



JICARILLA APACHE NATION  
DEPARTMENT OF LABOR  
WORK PERMIT APPLICATION

25 Hawks Drive PO Box 507 Dulce NM 87528 (575) 759-4410

Date Processed: mm/dd/yyyy
Processed By:
No. of cards requesting: <b># OF CARDS</b>

<input type="checkbox"/> Oil Field	<input type="checkbox"/> Construction	<input type="checkbox"/> Residential	<input type="checkbox"/> Ranch	<input type="checkbox"/> Other <b>(SELECT ONE)</b>
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Company Information

Company Name

**NAME OF COMPANY**

Contact Person Name/Title

**OWNER NAME AND TITLE (not Preparer name)**

Physical Address <b>PHYSICAL ADDRESS</b>	City <b>CITY</b>	State <b>STATE</b>	Zip <b>ZIP</b>
Mailing Address (Cards will be sent here) <b>MAILING ADDRESS(CARDS WILL BE SENT HERE)</b>	City	State	Zip
Phone number <b>PHONE NUMBER</b>	Email address <b>OWNER EMAIL ADDRESS</b>		

Job Site Information

Are you the prime contractor? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>CHECK</b>	Are you a subcontractor? <input type="checkbox"/> Yes <input type="checkbox"/> No	Who is your prime contractor? (Company Name) <b>NAME, "N/A" IF DOESN'T APPLY</b>
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For Oil & Gas companies must give well-site location(s).

**FOR OIL & GAS LIST WELL SITE LOCATIONS, IF YOU HAVE MANY. ATTACH A COPY OF ALL WELL SITES YOU WILL BE WORKING ON. ALL OTHERS--LIST LOCATION OF WHERE YOU WILL BE PERFORMING WORK. PLEASE DO NOT LEAVE BLANK OR APPLICATION WILL BE RETURNED.**

For Oil & Gas/Construction/Residential/Ranch/Other, must state type of work conducting on the Jicarilla Apache Reservation.

**LIST THE TYPE OF WORK YOU WILL BE CONDUCTING ON THE JICARILLA APACHE RESERVATION. PLEASE DO NOT LEAVE BLANK OR APPLICATION WILL BE RETURNED.**

I attest, under penalty, that I have assisted in the completion of this entire application and that to the best of my knowledge the information is true and correct. All signatures are original and not forged.

Signature of Preparer <b>Signature of Preparer</b>	Print Name <b>Please print name</b>	Today's Date (mm/dd/yyyy) <b>Date</b>
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DOL OFFICE USE ONLY

Number of work permit cards		Money order number		Notes
No of cards processed		Receipt number		
Total money order amount	\$	Date mailed (mm/dd/yyyy)		

Certified Mail Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	--	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	--	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	--	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	--	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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## Company Name (Must be completed by employee only)

Company Name

**Company name-this will be printed on cards/Must match the first page**

## Employee Information

First Name (Must be as shown on DL/ID)

**Must be the first name on DL**

Last Name

**Must be last name on DL**

Middle Initial

**MI - if none put "NA"**

Position Title

**Position title-this will be printed on card. If left blank app will be returned**

## Driver's License Information

Driver's License Number

**As it appears on DL/ID**

State Issued

Expiration Date

**As it appears on DL. App will be returned if expired or  
expiring soon. Must have a valid DL/ID for the entire  
duration of work permit card processed.**

Attach a **CLEAR/COLORED** copy of your state issued driver's license in the box provided

PLEASE READ

- \* Must be a valid state issued driver
- \* Driver's license must cover entire box.
- \* Driver's license must be a clear copy.
- \* Driver's license must be a colored copy.
- \* NO temporary Driver's License will be accepted.
- \* Expired driver's License will not be accepted.
- \* Driver's license expiring within two-months of application date will not be accepted.
- \* Only USA DL/ID will be accepted.
- \* Must be a valid DL/ID

Upload colored DL/ID to fit entire box

## Signature Disclaimer (PLEASE READ)

I understand and agree that I have read the amended Indian Preference Ordinance, which is Title 23 of the Jicarilla Apache Nation Code. I also understand and agree that I must abide by all laws of the Jicarilla Apache Nation, including but not limited to Title 23- Indian Preference; Title 18 Oil & Gas, but all other laws of the Jicarilla Apache Nation and that any non-compliance with the Jicarilla Apache Nation Laws will subject me to: penalties; sanctions; suspension and/or revocation of my work permit; suspension and/or cancellation of the oil and gas lease, construction work permit, residential work permit. I also understand and agree, I am subject to penalties allowed by law, if I have provided any false, misleading or inaccurate information in this work permit application. I also certify that I have completed the necessary documentation with my employer to comply with federal employment and labor laws.

Name (please print)

**Employee printed name**

Signature

Date

**Date of application**

**Employee Signatures  
(Must be original signatures)**



## DEPARTMENT OF LABOR WORK PERMIT APPLICATION **INSTRUCTIONS**

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### PAGE 1 COMPANY INFORMATION

*MUST BE UPDATED WORK PERMIT APPLICATION DATED 1/1/2021*

- ☐ Right Top Corner Input No. Cards Requesting
- ☐ Check with box in which your company is classified.
- ☐ Enter Company Name, OWNER name
- ☒ Physical Address/City/State/Zip/Phone Number
- ☐ Fill out Mailing address (Cards will be mailed here)
- ☒ Check boxes for prime contractor/subcontractor. Please answer prime contractor question if it does not apply to you put "NA"
- ☐ Location question must be answered for ALL application(s) submitted. This information is for Game & Fish/Jicarilla PD, so they know what location employees will be working. For Oil & Gas Company must give well site location(s). Attach printout of site information. If you are not working on well-sites, attach a memo stating where you will be conducting work on the reservation.
- ☐ Type of work conducting question must be answered for ALL application submitted: state type of work conducting on the reservation.
- ☒ Preparer Signature/Printed name and date
- ☐ Enclose a business card for owner and preparer. If your company does not have business cards, please type that information on a paper and submit with application.

