



OFFICE OF REVENUE COMMISSION
 P.O. BOX 123 / 1 MAIN STREET
 KYKOTSMOVI, ARIZONA 86039
 PHONE: (928) 734-3172
 WEBSITE: www.hopi-nsn.gov

LICENSE NO. _____
OFFICE USE ONLY

TOUR LICENSE APPLICATION

(PLEASE TYPE OR PRINT LEGIBLY)

APPLICANT INFORMATION: NEW RENEWAL REPLACEMENT
 CORPORATION SOLE PROPRIETOR STEP-ON OTHER

COMPANY NAME: _____ PHONE #: () _____
NAME OF COMPANY TO BE DISPLAYED ON THE LICENSE CERTIFICATE

NAME OF GUIDE: _____ EMAIL: _____
FIRST M.I. LAST

COMPANY ADDRESS: _____
P.O. BOX/STREET CITY/STATE ZIP

I HEREBY AUTHORIZE REVENUE COMMISSION TO LIST MY GENERAL CONTACT INFORMATION: YES NO

VEHICLE INFORMATION (CORPORATION, SOLE PROPRIETORS, AND OTHER ONLY): POV BUS VAN RENTAL

INSURANCE COVERAGE: EXPIRATION DATE: _____ DL #: _____

_____ MAKE & MODEL COLOR LICENSE PLATE NO. STATE

DOCUMENT SUBMISSIONS (APPLICATION, INSURANCE, COPY OF DL):

EMAIL: KIANNA SOOHAFYAH, DEPUTY REVENUE COMMISSIONER KSOOHAFYAH@HOPI.NSN.US
 GAYVER PUHUYESVA, CHIEF REVENUE OFFICER GPUHUYESVA@HOPI.NSN.US

USPS: HOPI TRIBE - OFFICE OF REVENUE COMMISSION
 P.O. BOX 123 KYKOTSMOVI, AZ 86039

PAYMENT OPTIONS (CASH, CASHIER'S CHECK, MONEY ORDER, OR V/MC):

V/MC: HOPI TREASURERS DEPARTMENT AT (928) 734-3122 OR (928) 734-3124
 OFFICE HOURS: MONDAY - FRIDAY (9:00 AM - 3:00 PM)

LICENSE FEES:

✓	TYPE	START	END	FEE
	ONE YEAR			\$1,000.00

HOPI MEMBER			FEE
ENROLLMENT #		D.O.B	EXEMPT
REPLACEMENT CARD			\$5.00

HOPI CULTURAL PRESERVATION OFFICE FOR THEIR COMPLIANCE REQUIREMENTS): (928) 734-3614

I hereby agree to abide by the Laws and Regulations set forth by the Hopi Tribe's "Ordinance 17", to not engage in any tours until a license has been obtained from the Office of Revenue Commission (ORC). I hereby certify that the information provided on the application and supporting documents submitted are true and correct to the best of my knowledge. Any false or misleading information may lead to legal action within the Hopi Tribe Justice Courts; to include revocation of privileges and license(s) obtained.

SIGNATURE

DATE