

Reference ID
(Internal Use Only): _____

Legal Description: _____

BIA Lease Number: _____

Compliance Due Date: _____

OMB# 1076-0180
Expires XX-XXXX
OMB# 1076-0180
Expires XX-XXXX



Assignment Liability

Lessee Contact Information:

Assignee: _____ Phone Number: _____

Address: _____

City: _____

State: _____

Zip: _

Non-Compliance Issue(s):

The following work shall be completed by _____:

See letter for other pertinent information regarding instructions, extensions & regulations.

I/We assume the responsibility of the above corrective actions related to the above described lease.

Name (Printed) _____

Signature _____

Date _____