



**TS'AH BII KIN CHAPTER
FOR REGISTERED MEMBERS ONLY**

Post Office Box 1755
Kaibeto, AZ 86053
Phone #: 928-672-2337
Website: tsahbiikin.navajochapters.org
Email: tsahbiikin@navajochapters.org

CONTACT INFORMATION FOR PHYSICAL ADDRESS VERIFICATION

Legal Name: Last, First, Middle Initial		Census Number:		Social Security Number:
Permanent Mailing Address: City / State / Zip				Telephone Number:
Permanent Home Address: City / State / Zip				Telephone Number:
Date of Birth	Other Names to Be on PAV	Census Number:	Social Security Number:	Verification to Be Used For:
Are you a Veteran? <input type="checkbox"/> YES <input type="checkbox"/> NO	Are you a registered voter of this Chapter? <input type="checkbox"/> YES <input type="checkbox"/> NO, Is your parent a Register Voter?		<input type="checkbox"/> YES <input type="checkbox"/> NO	Chapter Affiliation

MUST Provide Required Credential Documents; Otherwise, request will not be fulfilled.

1. Driver's License or Picture ID w/ your name. _____
2. Certificate of Indian Blood _____
3. Navajo Nation Voter's Registration _____
4. Social Security Card _____

INFORMATION ON ENTITY REQUESTING INFORMATION

Entity Requesting Information		Information Being Requested For:
Entity Address	City	State/Zip Code

ADDRESS AND STRUCTURE INFORMATION

Physical Address	Mailing Address	
Home Discription	City	State/Zip Code
I certify that the information provided is correct to the best of my knowledge:		
Signature:	Date:	

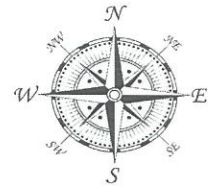
APPLICATION STATUS

Date Received:	Received By:	Forwarded to Manager	Date Approved	Date Returned
Date Resubmitted	Resubmitted By	Manager Approval	Date Approved	Date Completed

The Ts'ah Bii Kin Chapter Administration will not accept any other forms of Credential Documents requested to accompany this application for Residency Verification. All applicants are responsible to furnish in person the required credential documents. This application along with the required credential documents must be submitted to out office in person by the requestee. No emailed or faxed documnets will be accepted. No Requests over the phone, through email, and third party persons are accepted

**** Please Remember to Draw a map to the location of your home from the Chapter House. Including the distance in miles. ****

DRAWN MAP TO PHYSICAL LOCATION OF HOME



Please provide main road/highway and number along with any mile markers and be very detailed as possible. You are welcome to provide latitude and longitude coordinates as well. Please use the compass on the bottom right hand corner when orientating and drawing your map and do not turn the page upside down, top of map is always north.

**** No Requests over the phone, through email, and third party persons are accepted ****