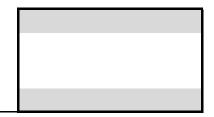


OFFICE OF REVENUE COMMISSION P.O. BOX 123 / 1 Main Street KYKOTSMOVI, ARIZONA 86039 Phone: (928) 734-3172 / Fax: (928) 734-3179



## **HOPI PEDDLER'S PERMIT APPLICATION**

(Must be 1	<b>5</b> years of age to a	pply for a Peddlers Perr	nit)	
PLEASE CHECK ONE OF THE FOLLOWING:	-			
DUPLICATE/REPLACEMENT Fee (\$2.	.00)	NEW APPLICANT		PERMIT RENEWAL
Applicant First & Last Name:	(2)	<b>X</b>		
	(Please	e Print )		
Address: P.O. Box		City	State	Zip
Date of Birth / DOB:				
Contact Information:				
Cell/Telephone Number	Message Phone Number		Email Address	
Please check items to be sold: Arts	s & Crafts	Food	Other _	
(Please Note: FEDERAL LAWS PROHIBIT Pirated DVD/CD's )				
THIS PERMIT MUST BE DISPLAYED AT ALL TIMES WHILE ENGAGING IN PEDDLING ACTIVITY.				
ONLY VEND IN DESIGNATED AREA OR PERMISSIBLE LOCATIONS.				
I hereby agree to abide by the laws of the engage in any peddling activities until I ha designee. I understand that peddling on th compliance. I hereby certify that the inform correct to the best of my knowledge and tha in the Hopi Tribal Court; to include revocation Triba	ave obtained a ped he Hopi Reservation hation provided in th at any false or misle on of my peddler p	dler permit signed by th n is a privilege and may he application and othe eading information prov	he Chief Revo y be revoked er documents vided by me,	enue Officer or his/her or suspended for non- s submitted are true and , may lead to legal action
Signature				Date
THIS APPLICATION IS NUI	-			
OFFICE USE ONLY				
Appproved By:		Date	:	
	Signature			

Permit Number:

ORC 9/7/2017 (Revised)

Comments: