2027

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
P.O. Box 151
Toppenish, WA 98948
Phone: (509) 865-5121 Ext. 6069 Ext. 6091 Ext. 6028 Ext.6107
revenue@yakama.com

VENDOR PERMIT APPLICATION

PERMIT NUMBER: VP- _____ 2027
DATE REC'D: _____
CASH RECEIPT: _____
PICK-UP: _____
STAFF:_____
REVIEW BY:_____

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

APPLICANT FIRST NAME:	**MI:**	**Last:**	
MAILING ADDRESS:	**CITY**	**STATE**	**ZIP**
PHONE NUMBER: ( )	**DATE OF BIRTH:**	**EMAIL:**	
DESCRIPTION OF APPLICANT: **Height:**	**Weight:**	**Hair Color:**	**Eye Color:** **SSN:**
VEHICLE DESCRIPTION: USED FOR VENDING	MAKE:	MODEL:	YEAR:

DRIVERS LICENSE NUMBER, STATE & EXPIRATION:

Vending Address/Location & Date(s):

□ ARTS/CRAFTS □ FOOD □DRINKS □ SERVICE TYPE:

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 CONVICTED OF ANY CRIME WITHIN THE LAST TEN YEARS, INCLUDING MISDEMEANORS, GROSS MISDEMEANORS? □ YES □ NO

IF YES, COURT(S) OF JURISDICTION: 1:_____ 2:_____ 3:_____

DO YOU HAVE ANY FELONY, CRIME, THEFT, FRAUD CHARGES PENDING NOW? □ YES □ NO

If Yes, list the nature of the offense, and punishment or penalty assessed: _____

PERMIT TYPE (CHECK ONE)		TOTAL FEE (INCLUDES $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 Processing 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	☐ **Approve**	☐ **Disapprove**	**Date:_____**	**X_____**
Homeland Security	☐ **Approve**	☐ **Disapprove**	**Date:_____**	**X_____**
Law & Order Committee	☐ **Approve**	☐ **Disapprove**	**Date:_____**	**X_____**

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

REASON FOR DISAPPROVAL
