



# Yurok Tribe Cultural Resources Management Permit Application



### FOR OFFICIAL USE ONLY

Date Received: \_\_\_\_\_

Staff Received: \_\_\_\_\_

Copy Sent To: \_\_\_\_\_ Tribal Heritage Preservation Officer (THPO)  
\_\_\_\_\_ Native American Graves Protection and Repatriation Act (NAGPRA) Coordinator  
\_\_\_\_\_ Tribal Archaeologist  
\_\_\_\_\_ Permit Applicant

**Instructions: Complete and return this application form and necessary supporting documentation to the Yurok Tribal Office in Klamath. All information requested must be completed before the application will be considered. Use separate pages if more space is needed to complete a section and attach.**

**1. Name of Applicant** (Yurok Tribal Department, Corporation, Lead Agency, Individual, or Other Entity)

**2. Mailing Address**

**3. Telephone Number**

**4. Email Address**

**5. Fax Number**

**6. Location of Proposed Work:**

a. Description of lands involved using the best available location information (complete all boxes possible).

i. Latitude and Longitude	ii. UTM Coordinates	iii. PLSS (township, range, and section)	iv. APN (parcel) Number	v. Assignment/allotment	vi. Physical Address

b. Attach a map and other relevant supporting documentation identifying the location of proposed work, defined as the Area of Potential Effect, which should include all areas proposed for use in the project, such as staging, implementation, cleanup, or otherwise included in the Proposed Work described below. Location should preferably be mapped on a 1:24,000, 7.5-Minute Series U.S. Geological Survey (USGS) Topographic Quadrangle map. Additional supporting Documentation that may be attached could include photos, parcel maps, site plans, surveys, and engineer drawings.

**7. Nature of Proposed Work:**

a. Please check all that apply:

- trenching     road construction     boring     drilling     plowing
- excavation     road grading     digging     tunneling     topsoil stripping
- auguring     backfilling     blasting     land leveling     install utility pole
- quarrying     ground clearing     grating     vegetation removal     other (explain below)



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b. Please describe in detail the proposed work, particularly as related to ground-disturbing activities, including the depth and width of each activity as checked in 7a.

**8. Date of Proposed Work:**

From: \_\_\_/\_\_\_/\_\_\_  
M D Y

To: \_\_\_/\_\_\_/\_\_\_  
M D Y

**9. Time of Proposed Work:**

\_\_\_ to \_\_\_  
AM PM

**10. Permit Applicant Contact Information:**

a. Name:

b. Title:

c. Organization:

d. Telephone number(s):

e. Email Address:

f. Mailing Address:

**10. Landowner(s) Contact Information:**

a. Name(s):

b. Telephone number(s):

c. Email Address(es):

d. Mailing Address(es):



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Please complete the following additional project contact information as applicable:

**12. Project Manager:**

- a. Name:
- b. Title:
- c. Organization:
- d. Telephone number(s):
- e. Email Address:
- f. Mailing Address:

**13. Project Contractor:**

- a. Name:
- b. Title:
- c. Organization:
- d. Telephone number(s):
- e. Email Address:
- f. Mailing Address:

**14. Project Inspector:**

- a. Name:
- b. Title:
- c. Organization:
- d. Telephone number(s):
- e. Email Address:
- f. Mailing Address:

**15. Project Subcontractor:**

- a. Name:
- b. Title:
- c. Organization:
- d. Telephone number(s):
- e. Email Address:
- f. Mailing Address:



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15. Does this proposed project involve Federal funds, proposed to occur on federal lands, or could otherwise be defined as an “undertaking” according to Section 301 (7) of the National Historic Preservation Act of 1966 as amended through 2006?

Check applicable:  Yes  No

16. To your knowledge, is the proposed project in an area that likely contains cultural resources?

Check applicable:  Yes  No

### Certification

I, \_\_\_\_\_ certify that I have read the Cultural Resources  
(Permit Applicant)

Protection Ordinance, understand work may not begin until the proposed project is permitted, and agree to the terms and conditions that may be applied to the permit, and have the full consent of all pertaining landowners to conduct the proposed work. \_\_\_\_\_  
(Initial)

I certify and declare under penalty of perjury that I have read and understand all items on this application and have had the opportunity to consult legal counsel in regard to this Permit. I further declare under penalty of perjury that all information contained herein is true and correct to the best of my knowledge and belief and agree to submit to the jurisdiction of the Yurok Tribal Court for all actions arising out of, or related to, the project associated with this Permit. \_\_\_\_\_  
(Initial)

_____ <b>Signature of Permit Administrator</b>	_____ <b>Date</b>
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**Please deliver this Application to the Yurok Tribal Office in Klamath, CA  
P.O. Box 1027  
Klamath, CA 95548  
(707) 482-1377 – Fax  
Attention: Yurok Tribal Heritage Preservation Officer**



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**Application Staff Review and Recommendations** (Staff has 15 calendar days to review unless requiring input from Culture and/or NAGPRA Committees, then Staff has 15 calendar days from Committee decision date):

Application Reviewed (provide signature)	Reviewing Tribal Staff	Recommendations (attach additional sheets as necessary)
	Tribal Heritage Preservation Officer (THPO)	
	Native American Graves Protection and Repatriation Act (NAGPRA) Coordinator	
	Tribal Archaeologist	

If all reviewing Tribal staff determine that the proposed project will have no impact to cultural resources and provide no recommendations that suggest conditions and/or mitigation measures then the Tribal Chair may authorize the Permit Application without Council Consent.

**Council Action** (if applicable):

Permit Application	Council Agenda Number	Date of Council Session	With Conditions (if yes, explain below)
<input type="checkbox"/> Approved <input type="checkbox"/> Denied			<input type="checkbox"/> Yes <input type="checkbox"/> No

**Permit Conditions:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

_____ <b>Signature of Tribal Chair</b>	_____ <b>Date</b>
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