

Yakama Nation Department of Revenue Vendor Permit Application Packet

CHECKLIST MUST BE COMPLETED BEFORE THE APPLICATION CAN BE PROCESSED.

PURSUANT TO R.Y.C. CHAPTER 30.02.21

- □ APPLICATION COMPLETE, DATED AND SIGNED.
- □ COPY OF STATE DRIVER LICENSE/IDENTIFICATION CARD OF APPLICANT
- □ COPY OF ENROLLMENT CARD (IF APPLICABLE).
- □ COPY OF FOOD HANDLERS CARD OF APPLICANT & WORKERS (IF APPLICABLE).
- □ PICTURE OF APPLICANT UPON PAYMENT.
- ☐ FEE PAID (FEE AMOUNT DEPENDENT UPON TYPE OF PERMIT PURCHASED).

VENDOR PERMIT PACKET CHECKLIST



YAKAMA NATION DEPARTMENT OF REVENUE

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VENDOR PERMIT APPLICATION

PLEASE PRINT IN BLACK OR BLUE INK, FEES NON-REFUNDABLE, NON-TRANSFERABLE APPLICANT MUST BE PRESENT FOR PICTURE

PERMIT NUMBER: VP 2026
DATE REC'D:
CASH RECEIPT:
PICK-UP:
STAFF:
REVIEW BY:

APPLICANT FIRST NAME:		MI:	Last:				
MAILING ADDRESS:			CITY		STATE	ZIP	
PHONE NUMBER: ()		DATE OF BIRTH	<u> </u>	EMAIL:			
DESCRIPTION OF APPLICAN	Γ: Height:	Weight:	Hair Color:	Eye Color:	SSN:		
				_, -,			
VEHICLE DESCRIPTION: USED FO	OR VENDING	MAKE:		MODEL:		YEAR:	
DRIVERS LICENSE NUMBER,	STATE & EXPIR	ATION:					
Vending Address/Location & Date(s):							
□ ARTS/CRAFTS □ FOOD		□ SERVICE T\	/PE:				
Pursuant to Law & Order CA#025-2015-9 and R.Y.C. Chapter 30.02.23(3), ALL FOOD VENDORS REQUIRED TO HAVE A VALID FOOD HANDLER'S CARD ON FILE – FHC #:							
HAS APPLICANT BEEN CONVICTE	D OF ANY CRIME W	ITHIN THE LAST TEN Y	EARS, INCLUDING MI	SDEMEANORS, 0	GROSS MISDEMEANORS	? 🗆 YES 🗆 NO	
IF YES, COURT(S) OF JURISDICTI	ON: 1:		2:		3:		
DO YOU HAVE ANY FELONY,	CRIME. THEFT. FR	AUD CHARGES PEN	DING NOW? □ YES	⊓ NO			
If Yes, list the nature of the o							
•	, ,	. ,					
PERMIT TYPE (CHECK ONE)					TOTAL FEE (INCLUDI	ES \$5 PROCESSING FEE)	
Daily					\$ 20.00		
Temporary NTE 3 days					\$ 35.00		
Six (6) Months					\$ 65.00		
Annual				\$ 130.00			
Expedite					\$ 10.00		
Annual; YAKAMA MEMBER -	ENROLLMENT #		+ \$ 5.00 Pro	cessing Fee	\$ ENROLLED		
SIGNATURES - I declare under penalty of perjury I declare that by my signature, I am authorized as the owner and designated representative to sign these documents and that all answers and statements are true, correct and complete. I understand that untruthful or misleading answers are cause for denial of my application and/or revocation of any permit. I further understand that the Yakama Nation may revoke, suspend, withdraw, or deny any permit granted for any reason(s) it deems to be in the best interest of the Yakama Nation. I consent to investigation of my personal history, criminal, driving, financial and credit record through any investigative or credit bureau. I Affirm that I will release and hold harmless any person, firm or entity that discloses information in accordance with this authorization. I will comply with all Tribal Laws and requirements applicable to my business and Consent to the jurisdiction of the Yakama Tribal Court and service of process in matters arising from the conduct of business. The Yakama Nation does not waive, alter, or otherwise diminish its sovereign immunity from suit for any action relating to or in accordance with the application or issuance of the business license. By submitting this application, Owner agrees that this application any resulting permit shall be governed by the laws of the Yakama Nation, and expressly submits to the jurisdiction of the Yakama Nation Tribal Courts for any and all business related disputes. Signature X Print X Date:							
YN Tribal Police	Annroya		_	v			
Homeland Security	Approve _ Approve	Disapprove Disapprove	Date:	X			
Law & Order Committee	Approve _ Approve _	Disapprove	Date:	^ _ x			
			_ 0.00.	^			

APPROVED WORKERS MUST BE DISPLAYED AND CURRENT AT ALL TIMES DURING VENDING EVENT						
Name & Enrollment #	Address	Phone	Food Handler Card No.			
1	REASON FOR DISA	APPROVAL				