

## Instructions for completing the Driveway Repair Application

This application is for the maintenance of accessible driveways for Muscogee (Creek) Nation enrolled tribal members and property owners, who reside within the territorial jurisdiction of the Muscogee (Creek) Nation. This program addresses the needs of the Muscogee (Creek) Nation citizens, to repair or replace existing driveways. The selection of eligible families/individual's to participate in this program will be made by the Tribal Driveways program manager. Selection shall be based on all the factors contained in the application, an on-site inspection of the land/property, and the amount of funding currently available to the Tribal Driveways.

Individual's wishing to apply for assistance should submit the foregoing application to:

Muscogee (Creek) Nation  
Attn: Tribal Driveways Program  
P.O. Box 580  
Okmulgee, OK 74447

**PLEASE RETURN COPIES OF THE FOLLOWING DOCUMENTS ALONG WITH YOUR APPLICATION:**

- 1) Copy of updated Creek citizenship card.
- 2) Copy of Warranty Deed to property in your name.
- 3) Copy of Driver's License (or Oklahoma ID).
- 4) Copy of utility bill to show proof of residence.
- 5) Primary driveway entrance only.
- 6) Signature required on bottom of page.

Failure to include any of the above listed information will delay the application process and the applicant will be notified by mail. Once inspected, applicant's will receive an on-site inspection letter by mail.

**\*ELIGIBILITY:** Will be limited to no more than one (1) service every four (4) years for the property seeking services. Tribal Driveways will do the repair work on driveways at no charge. Each project will be limited.

**\*PRIORITY:** Will be given to the elderly, applicant's who are suffering from a severe health problem, handicap permanent disability and driveways that are rapidly deteriorating.

**SERVICES DO NOT INCLUDE: LANDSCAPE, BLACKTOP, CIRCLE DRIVEWAYS, CONCRETE, BRIDGES OR BUILDING NEW DRIVEWAYS. YOU MUST OWN AND LIVE ON THE PROPERTY AND HAVE AN EXISTING DRIVEWAY TO BE ELIGIBLE.**

If eligible, everyone will be served. Please be patient and we will get to you as soon as we can. The waiting period for this program could be approximately six (6) months to a year.

**I HAVE READ AND UNDERSTAND THE INSTRUCTIONS FOR THE TRIBAL DRIVEWAYS APPLICATION.** (Applicant's Signature) \_\_\_\_\_



## MUSCOGEE (CREEK) NATION TRIBAL DRIVEWAY REPAIR APPLICATION

NAME: \_\_\_\_\_  
Last First MI

ADDRESS: \_\_\_\_\_ COUNTY: \_\_\_\_\_

City State Zip Code  
HOME PH# \_\_\_\_\_ WK# \_\_\_\_\_ CELL# \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_

CREEK ROLL NUMBER: \_\_\_\_\_  
(Include a copy of Enrollment Citizenship Card)

MARITAL STATUS: \_\_\_\_\_ Married \_\_\_\_\_ Single \_\_\_\_\_ Widowed

SPOUSE'S NAME: \_\_\_\_\_  
Last First MI

SPOUSE'S DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_

### FAMILY INFORMATION

List all other persons living in the household on a permanent basis, starting with the eldest person:

<u>NAME</u>	<u>AGE</u>	<u>RELATIONSHIP</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you need additional space, please use the back of this page.

**MEDICAL INFORMATION**

Does anyone in your family who was listed as a permanent resident on page 1 of this application suffer from a severe health problem, handicap or permanent disability? If yes, please provide the name, relationship and brief description of said problem and attach certified documentation (Doctor's statement describing the ailment) to this application.

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**LAND INFORMATION**

Do you own the property on which you need work performed on? \_\_\_\_\_

Do you presently live on the below described property? \_\_\_\_\_

Please state the legal description of the property. (Please include a copy of the deed.)

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Please give directions and general location to your home or area where work is to be performed:

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Describe briefly the work that you are requesting. (Material only, materials, equipment and labor, gravel, etc.) \_\_\_\_\_

What is the approximate length of the driveway? \_\_\_\_\_

**APPLICANT'S CERTIFICATION:**

**I CERTIFIED THAT ALL OF THE ANSWERS GIVEN ARE TRUE, COMPLETE, AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE INFORMATION GIVEN WILL CAUSE AUTOMATIC DENIAL OF MY APPLICATION.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse's Signature

\_\_\_\_\_  
Date

**TREE LIMB AGREEMENT**

In some instances, the removal of branches, limbs and/or an entire tree is necessary due to it's interference in the widening, graveling and clearing of ditches for repair or replacement services. The purpose of the removal is to allow easier access for equipment and to allow extra sunlight to keep the driveway dry.

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The above will need to be removed by either the landowner (the person requesting driveway repair services) or the Tribal Driveways Program will provide removal upon the signature of the landowner.

If an objection is made to removal, please state the objection below.

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Because of the above reason (s), I object to the removal of branches, limbs and/or an entire tree so that the requested driveway repair can be completed.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

I do not object to the removal of branches, limbs and/or an entire tree so that the requested driveway repair can be completed.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Tribal Driveways Representative Signature

\_\_\_\_\_  
Date