. Township & Range or Lat. & Long.)

Type: Agriculture/Shelter Belt:	_____	Acres	
Fenceline:	_____		
Homesite/Scattersite:	_____	Acres	
Land Exchange:	_____	Acres	
Partition:	_____	Acres	
Right of Way	_____		
(circle one)	Electrical	Length _____	Width _____ Acres _____
	Telephone	Length _____	Width _____ Acres _____
	Acres	Length _____	Width _____ Acres _____
	Other:	_____	
		(cemetery, taken area, business, etc)	

Copy of Resolution: No. _____

Applicant Signature: _____ Date: _____

Received By: _____ Date: _____

<p>COMPLETED: Name : _____ Date: _____</p>	<p>APPROVED: ECON DATE _____ T.C. DATE _____</p>
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