



DECLARATION OF INTEREST IN LEASE

Assessment Date : January 1, 2027

In accordance with 24 NNC Sec. 211 (a) each owner must file a declaration of its interest in any lease on or before April 1st following each assessment date, except for business site leases, which are due May 15th following each assessment date. The Office of the Navajo Tax Commission (ONTC) may, by Form 245 or regulation, require additional information and documents, which it deems necessary for proper and efficient administration of the tax.

1. Taxpayer Federal TIN/SS/EIN # : _____			
2. Name of Taxpayer : _____			
3. Business Address : _____ POB or StreetCitySt.Zip			
E-mail: _____		Telephone No. : () _____	
4. a. Type of Operation Conducted on Lease : ☐ Production of Oil, Gas, Hydrocarbons, Helium etc ☐ Mining Lease (Coal, Sand, Gravel, Uranium, etc) ☐ Communication System (Cellular, Microwave, Paging, Reseller, Telephone Provider of Service or Equipment or REA) ☐ BUSINESS SITE LEASE (Retail or non-Retail) ☐ RESIDENTIAL ☐ ROW Lease/Permit (Pipeline, Transmission, etc) ☐ Permits (Revocable, Temporary, Emergency Op Agreement, etc) ☐ Multi-County Contractor (Construction, Drilling, etc) ☐ Electric Power (Generation, Distribution, Transmission, REA) ☐ Other, specify : _____			
4. b. Type of Land Operating on: (Circle one) ☐ Tribal Trust or Tribal Fee ☐ Private ☐ State ☐ BLM ☐ Allotment ☐ OTHER: _____			
5. Name of Operator/Business : _____			
6. Lease/Permit No. : _____ Well/Unit Name: _____		7. Your Percent Interest in Lease/Well/Permit : WI _____ ORR _____ OP _____ OTHER _____	
8. a. Do You Own Interests In More Than One Lease? Yes ☐ No ☐ <i>If answer is yes, a separate Form 200 must be completed for each lease, interest and/or permit.</i>		8. b. Effective Date of assignment of interest: (MM/DD/YYYY) _____	
9. a. Are You Related To Any Other Lease Owner? Yes ☐ No ☐			
9. b. Name and Address of RELATED OWNER: _____			
9. c. Name and Address of LESSOR (aka Base lease owner): _____			
10. Physical Location of Lease (Township, Range, Section) : _____ State :County :Agency:Chapter:			
11. CHANGES TO THE STATUS OF LEASE: ☐ SOLD LEASE or INTEREST ☐ LEASE TRANSFERRED ☐ EXPIRED LEASE ☐ PENDING APPROVAL ☐ EMERGENCY OPERATING AGRMT. ☐ REVOCABLE USE PERMIT ☐ NON-PROFIT ☐ OTHER: _____		IF SOLD OR TRANSFERRED, New Owner's Name & Address: Owner Name/Business NameCitySTZIP New Owner's Telephone Number : _____ New Owner's Email Address: _____ Date Lease/Permit Expired : _____ Date Property Was Sold : _____ How Much Was Property or Interest Sold for (\$): _____	
I declare that the information contained in this document and any attachments thereto is true and correct to the best of my knowledge and belief pursuant to all Navajo Nation laws and regulations.			
X _____ Taxpayer or Duly Authorized Agent Signature		_____ Print or Type Name	
		_____ Date	