

Navajo Nation Risk Management Program

Heavy Equipment & Machinery

Addition, Deletion or Change Form

Post Office Box 1690 Window Rock, Arizona 86515 Phone: (928) 871-6335 Fax: (928) 871-6087

NN Government/	Dept. #
NN Enterprise/NN Chapter Name:	
Mailing Address:	
City:	State: Zip:
Physical Address:	
City:	State: Zip:
Contact Name:	Telephone #:
Position Title:	Email:
Equipment / Machinery Description # 1	
☐ Addition ☐ Deletion ☐ Change indicate reason:	
Year: Make:	Model:
Vin #:	Serial #:
License Plate #	NN Property Tag ID#:
100% Contractor's Equipment Value	☐ Owned ☐ Rental ☐ Lease ☐ Donated ☐ Transfer
*Provide supporting documentation i.e., Purchase, Rental or Lease Agreement	
Equipment / Machinery Description # 2	
Addition Deletion Change indicate reason:	
Year: Make:	Model:
Vin #:	Serial #:
License Plate #	NN Property Tag ID#:
100% Contractor's Equipment Value	Owned Rental Lease Donated Transfer
*Provide supporting documentation i.e., Purchase, Rental or Lease Agreement	
Equipment / Machinery Description # 3	
☐ Addition ☐ Deletion ☐ Change indicate reason:	
Year: Make:	Model:
Vin #:	Serial #:
License Plate #	NN Property Tag ID#:
100% Contractor's Equipment Value	☐ Owned ☐ Rental ☐ Lease ☐ Donated ☐ Transfer
*Provide supporting documentation i.e., Purchase, Rental or Lease Agreement	
Name & Title Sign	nature Date