



APPLICATION
FOR
STANDARD ASSIGNMENT OF TRIBAL LAND

FULL NAME: _____
ADDRESS: _____
PHONE: _____
EMAIL: _____

1. LAND DESCRIPTION

a. FIRST CHOICE: I am applying for a standard assignment of Tribal land, my first choice is:

b. SECOND CHOICE: If this site is not available, my second choice is:

I DO SOLEMNLY SWEAR OR AFFIRM THAT:

2. ENROLLMENT: I am an enrolled member of the Stockbridge-Munsee Community, Band of Mohican Indians (“Tribe”). Enrollment Number: _____
3. HOUSEHOLD SIZE: The land is for the use of me and my household consisting of:

Name of Family Member	Date of Birth	Relationship
1.		
2.		
3.		
4.		
5.		
6.		CONT'D>

7.		
8.		
9.		
10.		

4. LAND USE

a. I intend on utilizing the land assignment in the following way:

- Residential use: (Years: ____ Months: ____)
 Primary Seasonal Other: _____
- Recreation/camping use: (Years: ____ Months: ____)
- Retirement: (Years: ____ Months: ____)
- Agriculture use: (Years: ____ Months: ____)
Specify: _____
- Business use: (Years: ____ Months: ____)
Specify: _____
- Other use: (Years: ____ Months: ____)
Specify: _____

b. I will comply with all applicable provisions of the Tribe's land and land use codes.

c. I will not use or consent to the use of the assignment for any unlawful purpose.

5. BENEFICIARIES

a. PRIMARY

I. In the event of my death, I designate enrolled member (Name):
_____, as the primary beneficiary
of the land assignment in accordance with Chapter 40.
*(The primary beneficiary has 90 days from the date of notification by the Land &
Enrollment Department to apply for the assignment).*

b. SECONDARY

I. If the primary beneficiary is not eligible or does not apply for the
assignment within 90 days, then I designate enrolled member (Name):
_____, as the second beneficiary.
*(The second beneficiary has 90 days from the date of notification by the Land &
Enrollment Department to apply for the assignment).*

- c. If the primary or secondary beneficiaries are not eligible or do not apply for the land assignment, the land assignment will return to the Tribe.
 - d. I understand that I can change the beneficiaries at any time by written notice to the Land & Enrollment Department.
6. I shall keep all improvements in good repair and to maintain the condition of the land in good order in accordance with: tribal law, including but not limited to the applicable land use ordinance, tribal environmental ordinances, and the public peace and good order ordinance, as amended.
7. The information contained on this application is true and correct to the best of my knowledge. I understand that if I fail to comply with the terms of my land assignment application, any conditions contained in the grant of standard assignment and the applicable Tribal ordinances, the land assignment may be subject to revocation as provided by Tribal law.

Applicant's Signature: _____ Date: _____

LAND COMMITTEE: APPROVAL DENIAL Date: _____

Land Committee Member Signature

Land Committee Member Signature

Land Committee Member Signature

TRIBAL COUNCIL: APPROVAL DENIAL Date: _____

Tribal President or Vice-President Signature

Tribal Secretary Signature