

Blackfeet Nation

Department of Revenue/Commerce

P.O. Box 850, Browning, MT 59417

Phone: (406) 338-5545

Fax Line: (406) 338-7966

Business License Application

(please DO NOT leave any blanks)

Part I: Personal/Contact Information _____ Date: _____

Name of Business/Company: _____

Physical location of Business: _____

Mgr./Contact Person: _____ Phone: _____ Fax: _____

Mailing address of Business: _____

Name of Owner(s): _____ Is Owner an enrolled member? Yes _____ No

Address: _____ City _____ State _____ Zip _____

Phone: _____ Fax: _____ Email: _____

FEIN# or SS# _____ Number of Employees: _____

Opening date (w/in exterior boundaries of the Blackfeet Reservation) _____

Please give brief description of the type of business you will be conducting:

Part II: Type of Business

____ Business ____ Construction ____ Sub-Contractors

____ sole Proprietor ____ Partnership ____ Limited Partnership ____ Corporation ____ LLC

____ Non-profit ____ Co-op

** Note: If business is defined as a Corporation or Partnership please provide the following information:

Name	Title	Address	Telephone

** Awarding Agency _____ Awarding Amt. \$ _____

** Project: _____ Project location _____

** Please NOTE: If this is a CONTRACT AGREEMENT, PO, and/or INVOICE: MUST HAVE ALL SIGNATURES

TO BE COMPLETE

**SUB CONTRACTORS ONLY: Name of General Contractor: _____

**PLEASE NOTE! If your business involves building trades, construction, etc., you are required to register and complete a process with the Blackfeet TERO office.

Part III: Insurance (Only applies to Trucking, Construction and Realty)

Insurance Company: _____ Type of Insurance: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Bonding Agency: _____ Phone: _____ Fax: _____
 Address: _____ City: _____ State: _____ Zip: _____

Part IV. Certifications & Responsibilities (please initial)

_____ Upon signing this application and receipt of this license you are hereby agree to abide by ALL Tribal, Federal and all other applicable laws, including, but not limited to employment, assessments, levy of execution, collection of fees and taxes, health/safety and environmental codes, inspections, applicable commercial codes, penalties and fines.

_____ The license fee shall be payable to the Department of Revenue for the Blackfeet Tribe. Such license shall be displayed in a conspicuous and public location of the licensee's place of business or shall be in possession of the license while conducting or operating a business activity within the exterior boundaries of the Blackfeet Indian Reservation. No business shall open or conduct any type of business, without first obtaining a business license issued by the Department of Revenue and pay all applicable fees.

Part V. Fees

Type of Business	Non-Resident	Resident	Application Fee (ONLY applies if it's a new business)
Oil & Gas Exploration	\$550.00		\$50.00
Retail Sales	\$550.00	\$250.00	
Wholesale	\$500.00		\$50.00
Wholesale Liquor	\$1000.00		
Building Construction	\$500.00	\$100.00	\$50.00
Contractors	\$350.00	\$100.00	\$50.00
Utility Service Providers	\$350.00		\$50.00
Hospitality	\$350.00	\$100.00 (Application Fee-waived)	\$50.00 (All New)
Professional Services	\$250.00	\$100.00 (Application Fee-Waived)	\$50.00 (All New)
Countryside Tours/Outfitters	\$500.00	\$250.00	\$50.00

****NOTE****

All Blackfeet Artists are exempt from paying for Business License Fees

Definitions: Ledger Artists, Mural Artists, Oil Painting, Metal Art, Leather work, Wood Work, Beaded and Outfit making, Moccasin Making, Quilt Making, and Jewelry artist MUST be a BLACKFEET ENROLLED TRIBAL MEMBER.

Blackfeet Member			Fee
Enrollment #		D.O.B	EXEMPT
A FEE WILL BE CHARGED FOR REPLACEMENT LICENSES			\$5.00

****The following documents are required at the time of submission of application**

1. Application
2. Proof of Insurance
3. Copy of Contract (if any)
4. 501 C3 verification

Documents can be submitted prior, to:

Email: Revenue@blackfeetnation.com, d.deroche@blackfeetnation.com, Joanna.rgh@blackfeetnation.com

Mailing address: Blackfeet Dept. of Revenue
P.O. Box 850
Browning, MT 59417

Physical address: #9 Old Person Road
Attn: Dept. of Revenue
Browning, MT 59417

Payment Options: (Cashier's Check, Money Order, Personal Check)

****Payment can be made at Blackfeet Finance Window. Once you receive your receipt of payment, you can bring it to the Department of Revenue and our Compliance Clerk or Administrative Assistant can assist you.**

