

Winnebago Tribe of Nebraska



Residential Lease Application

Name: _____ Date: _____
Last First M.I.

Address: _____
PO Box/Street Address

_____ City State Zip Code

Phone: _____ Email: _____

Enrollment No.: _____ Tribal Affiliation: _____

Dependency Information

_____ Last First M.I. Age Enrolled Tribe

_____ Last First M.I. Age Enrolled Tribe

_____ Last First M.I. Age Enrolled Tribe

_____ Last First M.I. Age Enrolled Tribe

House Information

	Yes	No		Yes	No
Wood Framed:	_____	_____	HUD Home:	_____	_____
Mobile Home:	_____	_____	Mortgage:	_____	_____
Other:	_____	_____			

Beneficiary

Pursuant to the Residential Land Lease Policy adopted by the Winnebago Tribal Council on August 17, 2020, all lessees must present a will or fill out this form, which will be notarized, designating an enrolled Winnebago Tribal member, age 18 or older, to which the lease will be transferred should the current lessee pass away before the lease term ends. This ensures that all residential land leases will be in the name of an enrolled Winnebago Tribal member in accordance with policy.

The lease will not be approved by the Tribal Council without this part of the form listing a lease beneficiary or the presentation of an actual will that addresses this issue.

In the event that you wish to list your child as the beneficiary of the lease and that child is not eighteen (18) years of age or older then the lessee must list a secondary beneficiary that is eighteen (18) or older in the event that the lessee passes away prior to the original beneficiary reaching the age of eighteen. All beneficiaries listed must be an enrolled Winnebago Tribal member in order to have their name transferred to the residential land lease.

Primary Beneficiary

Last First M.I. Age Enrolled Tribe

Secondary Beneficiary

Last First M.I. Age Enrolled Tribe

Notary Public

Print Name

Signature

Sworn to and subscribed to before me this _____ day of _____ 20____

(seal)

Notary Signature

Expiration Date

*****OFFICE USE ONLY*****

Date Rec'd: _____

Tribal Council Approved: _____