

Application for Shareholder Campsite Permit

New Applica	tion: Re	newal Application:		
Please complete Sections 1, 2, and 3 prior to submitting your application. You will need to sign, date, and submit your application to the SNC Land Department. If the application is incomplete, it will be returned to the applicant. Deadline for Applications is September 30th of each year. If a habitable structure/improvement is not in place on the campsite within the 1-year term, the site will be opened to other applicants per policy. Any Permit is subject to the SNC Land Use Policy.				
Section 1 – Personal Information				
Name:				
Date of Birth:	Last 4 digits SSN:	SNC Shareholder ID #		
Current Mailing Address:				
City:	State:	Zip:		
Current Phone Number:	Secondary Contact Phone Number:			
Email Address:				
Section 2 – Campsite Information				
Term: 1 Year Permit:	Lifetime Perr	nit:		
What type and size of structure do you plan to place or currently have on this campsite:				

Do you request to place gravel onto	your site at your expense? Y	'es: No:			
Who do you request to inherit this	campsite? Please include thei	r full name and SNC Shareholder ID# (last 4 digits)			
Name:		SNC Shareholder ID#			
Section 3 – Acknowledgement and Signature					
By initialing and signing below, you are hereby agreeing that you understand and will abide by the Sitnasuak					
Native Corporation Land Use policies related to the Campsite program.					
1. I will follow and com	I will follow and comply with the Sitnasuak Native Corporation Land Use Policy and Campsite Policy. I will				
maintain the lot, inc	maintain the lot, including all personal property, equipment, and improvements, and ensure the campsite				
is in appropriate condition throughout the term of the campsite permit.					
	I will bear all costs of the placement of gravel. I will schedule a site visit with the SNC Land Committee to show them where the gravel will be placed if my permit is approved.				
I I	tructure placed on my Campsite within 1 year, my permit will be terminated, and the site will be opened				
to other applicants.					
Printed Name:		:			
Signed Name:					
SNC Land Department Office Use Only					
	Sive Land Department Of	ince ose only			
Permit Record # Date Received:					
\$20 non-refundable Shareholder C	ampsite Application Fee paid	date & payment number:			
Area:	Location:	Size:			
Term:	Commence Date:	Expires:			
Improvement By:					