

Tribal Historic Preservation Office

Archeological Survey Application

Applicant/Head of Household:

Mailing Address:

Contact Information:

Home: _____

Work: _____

Cell: _____

Email: _____

Tribal Affiliation: _____ Enrollment #: _____

Site Address: (attach copy of lease, deed and map)

Legal Description: _____

Acres to be surveyed: _____

Project: () Homesite () Business () Other Describe: _____

Project Name: _____

Project Start Date: _____ Project End Date: _____

**** The SWO retains all Intellectual property information obtained and is subject to review and/or change at our discretion.**

I understand that these services will be provided only when the application is completed, and I agree to allow the THPO staff and/or Archaeologist to enter my property to survey the facilities, and agree to stake out the site to be surveyed with appropriate flagging.

Signature of Applicant

Date

THPO Representative

Date