

**OFFICE OF NAVAJO AND HOPI INDIAN RELOCATION  
APPLICATION FOR RELOCATION BENEFITS (12/19/08)**

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**INFORMATION ABOUT OUR AGENCY AND THIS FORM**

**Our Agency:** The Office of Navajo and Hopi Indian Relocation ("ONHIR") is a Federal Agency in the Executive Branch of the United States Government whose principal office is in Flagstaff, Arizona. ONHIR was created by the Congress in 1974 to assist certain Navajos and Hopis who live on or used to live on lands within what is known as the "Former Joint Use Area" ("FJUA") which the Federal Court in Tucson awarded to the "other" Tribe in 1978. The FJUA lands awarded to the Hopi Tribe are known as the "Hopi Partitioned Lands" or "HPL." The lands awarded to the Navajo Nation are known as the "Navajo Partitioned Lands" or "NPL."

**Purpose of This Document; Need to Complete:** You have contacted our office about Relocation Benefits under the Navajo—Hopi Settlement Act, 25 U.S.C. 640d et seq., P.L. 93-531, as amended ("the Act.") This document is the formal "Application for Relocation Benefits" ("Application.") If you complete this document and submit it to ONHIR we will review it and will make a decision on your Application from the information you provide us on this Application; additional information which we may request from you and you provide to us, and any other information we obtain from you or from any investigation of your Application which we conduct.

If you do not complete this Application form and return it to ONHIR, we will not provide you Relocation Benefits and we will close your file.

**Procedure:** We encourage you to make an appointment to meet with one of our staff who works on eligibility issues at our Flagstaff office. Having such an in-person meeting with us can be helpful to you, to us and to the eligibility—determination process. At such a meeting we will work with you to complete the form; we will answer questions you may have and we will ask you questions if we need anything clarified or explained by you. We will also review with you the additional documents you will need to submit which support your Application. While we cannot compensate you for coming to our office for a scheduled appointment, if you do make an appointment and meet with us and if you are eventually certified as eligible for Relocation Benefits, we will be able to reimburse you for some of your travel expenses.

If you would prefer to complete this Application and then submit it by mail, fax or E-Mail, this procedure is acceptable to ONHIR. If you have questions

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when completing the Application, please give us a call and we can discuss your questions. Our contact information appears later on this form.

**Interpretation; Representatives:** If an Applicant needs interpretation from the English Language to the Navajo Language to complete the Application or to answer any questions about the form and our procedure, we do have Agency staff that are bilingual. If you call or visit our office, please tell the receptionist of this need so you or your call will be routed to someone who can help with this.

If you want us to discuss your application or the facts of your situation with someone else (such as a family member or friend,) we are glad to accommodate you, but we will need your written authorization to do so.

**Contact Information:** Office of Navajo and Hopi Indian Relocation

Physical Address: 201 East Birch Ave., Suite 11, Flagstaff, AZ 86001

Mail Address: P.O. Box KK Flagstaff, AZ 86002

Telephone: 928-779-2721, or 800-321-3114

Fax: 928-774-1977

Website: [www.onhir.gov](http://www.onhir.gov)

E-Mail: [laruzow@onhir.gov](mailto:laruzow@onhir.gov).

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**Information About You:**

1. Your Name: \_\_\_\_\_
  - a. Have you ever been known by any other name? \_\_\_ Yes \_\_\_ No
  - b. If "Yes," what other name? \_\_\_\_\_
  
2. Your Date of Birth: \_\_\_\_\_
  
3. Your mailing address: \_\_\_\_\_  
\_\_\_\_\_
  
4. Are you an enrolled member of the Navajo Tribe?  
\_\_\_ Yes \_\_\_ No
  - a. If "Yes," what is your Census Number? \_\_\_\_\_
  
5. Are you presently a member of any Navajo Nation Chapter?  
\_\_\_ Yes \_\_\_ No
  - a. If you are:
    - i. Which Chapter? \_\_\_\_\_
    - ii. In what year did you first become a member of this Chapter? \_\_\_\_\_
  
6. Were you ever a member of another Chapter? \_\_\_ Yes; \_\_\_ No
  - a. If you were:
    - i. Which Chapter? \_\_\_\_\_
    - ii. When were you a member of this Chapter?  
From: \_\_\_\_\_ To: \_\_\_\_\_

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Your Name: \_\_\_\_\_  
\_\_\_\_\_

7. Do you have an E-Mail address?  Yes  No

a. If you do, what is your E-Mail address?

