## Red Lake Band of Chippewa Indians Business License Application

(Check One)				
	New Application Renewal			
	Renewal			

Mailing Address (if different from above) City / State / Zip						
E-mail Address						
Phone #						
	TERM O	F LICENSE APPLYING FOI	R			
Temporary (4 days or less)\$10.00 U.S. Dollars						
		\$50.00 U.S. Dollars				
Seasonal (3 months)	Annual (One year)					
Seasonal (3 months)			\$200.	00 U.S. Dollars		
Seasonal (3 months)	Red Lake Band		\$200.0			
Seasonal (3 months) Annual (One year)		l of Chippewa Indians	\$200.0			
Seasonal (3 months) Annual (One year) Check or money orders payable to:	to/_	d of Chippewa Indians				
Seasonal (3 months) Annual (One year)  Check or money orders payable to:  Dates of Operation//  Please provide documentation	to/_ for Credenti	dof Chippewa Indians/ als, Certifications and Insura				
Seasonal (3 months) Annual (One year) Check or money orders payable to: Dates of Operation//	to/_ for Credenti	dof Chippewa Indians/ als, Certifications and Insura				

1. 	Please list any Business and/or Dep Contract(s) with on the Red Lake		t(s) that you have existing Contract(s) with or will have tion.
2.	Please list All Employees that will	be condu	acting Business on the Red Lake Reservation.
3.	Please include name(s) of employee Chippewa Indians.	e(s) that	is an enrolled member of the Red Lake Band of
4.	Please list Subcontractors that will Lake Reservation. (Please note that ALL		lucting Business on behalf of your company on the Red
E	By checking the boxes below you ack  1% Business Activity Fee.	nowledg	ge the following:
Re Bu PC	ail or deliver application and fees to: d Lake Band of Chippewa Indians usiness License Department D Box 555 d Lake, MN 56671	or	JMartin@redlakenation.org
ord Tri	dinances, rules and regulations of the I ibal Court jurisdiction and to accept se	Red Lake	grees, upon license being granted, to comply with all laws, Band of Chippewa Indians and further consents to the process in matters arising from the conduct of business. background check to determine suitability of license.
Sig	gnature		Date
	Office Use Only: Date Approved: Date Disapproved: Secretary's Signature:		Date Fee Paid: