APPLICANT INFORMATION - RESIDENTIAL				
Homeowner Full Name:			Date of Birth:	
Spouse/Joint Homeowner Full Name:				Date of Birth:
Physical Address/Description of Home Location:			Mailing Ad	dress:
, ,			O	
Segment: Legal Descrip		ion: Sect	TwnSp Rg	
	Allotment Number:			
Contact Information:	Home Phone: (	( )		Work Phone: ( )
	Mobile Phone:	( )		Do you prefer text alerts? Y N
	Email Address:	<u> </u>		
	Do you prefer receiving billing/information by email? Y N			
DEMOGRAPHIC INFORMATION				
Tribal Affiliation: Enrollment				
			Full Name o	
Disabled: Y N Fu			Full Name of Disabled Person:	
Family with Children (under 18): Y N			Number of Children in Household:	
Total Number of People living in Household:				
HOME/PROPERTY INFORMATION				
Do you own the Home? Y N Number of Bedrooms:				
New <sup>2</sup> or Existing Home?				
Type of Home: Modular Manufactured/Mobile Stick-built Other:				
If Stick-built: Are all bathroom facilities installed completely? Y N				
Type of Foundation: Concrete Skid Block/Anchor Crawlspace Full-Basement				
Has there ever been a house on the land previously? Y N Unsure				
Has the land been previously disturbed i.e. previously farmland? Y N Unsure				
If yes, explain: Type of Septic System:				
City Drain Field None Unknown				
Type of Water System: None Cistern Rural Water City Water				
Cistern Tank Size (Gallons): Cistern Location:				
Requesting electrical assistance [ ] (You must provide a copy of outstanding balance due from electrical company. Must be an enrolled member of the Three Affiliated Tribes and provide proof of enrollment)				
Development (check all applicable):  Land Type (check one):				
( ) Home site leased/purchased ( ) Foundation Complete			( ) Fee Land	
( ) Right-of-ways established ( ) Sewer Connected			( ) Individual Allotted Land	
( ) Electrical Complete ( ) Water Connected			( ) Tribal Land	
( ) Access Road Complete ( ) Home site Completed			( ) Unsure	
By signing this application, I agree that I went through the consultation process with the Three Affiliated Tribes Public Works Division staff and agree that the information I have provided is true to the best of my knowledge. I understand that if there are any steps skipped in the new home installation process that my infrastructure timeline may be affected. I understand that if I opted to receive text message alerts that I am responsible for charges billed to my personal cellular services for receipt of any/all messages sent from Public Works and its affiliate departments.				
Print/Signature of Applicant				

Mail to: ATTN Public Works 404 Frontage Rd New Town, ND 58763

 $<sup>^{\</sup>mathrm{1}}$  If enrolled, a copy of enrollment card/certificate must be submitted with this application.

<sup>&</sup>lt;sup>2</sup> "New" is defined as being the first ever tenant to live in the home.