



SNOQUALMIE INDIAN TRIBE

BURIAL AND FUNERAL ASSISTANCE

PRE-PLANNING APPLICATION

APPLICATION

The Snoqualmie Indian Tribe has established the following criteria with the intent to ensure the Burial and Funeral Assistance Program provides financial assistance to meet the basic needs of the Tribal community in accordance with the Tribe's General Welfare Policy.

ELIGIBILITY

For Pre-Planning Assistance, the applicant must be an adult enrolled Snoqualmie Tribal Member or hold power of attorney for that Tribal Member. At the time of passing, a separate application for Burial and Funeral Assistance will need to be submitted by the Executor (or other eligible applicant) to access remaining funds.

REQUIREMENTS

- A maximum of \$20,000 may be accessed for Pre-Planning Assistance, which is deducted from the Tribal Member's overall Burial and Funeral Assistance benefit of \$30,000. No additional funding above the total \$30,000 cap will be approved upon the Tribal Member's passing.
- Eligible items for Pre-Planning Assistance are limited to covering expenses associated solely with funeral services and burial. Pre-Planning Assistance may be used for the following items: funeral home expenses, plots or burial liners, wills and estate fees, headstones/grave markers, floral arrangements, urns, and caskets.
- Pre-Planning Assistance new requests may **only** be accessed by direct payment to vendor with a separate application for each vendor. An invoice and W-9 for the vendor must be submitted with this application.
- Notwithstanding the foregoing, reimbursement for Pre-Planning Assistance may be approved on a limited basis for eligible items, with acceptable receipts, that were purchased before October 11, 2018, the effective date of Version 3.0 of the Burial and Funeral Assistance Policy, only under the following circumstances:
 - i) A living, adult enrolled Snoqualmie Tribal Member or power of attorney may apply for reimbursement to the Tribal Member only.
 - ii) An Executor or other eligible applicant may apply for reimbursement to a deceased Tribal Member's estate if the Tribal Member passed away after May 12, 2018, and before October 11, 2018, the effective date of Version 3.0 of the Burial and Funeral Assistance Policy.
- It is the responsibility of the applicant to maintain their own records. The Tribe will not be responsible for providing documentation at time of passing for any expenses that were pre-paid.
- Program benefits are subject to change and may increase/decrease based on available funding or by Snoqualmie Indian Tribal Council Resolution.

ADDITIONAL INFORMATION

- DignityMemorial.com or 1-800-34-DIGNITY is a great resource that provides individual pre-planning services in one place. They have multiple locations through the United States.

**APPLICATIONS CAN BE SCANNED, FAXED, MAILED OR HAND DELIVERED TO THE
SNOQUALMIE TRIBAL OFFICE AT:**

ATTN: GENERAL RESOURCES DEPARTMENT
MAIL: P.O. 969, SNOQUALMIE, WA 98065

FAX: (206) 202-4535
EMAIL: GENERALRESOURCES@SNOQUALMIETRIBE.US



SNOQUALMIE INDIAN TRIBE BURIAL AND FUNERAL ASSISTANCE PRE-PLANNING APPLICATION

PERSONAL INFORMATION OF TRIBAL MEMBER-----

Tribal Member: _____

Mailing Address: _____

City, State & Zip: _____

Social Security number: _____ Enrollment number: _____ DOB: _____

Executor's Name (if applicable for reimbursement) _____

Do you have a will in place? YES NO

VENDOR INFORMATION-----

Vendor Name: _____

Point of Contact: _____

Mailing Address: _____

City, State & Zip: _____

Phone: _____ Fax: _____

Email: _____

Type of goods or services being requested: (circle all that apply for the above vendor)

Funeral Home Services Casket/Urn Flowers Plot Marker/Headstone Will/Estate Planning Other: _____

Type of request: **Payment to VENDOR** **Reimbursement** (only allowed for items purchased prior to May 2018)

For a vendor payment an invoice and W-9 must be attached. For a reimbursement an itemized receipt must be attached

Amount requested: \$ _____

By accessing the Burial and Funeral Assistance Program benefit, I recognize it is the intent of Tribal Council that the Program be funded from the Tribe's general fund, and that payments issued under the Program will not be subject to state or federal taxation and will not reduce fixed income or other benefits of the recipients. However, recipients should consult with their own tax and/or legal professionals to determine actual tax and benefit consequences.

I agree to repay any funds that the Tribe deems to have been misused, and that the Tribe may pursue any available remedies at law and/or equity to recover misused funds.

By signing, I certify the information contained in this application is complete and accurate to the best of my knowledge. I understand that I am signing this application under penalty of criminal prosecution if I knowingly give false information which results in payment to which I am not entitled. I agree that the General Resources Department may contact other tribal programs for pertinent information as it applies to this application. I understand that the funding request above will be deducted from my overall Burial and Funeral Assistance benefit, which will reduce the amount available to my estate for future burial and funeral assistance.

SIGNATURE: _____ DATE: _____