



PAWNEE NATION HOUSING AUTHORITY NON-NAHASDA LAWN MOWING SERVICE REQUEST & AUTHORIZATION FORM

Date of Request: _____

Resident Information

Name:		Phone #:	
Address:		Email:	

Lawn Mowing Service Request

I am requesting voluntary lawn mowing services for the non-NAHASDA housing unit identified above.

I understand and acknowledge the following:

- The cost of lawn mowing is **\$40.00 per completed cut**.
- Lawn mowing may be scheduled **approximately every two weeks** during the mowing season; however, the Housing Authority does not guarantee a specific mowing date or a specific frequency of service.
- Mowing schedules may be affected by weather, grass growth, staffing, equipment availability, holidays, or other operational circumstances.
- I must keep the lawn reasonably accessible and remove items such as toys, hoses, lawn furniture, vehicles, trash, pet waste, and other objects that could interfere with mowing.
- I am responsible for securing pets during the mowing service.
- I will notify the Housing Authority of known hazards on the property, including sprinkler heads, exposed wires, holes, or other conditions that may create a safety concern.
- The \$40.00 charge applies to each completed lawn cut.
- Additional services or work outside of routine lawn mowing are not included in the \$40.00 fee unless separately authorized.
- If the lawn cannot be safely mowed because of excessive debris, unsafe conditions, animals, vehicles, or other obstructions, the Housing Authority may skip that mowing cycle.
- Failure to pay applicable mowing charges may result in removal from the mowing rotation.
- I may request cancellation of lawn mowing services by notifying the Pawnee Nation Housing Authority.

Requested Service

Please select one: ☐ **One-time lawn mowing service** ☐ **Ongoing lawn mowing rotation**

Are there any pets on the property? ☐ Yes ☐ No

If yes, please describe: _____

Are there any known hazards or conditions the mowing crew should be aware of?

☐ Yes ☐ No If yes, please describe: _____

Payment Information

Payment Method: ☐ Check ☐ Money Order

Payment is due according to Pawnee Nation Housing Authority policies. Record of payment(s) will be added to the residents rent account under “Other” for additional charges to the account.

Resident Authorization

By signing below, I confirm that I have read and understand the terms of the Pawnee Nation Housing Authority's Non-NAHASDA and Lease Purchase Lawn Mowing Service program.

I voluntarily request lawn mowing services and agree to the **\$40.00 charge per completed lawn cut**. I understand that placement on the mowing rotation does not guarantee a specific service date or biweekly service.

I further understand that the Housing Authority may decline, postpone, skip, or discontinue service when conditions prevent safe or reasonable mowing or when program requirements are not met.

Resident Signature: _____ **Date:** _____

FOR HOUSING AUTHORITY USE ONLY

Date Request Received: _____ **Received By:** _____

Property Verified as Non-NAHASDA or LP Unit: ☐ Yes ☐ No

Service Area Verified: ☐ Yes ☐ No

Authorization Complete: ☐ Yes ☐ No

Added to Mowing Rotation: ☐ Yes ☐ No

Service Type: ☐ One-Time ☐ Ongoing Rotation

Effective Date on Rotation:

Service Record

Date	Service Completed	Charge	Payment Received	Method of Payment	Staff Initials
_____	☐ Yes ☐ No	\$40.00	\$ _____	_____	_____
_____	☐ Yes ☐ No	\$40.00	\$ _____	_____	_____
_____	☐ Yes ☐ No	\$40.00	\$ _____	_____	_____
_____	☐ Yes ☐ No	\$40.00	\$ _____	_____	_____
_____	☐ Yes ☐ No	\$40.00	\$ _____	_____	_____
	☐ Yes ☐ No	\$40.00	\$ _____		