



PYRAMID LAKE PAIUTE TRIBE
BUSINESS LICENSING DEPARTMENT- APPLICATION FOR SPECIAL BUSINESS LICENSE
RETURN TO: BUSINESS OFFICE, 208 CAPITAL HILL (P.O. BOX 256), NIXON, NV 89424
PHONE: (775) 574-1000 OR FAX: (775) 574-1008

Section (1) I am applying for:

- Gaming Operation Liquor Business Mining Operation Food Service Business Energy Generation Operations
 Wrecking and Towing Operations

Section (2) Business Entity Type:

- Sole Proprietor Corporation Limited Liability Company Association Partnership Other: _____

Section (3) Entity Information:

Corporate/Entity Name:		Doing Business As (DBA):	
Corporate/ Entity Address:		City:	State & Zip Code:
Corporate/ Entity Mailing Address:		City:	State & Zip Code:
Federal Tax ID #:	E-Mail Address:	Telephone Number:	Fax Number:
Location of Business Operations:		City:	State & Zip Code:
Address of Business Records:		City:	State & Zip Code:

List all owners, partners, corporate managers, members, etc. Attach additional sheets if necessary

Last Name, First Name, Middle Initial:		Residence Address (Street, City, State, Zip)	
Title:	DOB:	Percent Owned:	
Last Name, First Name, Middle Initial:		Residence Address (Street, City, State, Zip)	
Title:	DOB:	Percent Owned:	

Section (4) Describe Nature of your specialty business, including products sold, labor performed, and/or services rendered:

Section (5) Fees :

<input type="checkbox"/> Gaming Operation: Class II <input type="checkbox"/> Class III <input type="checkbox"/>	Initial Application Fee: \$1500.00	Renewal Application Fee: \$500.00
<input type="checkbox"/> Liquor Business	Initial Application Fee: \$1200.00	Renewal Application Fee: \$500.00
<input type="checkbox"/> Mining Operation	See Ordinance for Calculation	Varies See Ordinance Calculation
<input type="checkbox"/> Food Service Business	Initial Application Fee: \$1000.00	Renewal Application Fee: \$500.00
<input type="checkbox"/> Energy Generation Operations	See Ordinance for Calculation	See Ordinance for Calculation
<input type="checkbox"/> Wrecking and Tow Operations	Initial Application Fee: \$1000.00	Renewal Application Fee: \$550.00
		Official Use Only
<input type="checkbox"/> Applying for Reciprocity	Reciprocating County:	Reciprocity Granted: Yes <input type="checkbox"/> No <input type="checkbox"/>

Section (6) Certification/Declaration (must be signed by an officer of the corporation/entity):

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is true and correct. I further acknowledge that pursuant to § 3.17.05 I consent to Tribal Jurisdiction and will obey all applicable laws of the Pyramid Lake Paiute Tribe. I understand any violation of said laws may result in business license revocation.

Officer Signature	(Print Name/Title)	Date
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Section (7) OFFICIAL USE ONLY:	Received by:	Date:
PLPT Business License #:	\$\$\$ Payment Received:	PLPT Receipt Number: