Fuels Management Activities Consent Form
Bureau of Indian Affairs
Eastern Oklahoma Region

Tribal Trust_____.
Restricted_____.
Fee / Private_____.

I _____ , give my consent to the Bureau of Indian Affairs, Eastern Oklahoma Region, to conduct Fuels Management Activities in the form on a Hazardous Fuels Reduction (HFR) project on my property described below.

General Location: _____Estimated Size: _____.

Legal Description: T___N, R___E, Sec ___, ____Qtr. in _____County.

Desired Actions/Outcome: _____.

By signing this consent form, I hereby give permission to the Bureau of Indian Affairs, Eastern Oklahoma Region, to conduct Fuels Management Activities in the form of an HFR project on the property identified above. I further acknowledge that this HFR project will be of no cost to any of the restricted Indian landowners nor will any restricted Indian landowner receive any rent or lease monies for the HFR project. I understand that this HFR project will improve the ecological state of my property and will also likely enhance the value of the property. In addition, the project will reduce the negative effects of catastrophic wildfire events. I grant permission to individuals needing to access my property prior to, during and thereafter the HFR project to conduct actions relating and/or in support of the HFR project. Said actions may include but are not limited to pre-treatment vegetative inventory, post treatment vegetative inventory, cultural/archeological survey, wildlife survey, prescribed fire implementation, Eastern Red Cedar and other hazardous tree/brush removal etc. I understand that individuals accessing my property will be employed by the Bureau of Indian Affairs, tribal entities and/or private enterprises contracted to perform specific tasks relating to and/or in support of the HFR project.

The Bureau of Indian Affairs agrees to hold the landowner(s) free and harmless from liability for any and all claims arising for any damage or injury to any person caused by or in any manner arising as a result of the activities authorized by this consent including expenses in connection for claims, except therewith arising from the negligence or intentional acts of the landowner.

I accept the conditions and terms above and as stated on the attached "Fuels Management Project Objectives" form.

Authorized: _____ _____
(Landowner Signature) (Date)

_____ _____
(Phone #) *(Email)*

_____
(Mailing Address)

Approved By:_____ _____
(Superintendent Signature) (Date)

Note: If the allotment is undivided and there is more than one heir (owner), a consent form must be signed by more than half of the heirs to the estate.

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Project Name:_____

Estimated Size (if known):_____

Desired Actions/Outcome:_____

_____

_____

Target Plant(s) to be removed (Cedar, Winged Elm, Sumac, etc.):_____

_____

_____

Target Plant to be enhanced (native grasses, mature Oak, Hickory, Pecan, etc.):_____

_____

_____

Areas or special features to avoid (cemetery, homesite, sewage lagoon, hunting feature, etc.)_____

_____

_____

_____

By signing below, I acknowledge that I represent the vested interests of the identified property and its' majority landowners or heirs regarding said property. Furthermore, I have communicated the project objective(s) as well as any project avoidance areas or features.

_____ _____

Signature *Date*

_____ _____

Print Name *Phone Number*

_____

Mailing Address

Witness

_____ _____

Signature *Date*

_____ _____

Print Name *Phone Number*

_____

Note: If the allotment is undivided and there is more than one heir (owner), a consent form must be signed by more than half of the heirs to the estate.