

GWYD DBP
CHEROKEE NATION®



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SPECIAL EVENT PERMITS APPLICATION

Application must be submitted 20 days before the beginning of the special event

#1 EVENT COORDINATOR

NAME	
PHONE #	CELL PHONE #
EMAIL ADDRESS	

2 EVENT / FEES

<input type="checkbox"/> Tribal Corporation - \$ 100
<input type="checkbox"/> Other _____

#3 APPLICANT INFORMATION

LEGAL NAME			
FEDERAL EMPLOYER IDENTIFICATION NUMBER		SOCIAL SECURITY NUMBER	
MAILING ADDRESS			
CITY	STATE	COUNTY	ZIP
DAYTIME PHONE #	EVENING PHONE #	FAX #	CONTACT PERSON

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#4 SPECIAL EVENT INFORMATION

NAME OF EVENT			
EVENT ADDRESS			
CITY	STATE	COUNTY	ZIP
EST # OF VENDORS (attach vendor list, if available)		TYPE OF EVENT	
CONTACT NAME AND PHONE #		DATE EVENT STARTS	DATE EVENT ENDS

#5 A Sole Owners, General Partner, Corporate Officer, Member or Authorized Representative must sign this application.

<p>I, the undersigned applicant or authorized representative, or if a corporation, a responsible corporate officer, for reporting and remitting fees, declare under the penalties of perjury that I have examined this application and attachments and to the best of my knowledge that facts set forth are true and correct, and that the requirements hereunder will be carried out in accordance with the laws of Cherokee Nation and the rules and regulations of Cherokee Nation Tax Commission.</p>		
<p>SIGN HERE →</p>		
<p>TYPE OR PRINT NAME AND TITLE</p>	<p>SIGNATURE</p>	<p>DATE</p>

\$100.00
 This fee must accompany
 this application

**CHEROKEE NATION TAX COMMISSION
 REVENUE & TAXATION
 P.O. BOX 948
 TAHLEQUAH, OK 74465**