

RETURN TO TEESTO CHAPTER

RDCMA -07- 21 Agriculture Infrastructure Funds Application						
Section 1: Applicant to complete						
1	Eligibility Criteria: Applicant First and Last Name: _____ Applicant C.I.B. Number: _____ Applicant Grazing Permit No.: _____ Preferred Contact Method: <input type="checkbox"/> Email address: _____ <input type="checkbox"/> Text Message #: _____					
Section 2: DGC/ENLB Officials to complete						
2	Number of Animals that Feed is Requested for:					
	Cattle	Sheep	Goats	Swine	Chickens	Horse
	Total: Talley Count Date:	Total: Talley Count Date:	Total: Talley Count Date:	Total: Talley Count Date:	Total: Talley Count Date:	Total: Talley Count Date:
Section 3: Chapter, DGC/NLB Officials complete						
3		Chapter	District Grazing Committee Official (DGCM)	Land Board Official (NLB)		
	<i>Print First & Last Name:</i>	Clara Tsosie	Morgan Yazzie			
	<i>Title:</i>	Chapter Manager	Grazing Official			
	<i>Telephone Number(s):</i>	(928)657-8042	(928)657-8042			
	<i>E-Mail Address:</i>	C_tsosie@navajochapters.org	shimayazzie@yahoo.com			
I certify that all information above is true and correct to the best of my knowledge. I agree that the feed received will be used only for livestock that I own and have on the Navajo Nation Lands.						
_____ Applicant Signature			_____ Date			
Acknowledge application was received by:						
_____ DGCM/ENLB Signature			_____ Date			
Acknowledge application was received by:						
_____ Chapter Administration Signature			_____ Date			
<input type="checkbox"/> Applications is Approved Initials: Approving Official of W.I.N.D. system initial here						
<input type="checkbox"/> Application was Denied Initials: Approving Official of W.I.N.D. system initial here						
Reason for Denial:						
<input type="checkbox"/> Inventory Exhausted		<input type="checkbox"/> Did not meet deadline				
<input type="checkbox"/> Did not meet eligibility criteria		<input type="checkbox"/> Application Incomplete				
<input type="checkbox"/> Other: _____						

TEESTO CHAPTER
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