



**TRIBAL COURT OF THE  
CONFEDERATED TRIBES  
OF SILETZ INDIANS OF  
OREGON**

**INSTRUCTION FOR FILING A PETITION IN TRIBAL COURT**  
Siletz Tribal Court Rules and Procedures §3.023

**Court Address**  
P.O.Box 549, Siletz, OR 97380  
201 SE Swan Ave. Siletz, OR 97380

**Court telephone no.**  
(800) 922-1399  
(541) 444-8228  
(541) 444-8270 Fax

**IMPORTANT!**

Fill out the Information sheet, Petition Form and file completed petition with filing fee in Tribal Court.

**Instruction for filing a Petition**

**The person/agency filing is the Petitioner. The person/agency being filed against is the Respondent.**

**You must file a Petition, pay the filing fee and have the Respondent served with the documents. For complete instructions, refer to the Siletz Tribal Court Rules and Procedures. The Siletz Tribal Court Rules and Procedure Ordinance can be found at [www.ctsi.nsn.us](http://www.ctsi.nsn.us).**

**\*Note: Tribal Court will assign a case number when you file the Petition.**

If you have any questions, please contact Tribal Court at (541) 444-8228 or 1-800-922-1399 ext. 1228.

To file a Petition:

Mail: Siletz Tribal Court, P.O. Box 549, Siletz, OR 97380

Fax: (541) 444-8270

Physical address: 201 SE Swan Ave., Siletz, Oregon



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**COURT INFORMATION SHEET**

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201 SE Swan Ave. Siletz, OR 97380

**Court telephone no.**  
(800) 922-1399  
(541) 444-8228  
(541) 444-8270 Fax

Name: \_\_\_\_\_  
Last Middle Initial First

Telephone Number (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

Mailing Address (if different than above) \_\_\_\_\_

Please check all statements that apply to you:

- \_\_\_\_\_ I would like to file a Petition for Judgment (see Siletz Tribal Court Rules and Procedure Ordinance)
- \_\_\_\_\_ I would like to file a Petition on behalf of Petitioner.

What is the name & address of the person/agency against whom your Petition is being filed?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- \_\_\_\_\_ I am a member of the Confederated Tribes of Siletz Indians of Oregon.
- \_\_\_\_\_ I am not a member of the Confederated Tribes of Siletz Indians of Oregon, and hereby voluntarily submit to the jurisdiction of the Siletz Tribal Court
- \_\_\_\_\_ I am admitted to the Siletz Tribal Bar. (Yes or No)
- \_\_\_\_\_ I am/have paid the filing fee.

I declare that the above statements are true and made in good faith.

\_\_\_\_\_  
 Applicant

Date \_\_\_/\_\_\_/\_\_\_

