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KUMISION I TÅNO' CHAMORRO
Chamorro Land Trust Commission
APLIKASION (APPLICATION)

PARA UN GINASTA SENGKUENTA PESOS (UN BIÅHI HA') YA TI SIÑA MA NA' NA'LO

YA DEBI DI UN NA'EMPAS ÅNTES DI TRENTA DIHAS

(*$50.00 one-time non-refundable Processing Fee payable within 30 days of application*)

Klåsi *(Type)*: ☐ Para Guma' ***(Residential) - 100x100***
☐ Para Guålo' ***(Agricultural)*** Kuanto åreas un gågagao? ***(How many acres are you requesting?)***_____

APIYIDU *(Last Name)* **FINE'NENA *(First)*** **TALO' *(Middle)***

Numerun Asigridat Susiat (*Social Security Number):*

Estao *(Status)*: ☐Sotteru/ra *(Single)* ☐ Dumadanña' *(Co-Habitating)* ☐ Kasao *(Married)*
☐ Siparáo (*Legally Separated*) ☐ Dibotsiao *(Divorced)* ☐ Bi'udu/da *(Widowed)*

Fechan Finañågu-mu *(Date of Birth)*:

Tilifon *(Telephone)*: **Gima' *(Home)*:** **Che'cho' *(Work)*:**

Sagan Kinattåyi *(Mailing Address)*:

Kao gai tano' hao giya Guahan pat sino otro na bariu? *(Do you own any land on Guam or any other country?)*
☐ Hunggan *(Yes)* ☐ Ahe *(No)*

Kao sumasaga hao pat gu ma gualo' hao gi tano' Gobietnu? *(Do you live or farm on Government of Guam land?)*
☐ Hunggan *(Yes)* ☐ Ahe *(No)*
Yanggin Hunggan amanu guatu? *(If Yes, then where?)* _____

Hu afitma na dinanche yan magåhet todu I emfotmasion ni' nina'i-hu. *(I hereby certify that the information contained herein is true and correct.)* Hu kumprende na yanggen guåha emfotmasion guini ni' ti magåhet, siña ma kastiga yu' ya ti u ma apreba osino malingu todu I atkilåt-hu ni' ma nå'i yu' ginen este na aplikasion. *(I understand that any falsification of material information is grounds for disapproval of this application or termination of any land lease issued from this application.)*

_____ _____

Fitman Aplikånte *(Applicant's Signature)* **Fecha *(Date)***

(Subscribed and sworn to before me this _____ day of _____, _____ by _____.)

(SEAL) **Notary Public:**_____

Para I Kumision Ha' *(For Commission use only)*

Chamorro Land Trust Commission Numerical Designation:_____

This application has been properly completed and filed on _____
am
day of _____, _____, **at** _____pm

by:_____
Authorized Commission representative