

## **TEESTO CHAPTER**

P.O. BOX 7385 – Teesto CPU Winslow, Arizona 86047 Phone: (928) 657-8042 – Fax: (928) 657-8046



"Saddle Butte Mountain"

## TEESTO CHAPTER ASSISTANCE APPLICATION

PERSONAL FACTS			DATE:	
NAME:	SPOUSE NAI	ME:	ARE Y	OU REGISTERED?
MAILING ADDRESS:		DITTYCECAT		ES NO
MALLING ADDICESS:		PHYSICAL ADDRESS		
CENSUS NUMBER:	CELL PHONE NU	JMBER: P	PERMISSION	ON PREMISES:
			YES	NO
DESCRIPTION OF ASSISTANCE: (Must be registered with Teesto Chapter six months prior to				
	Powerline Extension		House wiring	
[ ] Fire woods [ ] ]	Housing Materials	[ ]P	Propane	[ ] Water hauling
	Provide cost estimate	e	^.	
	Heavy Equipment S No off road service		Backhoe Burial Service	[ ] Fax/Xerox To any Financial Assistance
[ ] Other, Please specify				
*For Powerline Extension provide approved homesite lease, biological clearance, and cultural compliance form.  *For Waterline Extension Teesto Chapter will only provide the Office of Environmental Health application and it will be forwarded to Winslow Indian Health Care Center.				
FOR OFFICE USE ONLY:				
FOR BACKHOE/MOTOR G	RADER: FO	R WATER T	RUCK/CHAP7	TER VEHICLE:
DATE OF SERVICE:		DATE OF SERVICE:		
HOURS OF SERVICE:		BEG MILEAGE:		
AMOUNT OF GRAVEL:		END MILAGE:		
[ ] DISAPPRO			PPROVAL	
CHAPTER MANA	AGER		DATE	