\_\_\_\_\_@\_\_\_\_\_.\_\_\_\_\_

8. Do you have a home telephone number?  Yes  No

a. If you do what is the:

Area Code: \_\_\_\_\_ Number: \_\_\_\_\_ - \_\_\_\_\_

b. Is this a Cell Phone?  Yes  No

9. Do you have a work telephone number?

a. If you do what is the:

Area Code: \_\_\_\_\_ Number: \_\_\_\_\_ - \_\_\_\_\_ x \_\_\_\_\_

10. Do you have an answering machine or voice mail where we can leave messages for you?  Yes  No

11. If we try to contact you at the above telephone number and are not successful, is there another number we can call you at or leave messages for you?  Yes  No

b. If "Yes," what other number?

Area Code: \_\_\_\_\_ Number: \_\_\_\_\_ - \_\_\_\_\_

b. Whose telephone number is this?

\_\_\_\_\_

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Your Name: \_\_\_\_\_  
\_\_\_\_\_

**Please also provide answers to the following:**

1. Did you ever apply to ONHIR for Relocation Benefits before this Application? \_\_\_ Yes \_\_\_ No

a. If "Yes," When: \_\_\_\_\_

(i). If "Yes," under what name did you apply?  
\_\_\_\_\_

b. If, "No," Why didn't you apply for Relocation Benefits?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Where were you living on December 22, 1974? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. On December 22, 1974 did you have a residence on the lands which were later awarded (partitioned) to the Hopi Tribe (the "HPL") by the Federal Court in Tucson? \_\_\_ Yes \_\_\_ No

a. If "Yes," where was that residence?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b. When did you first live in that residence? \_\_\_\_\_

c. If you had a residence on what became the HPL on December 22, 1974, but were not actually living in that residence on that day, please explain why you were not actually living in that residence. (Such as that you were in the military; away at school; employed outside the HPL, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Do you have one or more children? \_\_\_ Yes \_\_\_ No

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Your Name: \_\_\_\_\_  
\_\_\_\_\_

- a. If "Yes," when was your first child born? \_\_\_\_\_
5. Have you ever been married? \_\_\_ Yes; \_\_\_ No
- a. If "Yes," in what year were you first married? \_\_\_\_\_
6. Have you ever worked full-time for wages or a salary (including military service)? \_\_\_ Yes \_\_\_ No
- a. If "Yes," in what year did you first work full time? \_\_\_\_\_
- b. If "Yes" for whom did you work? \_\_\_\_\_  
\_\_\_\_\_
7. What are your parents' names? \_\_\_\_\_  
\_\_\_\_\_
8. Have you moved from the HPL? \_\_\_ Yes; \_\_\_ No
- a. If you have moved from the HPL, when did you move?  
\_\_\_\_\_
- b. Where did you move to? \_\_\_\_\_  
\_\_\_\_\_
- c. Why did you move? \_\_\_\_\_  
\_\_\_\_\_

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Your Name: \_\_\_\_\_  
\_\_\_\_\_

**Certification and Execution**

I state under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

\_\_\_\_\_  
Signature

Signed on: \_\_\_\_\_

**Interpreter's Declaration (use only if the Applicant does not read and write in the English Language)**

I \_\_\_\_\_ am fully fluent in the English and Navajo Languages. At the request of Applicant \_\_\_\_\_ I interpreted the foregoing Application into the Navajo Language to the best of my ability.

I also have reviewed the answers given by the Applicant with the Applicant in the Navajo Language.

To the best of my knowledge and belief, the Applicant understood the Application and understood the answers given to the questions in the Application. The answers set forth in this Application are the answers provided by the Applicant.

I state under penalty of perjury under the laws of the United States of America that the foregoing statement is true and correct.

\_\_\_\_\_  
Signature

Signed on: \_\_\_\_\_