

RESOLUTION OF THE GOVERNING BODY
OF THE
THREE AFFILIATED TRIBES
OF THE
FORT BERTHOLD INDIAN RESERVATION

WHEREAS, This Nation having accepted the Indian Reorganization Act of June 18, 1934 and the authority under said Act; and

WHEREAS, The Constitution of the Three Affiliated Tribes generally authorizes and empowers the Tribal Business Council to engage in activities on behalf of and in the interest of the welfare and benefit of the Tribes and of the enrolled members thereof; and

WHEREAS, The Three Affiliated Tribes have displayed a commitment to protecting the environment of the Fort Berthold Indian Reservation; and

WHEREAS, The water resources of the Fort Berthold Indian Reservation are of particular concern to the Tribal Business Council; and

WHEREAS, The Tribal Business Council desires to do all things possible and necessary to prevent, control, and eliminate water pollution on the Fort Berthold Indian Reservation.

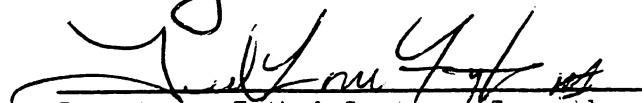
NOW THEREFORE BE IT RESOLVED, That Tribal Business Council of the Three Affiliated Tribes hereby applies to the U. S. Environmental Protection Agency for a grant authorized by Section 106 of the Clean Water Act to develop water quality standards, permitting procedures, and enforcement strategies.

C E R T I F I C A T I O N

I the undersigned, as Secretary of the Tribal Business Council of the Three Affiliated Tribes of the Fort Berthold Indian Reservation, hereby certify that the Tribal Business Council is composed of 7 members of whom 5 constitutes a quorum, 7 were present at a Special Meeting, thereof duly called, noticed, convened, and held on the 9 day of May, 1988; that the foregoing Resolution was duly adopted at such meeting by the affirmative vote of 7 members, 0 members opposed, 0 members abstained, 0 members not voting, and that said Resolution has not been rescinded or amended in any way.

Chairman (voting) (not voting).

Dated this 9 day of May, 1988

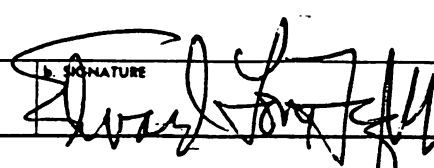

Secretary, Tribal Business Council

ATTEST:


Chairman, Tribal Business Council

STATE AND LOCAL NONCONSTRUCTION PROGRAMS

OMB Approval No. 80-R0180

FEDERAL ASSISTANCE		2. APPLICANT'S APPLICATION	a. NUMBER	3. STATE APPLICATION IDENTIFIER	a. NUMBER
1. TYPE OF ACTION (Mark appropriate box.)	<input type="checkbox"/> PREAPPLICATION	Leave Blank	b. DATE Year month day 19 88 5 09	Year month day 19	
	<input checked="" type="checkbox"/> APPLICATION				
	<input type="checkbox"/> NOTIFICATION OF INTENT (Opt.)				
	<input type="checkbox"/> REPORT OF FEDERAL ACTION				
4. LEGAL APPLICANT/RECIPIENT				5. FEDERAL EMPLOYER IDENTIFICATION NO.	
a. Applicant Name : Three Affiliated Tribes b. Organization Unit : Tribal Business Council c. Street/P.O. Box : P.O. 270 d. City : New Town, e. County : Mountrail f. State : North Dakota g. ZIP Code: 58763 h. Contact Person (Name & telephone No.) : Rich Schilf (701) 627-3627				a. NUMBER b. TITLE : Water Pollution Control	
7. TITLE AND DESCRIPTION OF APPLICANT'S PROJECT				8. TYPE OF APPLICANT/RECIPIENT	
Three Affiliated Tribes Water Pollution Control Program. If this grant application is funded the TAT will develop water quality standards, a pollutant permitting system, an enforcement strategy, and a cooperative agreement with ND.				A— State B— Interstate C— Substate District County City F— School District G— Special Purpose District H— Community Action Agency I— Higher Educational Institution J— Indian Tribe K— Other (Specify):	
10. AREA OF PROJECT IMPACT (Names of cities, counties, States, etc.)			11. ESTIMATED NUMBER OF PERSONS BENEFITING	9. TYPE OF ASSISTANCE	
Fort Berthold Indian Res.			7000	A— Basic Grant B— Supplemental Grant C— Loan D— Insurance E— Other Enter appropriate letter(s)	
13. PROPOSED FUNDING		14. CONGRESSIONAL DISTRICTS OF:		12. TYPE OF APPLICATION	
a. FEDERAL	45,016 .00	a. APPLICANT	ND 1	A— New B— Renewal C— Revision D— Continuation Enter appropriate letter	
b. APPLICANT	15,005 .00	b. PROJECT	ND 1	E— Augmentation F— Other (Specify):	
c. STATE	.00	16. PROJECT START DATE Year month day	19 88 6 1	G— Increase Dollars H— Decrease Dollars I— Increase Duration J— Decrease Duration K— Cancellation Enter appropriate letter(s)	
d. LOCAL	.00	17. PROJECT DURATION	12 Months	NA	
e. OTHER	.00	18. ESTIMATED DATE TO BE SUBMITTED TO FEDERAL AGENCY	19 88 5 10	19. EXISTING FEDERAL IDENTIFICATION NUMBER	
f. TOTAL	60,021 .00			A-008475-87	
20. FEDERAL AGENCY TO RECEIVE REQUEST (Name, City, State, ZIP code)				21. REMARKS ADDED	
U.S. Environmental Protection Agency, Denver, CO				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
22. THE APPLICANT CERTIFIES THAT		a. To the best of my knowledge and belief, data in this preapplication/application are true and correct, the document has been duly authorized by the governing body of the applicant and the applicant will comply with the attached assurances if the assistance is approved.		b. If required by OMB Circular A-95 this application was submitted, pursuant to instructions therein, to appropriate clearinghouses and all responses are attached: (1) <input type="checkbox"/> No response <input type="checkbox"/> Response attached (2) <input type="checkbox"/> (3) <input type="checkbox"/>	
23. CERTIFYING REPRESENTATIVE		a. TYPED NAME AND TITLE Edward Lone Fight Tribal Chairman		b. SIGNATURE  c. DATE SIGNED Year month day 19 88 5 9	
24. AGENCY NAME			25. APPLICATION RECEIVED Year month day		
26. ORGANIZATIONAL UNIT			27. ADMINISTRATIVE OFFICE		
29. ADDRESS			28. FEDERAL APPLICATION IDENTIFICATION		
31. ACTION TAKEN			30. FEDERAL GRANT IDENTIFICATION		
<input type="checkbox"/> a. AWARDED <input type="checkbox"/> b. REJECTED <input type="checkbox"/> c. RETURNED FOR AMENDMENT <input type="checkbox"/> d. DEFERRED <input type="checkbox"/> e. WITHDRAWN		32. FUNDING a. FEDERAL \$.00 b. APPLICANT .00 c. STATE .00 d. LOCAL .00 e. OTHER .00 f. TOTAL \$.00		33. ACTION DATE Year month day 19	
		34. STARTING DATE Year month day 19		35. CONTACT FOR ADDITIONAL INFORMATION (Name and telephone number)	
		36. ENDING DATE Year month day 19		37. REMARKS ADDED <input type="checkbox"/> Yes <input type="checkbox"/> No	
38. FEDERAL AGENCY A-95 ACTION		a. In taking above action, any comments received from clearinghouses were considered. If agency response is due under provisions of Part 1, OMB Circular A-95, it has been or is being made.		b. FEDERAL AGENCY A-95 OFFICIAL (Name and telephone no.)	