

Removal of Restrictions Counseling Form

Native Allotment Number _____

Read each of the numbered items below. If you understand each item, place your initials on the blank line to the right of each numbered item. If you do not understand any of the items, please contact the Bureau of Indian Affairs and speak with the Realty Specialist assigned to your Removal of Restrictions transaction before initialing. It is important that you fully understand this transaction because it is permanent and irreversible once it is approved.

- | | | |
|----|--|-------|
| 1. | I am aware that other alternatives are available to me besides removal of restrictions. I understand that I can apply to: lease my land, sell my land, convey my land by gift deed, subdivide my land, or place a mortgage against the land. | _____ |
| 2. | I understand that once restrictions are removed from my land, my land will be subject to any applicable zoning by any local city or borough. | _____ |
| 3. | I understand that once restrictions are removed, my land will be subject to any state or local property taxes. Income derived from the sale or rental of the land and/or its resources will be subject to any applicable federal and/or state income taxation. | _____ |
| 4. | I understand that Removal of Restrictions is a permanent action. Once the land becomes unrestricted , I CANNOT request assistance from the Bureau of Indian Affairs, and I CANNOT request that the land be put back in restricted status. | _____ |
| 5. | I understand that once restrictions are removed from my land, the land can be counted as an asset when calculating public assistance benefits, such as AFDC, SSI, etc., even if I may or may not presently receive any of these benefits. | _____ |
| 6. | I understand that after Removal of Restrictions, the land CAN be taken from me in order to satisfy any judgment or lien filed against me, whether it was attached before or after removal of restrictions. | _____ |
| 7. | I have received an informational sheet from the Bureau of Indian Affairs that explains the removal of restrictions process. | _____ |

Signature

Date