

CHECKLIST MUST BE COMPLETED BEFORE THE APPLICATION CAN BE PROCESSED. PURSUANT TO R.Y.C. CHAPTER 32.118, T-111-14, CA#007-2023-9 & CA#30-2023-1

| APPLICATION COMPLETE. |
|-----------------------|
| |

- □ COPY OF STATE DRIVER LICENSE/IDENTIFICATION CARD OF PERMITEE.
- □ COPY OF ENROLLMENT CARD OF ENROLLED YAKAMA MEMBER (IF APPLICABLE).
- WORK PERMIT: MUST HAVE YN BUSINESS LICENSE, IF APPLICABLE, COMMERCIAL WOODCUTTING PERMIT, TIMBER SALE NAME/LOCATION, CONTRACT, PROGRAM MEMO/COMMITTEE ACTION (IF APPLICABLE).
- □ PAYMENT MADE PAYABLE TO: Yakama Nation Dept. of Revenue * We now accept Debit/Credit

☐ IN THE AMOUNT OF:

- **♦** \$15 (3-day)
- **♦** \$25 (1 month)
- **♦** \$55 (3 month)
- ♦ \$105 (6 month)
- ☐ EMAIL TO: revenue@yakama.com or MAIL TO: YN DOR PO BOX 151 TOPPENISH, WA 98948
- □ Or IN PERSON: 401 FORT RD. TOPPENISH, WA 98948, ROOM 205
- □ QUESTIONS: CONTACT (509)865-5121 EXT. 6069/6091/6037/6028

It is the RESPONSIBILITY of the Enrolled Member/Program to ensure the application is COMPLETE and ALL supporting documents are included in the packet. Incomplete applications will NOT be processed until it is complete with supporting documents. In order to protect our valued customers we will not store personal identifiable information, please resubmit all supporting documents needed with the application in order for it to be complete.

Missing documents is considered an incomplete application.

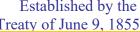
Established by the Treaty of June 9, 1855

FY25

DEPARTMENT OF REVENUE

Non-Refundable Non - Transferable

| | | | | | CP NO: | |
|---------|-------------------------|-----------------------------|--------------------------|----------------|----------------------------|------------------|
| | | | YAKAMA NA | TION | | |
| | S | PECIAL COURTESY (CL | OSED AREA) | WORK PERM | IT APPLICATION | |
| | | N | ew _ | _ Renewal | | |
| | | Please choose fro | <mark>om one of t</mark> | he followi | <mark>ng options:</mark> | |
| | 3-day | - \$15 Administrative | e fee | 1 Month · | - \$25 Administrative fee | , |
| | 3 Mon | th - <i>\$55 Administra</i> | tive fee | 6 Month - | - \$105 Administrative fe | ee |
| | | | | | ng Date: | |
| 1. | Permittee's Legal Nam | ne: | | | PHONE#: | |
| | · · | | (PRINT) | | | |
| 2. | Address of Permittee: | | | | | |
| 3. | Enrolled Member: | | | | Enrollment Number: | |
| 4. | Yakama Nation Progra | ım <u>OR</u> Business Name | w/YN License | e #: | | |
| 5. | Contact Person: | | | | | |
| | | | | | | |
| 7. | Route of Entry –Destir | nation/Location: | | | | |
| | Mill Creek Guard Sta | tion | Old Maid | S | ☐ Glenwoo | od |
| | Other (specific area(s) | : | | | | |
| | () | | | | | |
| 8. | Purpose(s) of Entry: | | | | | |
| | | | | | | |
| | | | | | | |
| Additic | onal documentation req | uired for approval pur | poses (Contr | act, Comm. A | Action, Bus. Lic., Memo/Le | etter) |
| Work F | Permit | | | | | |
| | | | | | | |
| | | Commercial Woodo | cutting Permi | t # | | |
| | | Loggers, please spe | cify Contract | Name & # | | <u>.</u> |
| | | Federal Employee, | or APPROVE |) Volunteers | | |
| | | Attorney, Scientist, | Biologist, Co | nsultant, or p | person under contract | |
| | | | | | | |
| | *If a permittee is r | no longer employed, t | he employer | must notify (| OOR to revoke their perm | its immediately. |
| 9. | Auto Make/Model/Ye | ar/License Plate Numb | per(s): <i>If mor</i> | e than 4 vehi | cles, please attach list | |
| | | | | | PLATE#: | |
| | | | | | PLATE#: | |
| | MAKE: | лоdel: | YEAR: | COLOR: | PLATE#: | |
| | | | | | PI ATF#: | |



FY25

Established by the Treaty of June 9, 1855 DEPARTMENT OF REVENUE

FOR OFFICE USE ONLY

| | APPLICATION COMPLETE FEE PA | | | AID: | | \$15 | \$25 | | \$55 | | \$105 | DATE MAILED: | |
|-----------------|-------------------------------|--|----------|---------------------|-----------|------|--------------|-----------------|------|--|-------|--------------|--|
| C | CR#: | | | | CR REF #: | | | DATE PICKED UP: | | | | | |
| DATE PROCESSED: | | | | DOR STAFF INITIALS: | | | REVIEWED BY: | | | | | | |
| | APPROVED | | DISAPPRO | OVED | | | | | | | | | |

LAW & ORDER COMMITTEE CHAIR/MEMBER SIGNATURE

| REASON FOR DISAPPROVAL: (IF APPLICABLE) |
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| ACTIONS TAKEN: |
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