### PAGE 2 EMPLOYEE SIGNATURE(S)

*MUST BE UPDATED WORK PERMIT APPLICATION DATED 1/1/2021*

- ☐ Company Name. This will be used on work permit card, so please make sure this is correct.
- ☐ Employee first name, last name, MI (**Use name as it appears on Driver's License**)
- ☐ Position title. This will be used on work permit card.
- ☐ Driver's License Number/State Issued
- ☐ Expiration Date. Employees must have a valid State Issued DL/ID for the entire duration of the work permit card issued.
- ☐ Please read instructions on page 2 of the application regarding the driver's license.

### ATTACH A COPY OF JICARILLA OPERATING PERMIT (CALL 575-759-3485)

- ☐ Attach only one copy of Jicarilla Operating Permit (For Oil & Gas Companies) for each application submitted.
- ☐ A copy of the Jicarilla Operating Permit must be attached to each work permit application. Will not accept expired or expiring within one month of receiving your work permit. Jicarilla Operating permit must be valid for the entire duration of the work permit card.



**ATTACH A COPY OF JICARILLA GROSS TAX RECEIPT REGISTRATION  
(CALL 575-759-4254)**

- ☐ Attach only one copy of Jicarilla Gross Tax Receipt Registration for **all** work permit applications submitted. Will not accept expired or expiring within one month of receiving your work permit card.
- ☐ A copy of the Jicarilla Gross Tax Receipt Registration must be attached to each work permit application.
- ☐ Department of Labor does not need copies of New Mexico Gross Tax Receipt.

**ENCLOSE A FLASH DRIVE WITH JPEG PICTURES  
(FLASH DRIVES ONLY)**

- ☐ Label your flash drive with company name
- ☐ Picture must be saved as a JPG File
- ☐ Picture must be saved as (last name, first name) as it appears on the Driver's License. (NO NICKNAMES)
- ☐ Picture of head to shoulder. Please do not send full body picture.
- ☐ Picture must be a camera photo. Do not save on paper by scanning and save as JPG File. (must be able to edit pictures)
- ☐ Picture must be clear, not blurry
- ☐ No hats/sunglasses
- ☐ Flash drives must only have pictures saved on it.

**ENCLOSE PAYMENT BY MONEY ORDER ONLY**

- ☐ Submit money orders with the application packet
- ☐ Make payable to: **JAN Department of Labor PO Box 507 Dulce, NM 87528**
- ☐ From: Your company name and address
- ☒ Do not send in blank money orders. Packet will be returned if left blank.

**WORK PERMIT APPLICATION PACKET MUST INCLUDED THE FOLLOWING:**

- ☐ Entire new work permit application
  - Page 1 with company information (Only need one copy per packet)**
  - Page 2 Employee information page (make copies if needed)**
- ☒ Jicarilla Operating Permit (only need one copy per packet)
- ☒ Jicarilla Gross Tax Receipt (only need one copy per packet)
- ☐ Flash drive with employee names. Names must be legal names, no nicknames (only need one flash driver per packet)
- ☐ Money Order (One work permit with card fees and one with processing/admin fees)
- ☐ Business Card (Owner card/Preparer card) If no cards type out all information on Word and attach to application. We need owner information.

**PLEASE DO NOT LEAVE ANY FIELDS BLANK.**

JICARILLA APACHE NATION  
DEPARTMENT OF LABOR  
WORK PERMIT CARD COSTS

WORK PERMIT CARD FEE:	\$25.00 PER CARD
PROCESSING FEE:	\$20.00 (NON-REFUNDABLE)
ADMINISTRATIVE FEE:	\$10.00 (NON-REFUNDABLE)

**Example Only:** (Application requesting 50 work permit cards and has third non-compliance)

**FIRST APPLICATION SUBMITTED**

Description	Quantity	Cost	Amount
Work permit cards requested	50	\$25.00	\$1,250.00
Processing Fee	1	\$20.00	\$ 20.00
Administrative Fee	1	\$10.00	\$ 10.00
		<b>TOTAL</b>	<b>\$1,280.00</b>

\*Application was returned for problem areas.

**FIRST NON-COMPLIANCE**

Description	Quantity	Cost	Amount
Work permit cards requested			
Processing Fee	1	\$20.00	\$ 20.00
Administrative Fee	1	\$10.00	\$ 10.00
		<b>TOTAL</b>	<b>\$ 30.00</b>

\*Application was returned because it still had problem areas.

**SECOND NON-COMPLIANCE**

Description	Quantity	Cost	Amount
Work permit cards requested			
Processing Fee	1	\$20.00	\$ 20.00
Administrative Fee	1	\$10.00	\$ 10.00
		<b>TOTAL</b>	<b>\$ 30.00</b>

\*Application was returned because it still had problem areas.

**THIRD NON-COMPLIANCE**

Description	Quantity	Cost	Amount
Work permit cards requested			
Processing Fee	1	\$20.00	\$ 20.00
Administrative Fee	1	\$10.00	\$ 10.00
Postage Fee	1	\$11.50	\$ 11.50
		<b>TOTAL</b>	<b>\$ 41.50</b>

\*After third non-compliance the company owed **\$101.50**. The past due amount of \$101.50, this amount would need to be paid in full in order for the company to submit any new applications.