

BAY MILLS INDIAN COMMUNITY
"GNOOZHEKAANING" PLACE OF THE PIKE

BAY MILLS LAND OFFICE
12140 West Lakeshore Drive
Brimley, Michigan 49715



LAND OFFICE COORDINATOR
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APPLICATION FOR RESIDENTIAL LEASE OF TRIBAL OWNED LAND

To request a Residential Lease, Tribal Members must complete an Application for Residential Lease of Tribal Land. Applications are available for pick up in-person at the Land Office, on the baymills.org website, or can be requested via email or mail. Written and verbal requests will not be accepted.

Tribal Members must provide a copy of Tribal I.D. as an attachment to the application.

- Application will be date/time stamped in the order received.
- Applicants will be shown available lots, and may select one (1) lot.
- If applicant is unable to select a lot, the Executive Council shall identify the land to be leased.
- If the lot is undeveloped, the Land Office will arrange for the completion of a land survey with legal description. The applicant will be responsible for the cost associated with the survey. The Land Office will complete an application for Address Assignment through the Chippewa County Equalization Department. The applicant will be responsible for the \$10.00 processing fee, due at the time of application submittal.
- Applying for a Residential Lease and selecting a lot does not mean you own or have a lease for that lot. The Land Office will present the Application for Residential Lease of Tribal Owned Land for approval at the next available Executive Council meeting. If approved, the applicant will be contacted, and a Residential Lease of Tribal Owned Property will be issued.
- The Lessee will have one (1) year to construct and/or occupy a residence on the leased site. Failure to comply with this requirement shall cause the termination of the lease, unless the Executive Council extends the time period within which the member shall construct and/or occupy a residence (up to one (1) year).
- If, at the one (1) year mark, or two (2) year mark if granted an extension, the lessee does not want the lot or cannot build a residence, the lot will revert back to the Tribe and be issued to another Tribal member.

APPLICATION FOR RESIDENTIAL LEASE OF TRIBAL OWNED LAND

APPLICANT'S NAME: (Please Print)	ENROLLMENT ID #: (Must have copy of I.D. to attach)
CURRENT MAILING ADDRESS:	ADDRESS FOR NEW LEASE:
HOME PHONE: (Must have a number we can call for questions)	WORK PHONE:
CELL PHONE:	EMAIL ADDRESS:
<p>1] STRUCTURE INFORMATION:</p> <p>Are there existing structures on the lot? <input type="checkbox"/> YES OR <input type="checkbox"/> NO</p> <p>Type of structure you will be placing OR already exists on lot:</p> <p><input type="checkbox"/> MANUFACTURED HOME (TRAILER /MOBILE HOME)</p> <p><input type="checkbox"/> HOUSE (STICK BUILT/MODULAR)</p> <p><input type="checkbox"/> GARAGE w/APT. ATTACHED</p>	<p>2] ARE YOU REQUESTING A SPECIFIC LOT? <input type="checkbox"/> YES OR <input type="checkbox"/> NO</p> <p>If Yes, continue to question 3.</p> <p>If no, continue to question 4. In the absence of a specified lot, the Executive Council, in consultation with the Land Office, shall identify the land to be leased.</p> <hr/> <p>3] ARE REQUESTING AN UNDEVELOPED LOT? <input type="checkbox"/> YES OR <input type="checkbox"/> NO</p> <p>If Yes, location: <input type="checkbox"/> Bay Mills <input type="checkbox"/> Sugar Island</p> <p>If No, provide the name of current lessee, and/or address</p>
<p>4] REASON FOR RESIDENTIAL LEASE:</p> <p><input type="checkbox"/> The requested lot is vacant.</p> <p><input type="checkbox"/> Purchasing home from another Tribal member.</p> <p><input type="checkbox"/> The current lease is in a deceased member's name.</p> <p><input type="checkbox"/> I have a written commitment letter from a Lending Institution, [Bank, Credit Union, U.S.D.A., Wells Fargo, etc.]</p>	
<p>5] PRIMARY RESIDENCE.</p> <p>I, _____, hereby affirm in writing that the residential lease requested is for land which will be my primary legal residence and that I will physically reside at least seven [7] months of each year.</p>	
<p>6] SIZE OF LOT:</p> <p><input type="checkbox"/> I understand that the land leased to me shall not exceed one [1] acre in size.</p>	
<p>7] FAILURE TO CONSTRUCT AND OCCUPY RESIDENCE:</p> <p><input type="checkbox"/> I understand that I have one year [1] to place a livable structure on my lot (livable structure means; running water, working toilet, electricity; cannot be a garage). I also understand that if I am unable to construct a livable structure and occupy a residence in the first year, it is my responsibility to demonstrate to the satisfaction of the Executive Council that such failure was not due to circumstances solely within my control. In such event, the Executive Council may extend the time period but not for more than one [1] additional year for a total of two [2] years within which I shall construct and occupy my residence.</p>	

8] PRIMARY LEASE:

[] I understand that I can only be issued one [1] primary lease. See page 4, section 7; subsection, (h), of Ordinance Regulating the Issuance of Residential Lease.

9] COMMERCIAL LEASE:

[] I understand that no commercial enterprise shall be located on land subject to a residential lease **without** the express **written authorization** of the Executive Council.

10] HAVE YOU EVER BEEN SERVICED BY INDIAN HEALTH SERVICE [I.H.S.] WELL AND SEPTIC PROGRAM? [] YES or [] NO

If Yes, What year were you served? _____ (approximately)

Address of location: _____, _____, MI _____
911 Street Address City Zip Code

11] DO YOU INTEND TO REQUEST I.H.S. SERVICES FOR THIS PROPERTY? [] YES or [] NO

IF YES, WHAT TYPE OF I.H.S. SERVICES ARE YOU REQUESTING FOR THIS PROPERTY?

NEW SERVICE: [] Well, [] Water Main, [] Septic, [] Waste Water System

OR

RENOVATION OF EXISTING: [] Well, [] Water Main, [] Septic, [] Waste Water System

***To request I.H.S. services, you will need to complete an I.H.S. Sanitation (Well & Septic) Application.**

APPLICANT'S SIGNATURE:

DATE:

****FOR LAND OFFICE USE ONLY****

Date/Time Application Received:

Application received by: _____
(Land Office)

Application reviewed by: _____
(Gail Glezen, Treasurer, BMIC Executive Council)

Date Application went to Executive Council Meeting: _____, 20____

[] **APPROVED** Date: _____

[] **DENIED** Reason: _____

[] **TABLED** Reason: _____

Comments: _____

