



Skokomish Indian Tribe

Tribal Center (360) 426-4232

N. 80 Tribal Center Road

FAX (360) 877-5943

Skokomish Nation, WA 98584

BUSINESS LICENSE APPLICATION

Complete all sections, on both sides of the application. Missing or illegible information may delay the application process. All applications must be signed and dated.

Name of Business - DBA:

Location(s) of Business:

Form of Business (check one) Sole Proprietorship Non-profit
Partnership (Limited liability? yes no) Corporation (Limited Liability? yes no)

Type of Business (check all that apply) Wholesale Retail Manufacture
Food Service Real Estate Construction Professional Service
Service Other (explain)

Description of Business/Trade

Names and Addresses of all owners and staff.

Name:
Address:
phone # e-mail:
Name:
Address:
phone # e-mail:
Name:
Address:
phone # e-mail:
Name:
Address:
phone # e-mail:

Tribal Member

yes no

yes no

yes no

yes no

Office Use Only

ID Type #

ID Type #

ID Type #

ID Type #

Have any owners previously done business on the reservation? yes no

If yes, name of Business(s). _____

By virtue of entering into a consensual relationship with the Skokomish Tribe I recognize that I am consenting to the jurisdiction of the Tribal Court for all matters that arise in connection with the licensed business.

I, hereby acknowledge and give consent to a background check.

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Name and Address of Person/Agent qualified to accept service of process: _____

_____ phone #

_____ cell #

_____ Fax #

_____ e-mail

Have you obtained an Environmental review if necessary? yes no If yes, date: _____

Do you certify that you have obtained all appropriate licenses and certifications from the state (i.e. professional or medical license, daycare certification, etc.)? yes no

License or certification number, expiration date, and Type: _____

Type of license requested (select one)

Temporary (7 days or less) \$10

Seasonal (three months or less) \$25

Permanent (more than three months) \$50

Office Use Only	
Chk #	cash rcd
Chk #	cash rcd
Chk #	cash rcd

Permanent licenses must be renewed yearly by submitting a renewal form and fee.

I hereby certify that the information provided in this application is true and complete to the best of my knowledge and belief. I certify that I am not forbidden from doing business in the State or on the Reservation. Further, I will comply with all tribal laws and regulations.

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

This is only an application to do business on the Skokomish Indian Reservation. The Skokomish Tribe cannot guarantee the goods or services provided pursuant to a tribal business license.

Approved by: _____ **Date:** _____