

OFFICE OF REVENUE COMMISSION

P.O. BOX 123 / 1 MAIN STREET KYKOTSMOVI, ARIZONA 86039

Phone: 928-734-3172 • Fax: 928-734-3179



HODETOLID LICENSE ADDITION

	(Must be 18 years o			
Please follow up on y	our application to ensure your Tour 30 days to complete the applica	* *		
	☐ New Applicant	\Box L	icense Renewal	
Company Name:				
*Hopi Enrollment N	Number:			
*Contact Person/Ov	vner:			
Address:	*Village:		State:	ZipCode:
Telephone #:	Cell Phone #		FAX #: .	
E-Mail Address:				
Ownership Inform	ation:			
☐ Partnership	☐ Sole Proprietor ☐	Corporation	☐ Step-O	n Guide
☐ Other:		_		
	ation for providing Tourism s		□ Bus □ Van	n
Color	Make & Model	Licens	se Plate Number	State
Provide information	on for all vehicles conducting	Tours on the	Hopi reservation:	
☐ List Driver (s)	☐ Copy of AZ Driver's License			
Other information:	:			
☐ Evidence of Certi	ficate of Liability Insurance	Site Visit	ation Permits issued by	y the Hopi Tribe - Cultural
(Hopi Tribe as C	ertificate Holder)	Preservat	ion Office	
engage in any business his/her designee. I under non-compliance. I herel to the best of my knowl Court; to include revoca	e by the laws of the Hopi Tribe, Ordinactivities or any tours until I have oberstand that operating a business on the certify that the information provided and that any false or misleading ation of my license, exclusion from the 17 and Policies of the Hopi Tribe.	otained a Tour lice the Hopi Reservati ed in the applicati g information prov	ense certificate signed by on is a privilege and ma on and other documents ided by me, may lead to	y the Chief Revenue Officer of by be revoked or suspended for submitted are true and correct legal action in the Hopi Triba
APPL	JCANT SIGNATURE		DATI	

THIS APPLICATION IS NULL AND VOID WITHOUT A SIGNATURE