

EI-8417
CD

**NORTHERN CHEYENNE TRIBE
TRIBAL HISTORIC PRESERVATION OFFICE
P.O. Box 128
Lame Deer, Montana 59043
Tel:(406) 477-6035 Fax: (406) 477-6491**

Native American Consultation Response Form

Site Name:	STB Docket No. AB-33 (Sub-No. 260X) EA
TCNS Notification ID Number:	
Site Address:	Surface Transportation Board
Fax:	Attn: Victoria Rutson
1(317) 373-3043	

Response:

- > **REQUEST ADDITIONAL INFORMATION** _____ (Initials of duly authorized Tribal Official) I require the following additional information in order to provide a finding of effect for this purpose undertaking: _____
- > **NO ADVERSE EFFECT** _____ (Initials of duly authorized Tribal Official) I believe the proposed project would have no adverse effect on these properties.
- > **ADVERSE EFFECT** _____ (Initials of duly authorized Tribal Official) Based on the information given, I believe the proposed project would cause an adverse effect on these properties.
- > **NO INTEREST** _____ (Initials of duly authorized Tribal Official) I have identified that there are no properties of religious and cultural significance to the Northern Cheyenne in the proposed construction area.
- > **NO EFFECT** _____ (Initials of duly authorized Tribal Official) I have determined that there are no properties of religious and cultural significance to the Northern Cheyenne Tribe that are listed on the National Register within the area of potential effect or that the proposed project will have no effect on any such properties that may be present.
- > **NO COMMENT** CF (Initials of duly authorized Tribal Official)
- > **Other (Specify)** _____

Exception: If archaeological materials or human remains are encountered during construction, the State Historic Preservation Office and applicable Native American Tribes will be notified.

CF
Signature

7/15/08
Date

Mr. Conrad Fisher, Director N.C.T./THPO
Printed Name

1(406) 477-6035
Telephone No.