

Pyramid Lake Paiute Tribe of Nevada
Pyramid Lake Tribal Enrollment Office

PO Box 256, Nixon, NV 89424
Phone: (775) 574-1000 ext. 115 | Fax: (775) 574-1008 | Email: plnrollment@plpt.nsn.us

CARD REPLACEMENT REQUEST FORM

SECTION 1: MEMBER INFORMATION

ROLL #: _____ BIRTHDATE: _____ TELEPHONE: _____

MEMBER NAME: _____
(Please Print) LAST FIRST MIDDLE / MAIDEN (if any)

HOME ADDRESS: _____
STREET APT.# CITY STATE ZIP CODE

MAILING ADDRESS: _____
STREET / PO BOX APT.# CITY STATE ZIP CODE

SECTION 2: CARD TYPE REQUESTED

TM CARD - Blue no Picture ID CARD - With Picture

SECTION 3: MEMBER ID DATA

If applying for a new ID card, please update your information or indicate "No Changes."

NO CHANGES SSN#: _____ *Optional - Card Copy Required*
HEIGHT: _____ WEIGHT: _____ HAIR/EYE COLOR: _____

SECTION 4: MEMBER SIGNATURE

The information provided above is true and correct to the best of my knowledge and belief. I understand that providing false information or misrepresentation of the information contained herein for the purposes of obtaining an identification card and/or membership card is subject to penalty in accordance with applicable Tribal laws.

SIGNATURE: _____ DATE: _____

Check this box if the person signing above is the assigned Power of Attorney (POA) or Guardian of the enrolled member.
PLEASE CONTACT THE PYRAMID LAKE TRIBAL ENROLLMENT OFFICE WITH ANY QUESTIONS.

~~ FOR OFFICE USE ONLY ~~

Card Issued: YES NO Reason: _____

Card Type: ID TM Total Number Cards Issued: _____

Disposition: Mail Pickup

Date Issued: _____ By: _____

Tribal Enrollment Officer

This form can be completed on-line. Once completed, you must **PRINT, SIGN, and DATE** and **MAIL** to the Enrollment Office.