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Lessee ID# _____ RP# _____
REVOCABLE PERMIT APPLICATION AND CHECKLIST

Requested by: _____ Date: _____

Address: _____

Enrollment Number: _____ Phone No: _____

Type of Permit: _____ Length of Permit _____

Starting Date: _____ Expiration Date: _____

Amount Requested: _____

Fees: \$ _____ Cu.Yd/Ton for _____ Cu.Yds/Tons Total: \$ _____

Permit Area: _____

Legal Description: _____

Ownership: Tribal _____ Allotted _____

Allottee: _____ & Number: _____

Lessee: _____

Contacted owner/lessee on: _____ (Date) _____

Permit Reason: _____

Other Department Review:

1. Salish Culture	Date Sent _____	Date Rec'd _____
2. Kootenai Culture	_____	_____
3. Shoreline	_____	_____
4. Wildlife	_____	_____
5. Recreation	_____	_____
6. Water	_____	_____
7. Minerals	_____	_____
8. Soils	_____	_____
9. Council Action	_____	_____

Approved: _____

Maps/Photos Attached
Reviewed and Checked by: _____

Approved by: _____ Date: _____
Tribal Lands Department