PUYALLUP TRIBAL BUSINESS APPLICATION

(Physical Address) 3001 Puyalupabsh St.
(Mailing Address) 3002 Duct Cho St.
Tacoma, WA 98404

Business Application - January 1, ____ - December 31, ____

A) Check # & Amount_____Cash_____Money Order # & Amount _____

B) License for: Business License Fee: $250.00_____, # of Employees ____
Liquor License Fee: $250.00_____, # of Employees _____

C) Describe Business: smoke shop, lounge, dance hall, pawn shop, etc.

_____

D) Name of Business & Address:_____

_____

E) Name (s) and Home address of licensee: (applicant) (In case of Emergency)

_____

F) Applicant's Telephone number (In case of Emergency) / Business & Fax No.
_____/_____/_____

G) Email Address _____

H) Name of Insurance company: _____

I) Names of Puyallup Tribal employees:

_____

_____

J) Names of suppliers

_____

_____

K) Total gross sales prior year_____(please provide financial statements)

L) Filing tax returns, April 30, July 31, October 31, January 31, of each calendar year.

M) Applicant signature_____ Date _____

NOTE: Business name/license has been issued for the business named on this application. If business ownership changes (or type-see c above), a new business application must be submitted.
NOTE: When you sign this application form. You agree to follow all Codes and Regulations of the PTOI.

For additional info, contact the:
Business Tax / License
Lindsay LaPointe-Nicks 253-573-7816
Lindsay.J.LaPointe-Nicks@PuyallupTribe-Nsn.gov