

# Notice of Decision to Applicant Template

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF INDIAN AFFAIRS

Region/Agency  
Address  
City, State, Zip Code

Applicant  
Address  
City/Town, State, Zip

Dear Applicant:

On **[date]**, you submitted an application for a grant of right-of-way for the **[purpose]** over or across, lands held in [trust or restricted status], specifically, for a term of \_\_\_\_\_ years.

This letter serves as notice that the grant of right-of-way was **approved/disapproved** on **[Date]**. You are hereby advised of your right to appeal as provided in 25 Code of Federal Regulations Part 2 Appeals from Administrative Actions. This decision may be appealed to the Regional Director, **[Name]** Regional Office, in accordance with the regulations contained in 25 CFR Part 2 (copy enclosed). Your notice of appeal must be mailed or delivered to our office with 30 days of receipt of this letter.

The date of filing is the date it is postmarked or the date it is personally delivered to our office. Your notice of appeal must include your name, address and telephone number and if possible a copy of this decision. Your Notice should include the names and address of the interested parties who may be affected by this decision. The notice and envelope in which it is mailed should be clearly marked "Notice of Appeal".

A copy of your notice of appeal must be mailed to the Regional Director, **[Name]** Regional Office, **[Address], [City/Town], [State], [Zip]**, and to each interested party known to you. Your notice of appeal must certify that you have sent copies to the above identified parties.

If no notice of appeal is timely filed, this decision will become final for the Department of Interior at the expiration of the appeal period. No extension of time may be granted for the filing of a notice of appeal. Notwithstanding any appeal, pursuant to 25 CFR 169.301, a right-of-way document is effective on the date we approve the right-of-way document.

I certify that I have sent copies of this letter to all individuals on the attached list of Interested Parties. Should you have any further questions, please contact **[Name], [Title]**, at **[Phone, Number]**.

Sincerely,

**Superintendent or Regional Director**