Part VI. All questions must be answered

****Please answer all questions and provide any documentation that may be helpful.**

1. Has this individual/group been granted a license/permit with the Blackfeet Tribe in the past?
_____ Yes _____ No
2. If yes, please provide date of last license/permit granted _____
3. Has the individual/group ever held any other type of business license/permit with the Blackfeet Tribe? _____ Yes _____ No
4. Has the individual/group ever conducted any other type of business within the boundaries of the Blackfeet Reservation? _____ Yes _____ NO
5. Does the individual/group owe the Blackfeet Tribe any fines/fees/penalties from the past?
_____ Yes _____ NO - Amount of fine/penalty _____, Date of fine/penalty _____
6. Has the individual/group ever been violation of any Tribal Ordinances, while conducting business within the exterior boundaries of the Blackfeet Reservation? _____ Yes _____ No
7. How long have you been conducting business within the Exterior Boundaries of the Blackfeet Reservation? _____(days) _____(months) _____(years)

Part VII: Terms & Conditions

****Regardless of when your business license was purchased, it will EXPIRE on December 31 of every year, you will be given a deadline of January 15.**

****Late fees/penalties:** Thereafter, your business will begin to incur a late fee of \$100.00 per violation, per day. This is accordance with Chapter II, Section 2, subsection 2.7: Effect of NON-Compliance:

"Failure on the part of any person to comply with the provision of this code shall subject such person to a civil penalty of a fine, not to exceed One-hundred (\$100) dollars for each violation. Each day's failure to comply with any of the provisions of this License Code shall constitute a separate violation."

Part VIII. Acknowledgement

___ I certify that the information provided is true and correct and that all documentation has been submitted to the best of my knowledge.

___ I certify that I have NOT purposely provided any false/misleading information to the Department of Revenue.

___ I certify that I have read all information and agree with all terms set forth by the Blackfeet Tribe and the Blackfeet Revenue Department

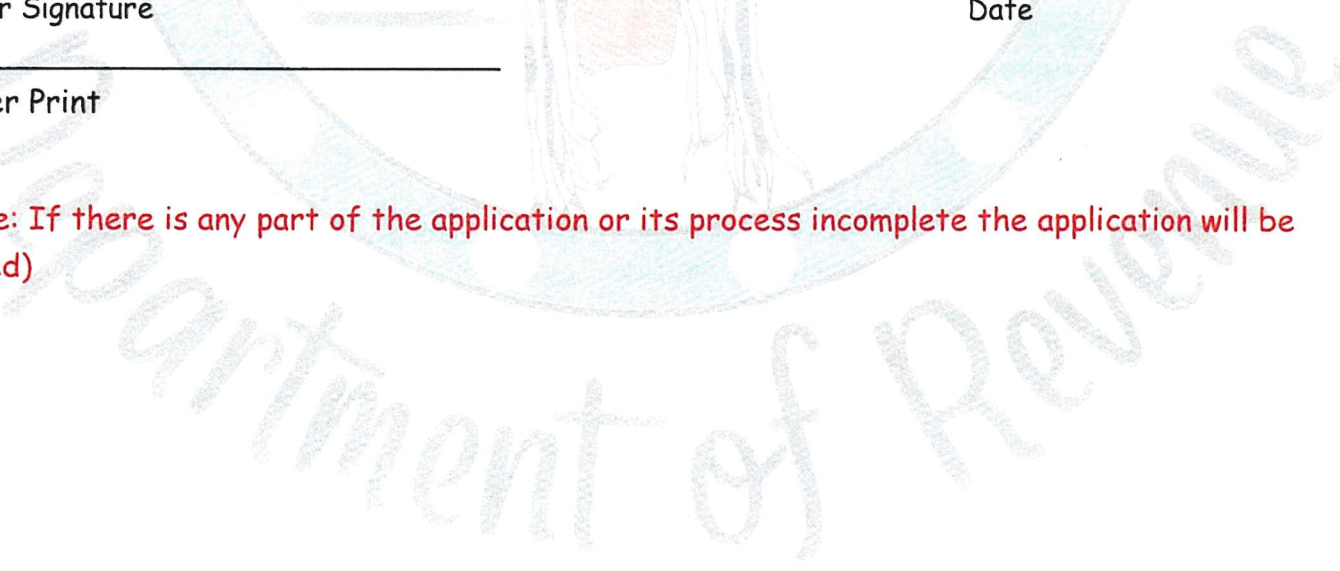
___ I certify that I have submitted all required documentation along with my application.

Owner Signature

Date

Owner Print

(Note: If there is any part of the application or its process incomplete the application will be denied)



DO NOT WRITE BELOW THIS LINE (for administrative use only)

Application complete _____ Application Incomplete _____

Application Denied _____

Administrative Asst. Initials _____ Date: _____ Time: _____

Director Signature: _____ Date: _____ Time: _____

Comments:

