

**THE FORT DEFIANCE CHAPTER**  
**P.O. Box 366**  
**Fort Defiance, AZ 86504**  
**Phone: (928) 729-4352 / Fax: (928) 729-4353**

**• HEAVY EQUIPMENT USAGE FORM •**

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Physical Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 \_\_\_\_\_ Date & Time to be used: \_\_\_\_\_

Type of Equipment Requested: \_\_\_\_\_ Are you registered with the Fort Defiance Chapter? \_\_\_\_\_

EQUIPMENT(S)	REGISTERED FORT DEFIANCE CHAPTER MEMBER	NON-REGISTERED FORT DEFIANCE CHAPTER MEMBER	BUSINESS CONTRACTOR
<b>Backhoe</b>	<b>\$50.00 p/h x 6% = \$53.00</b>	<b>\$70.00 p/h x 6% = \$73.50</b>	<b>\$80.00 p/h x 6% = \$84.00</b>
<b>Motor Grader</b>	<b>\$60.00 p/h x 6% = \$63.60</b>	<b>\$75.00 p/h x 6% = \$78.75</b>	<b>\$90.00 p/h x 6% = \$94.50</b>
<b>Farm Tractor</b>	<b>\$30.00 p/h x 6% = \$31.80</b>	<b>\$45.00 p/h x 6% = \$47.25</b>	<b>\$60.00 p/h x 6% = \$63.00</b>

\_\_\_\_\_ Backhoe \_\_\_\_\_ Farm Tractor \_\_\_\_\_ Census #: \_\_\_\_\_  
 \_\_\_\_\_ Motor Grader \_\_\_\_\_ Verified By: \_\_\_\_\_

**Indicate the type of service to be performed with the equipment requested:**

\_\_\_\_\_ Burial/Location: \_\_\_\_\_ Homesite Leveling (Attach copy of Homesite lease)  
 \_\_\_\_\_ Farm Plot \_\_\_\_\_ acre(s) \_\_\_\_\_ Road Improvement  
 \_\_\_\_\_ Construction  
 \_\_\_\_\_ Other \_\_\_\_\_ \*FDC does not dig trash pit. Need consent from Navajo Nation EPA.

**FORT DEFIANCE CHAPTER EQUIPMENT REQUIREMENTS:**

1. The Fort Defiance Chapter will provide the equipment operator.
2. You must have a valid Home-site, grazing and land use permits to eliminate any and all disputes.
3. All services are charged by the hour commencing at the project site(s). Any additional hour(s) that is needed to complete the Project(s), payment has to be made first.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE MAKE ALL MONEY ORDERS PAYABLE TO:  
**FORT DEFIANCE CHAPTER**  
**P.O. BOX 366**  
**FORT DEFIANCE, AZ 86504**



**For Chapter Use Only**

Approved By: _____	Date: _____
Receipt No: _____	Amount Paid: _____ Date Paid: _____
Money Order No: _____	Date Completed: _____
<b>*Chapter Manager will approve / disapprove before the Service (s)</b>	Completed By: _____

**\*Please draw a map to the location of the project on the back\***