

**Information Sheet for a Request  
to the Council on American Indian Concerns  
for Study of a Suspected or Proven Burial Site**

(Incomplete Forms are Welcomed)

**I. Name of Interested party or Group:** \_\_\_\_\_

Name of Contact Person: \_\_\_\_\_

Address of Contact Person: \_\_\_\_\_

\_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

**II. If Applicable, American Indian tribe or affiliation**

\_\_\_\_\_

**III. Location of site of known or suspected burials:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IV. Owner of Property** \_\_\_\_\_ **Phone** \_\_\_\_\_

Address: \_\_\_\_\_

**V. Please list the nature of the evidence you have of aboriginal, prehistoric, or American Indian burials at this site.**

A. Maps: \_\_\_\_\_

B. Books: \_\_\_\_\_

C. Records: \_\_\_\_\_

D. Statements of persons with knowledge: \_\_\_\_\_

1. Persons with historical or traditional knowledge: \_\_\_\_\_

2. Persons who have actually seen physical indications of a burial: \_\_\_\_\_

Please attach copies of the relevant portions of such maps, books or records.

Please attach written statements of persons with knowledge.

**VI. Has the site been surveyed by a professional archeologist?** Yes\_\_\_ No\_\_\_

Please attach a copy of any archeological report.

**VII. What applications for development or environmental permits or zoning changes are pending or have been issued?** Has the appeal period expired?

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**VIII. Do you or your group oppose the application(s) for development or environmental permits or zoning changes** even if proper and legal steps are taken to protect any burial site(s) or mitigate any disturbance? \_\_\_\_\_

**IX. What development or land use change of the actual burial site(s) is occurring or is about to occur?** \_\_\_\_\_

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**X. Please concisely state why you believe the Council on American Indian Concerns should study this site.**

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**XI. Please detail what action, if any, you believe is needed by the Council?**

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**XII. The Georgia Council on American Indian Concerns acts under provisions of the Georgia Code (44-12-260 through 285).** Please list other Georgia or federal statutes or laws which you feel are applicable in this situation.

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

Title: \_\_\_\_\_

For further information call (770) 389-7265. Please fold and staple and return this form to the address below:

Return Address:

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**Council on American Indian Concerns  
c/o Historic Sites Region Office  
2600 Highway 155 SW, Suite D  
Stockbridge, GA 30281**