

Menominee Indian Tribe of Wisconsin Enrollment/Licensing & Permits Department

P.O. Box 910 Keshena, WI 54135 Phone: (715) 799-5142 / Fax: (715) 799-6068 Menominee-nsn.gov

SELLER'S PERMIT APPLICATION

Instructions:

- 1. Submit this application and fees.
- 2. Make check or money order payable to: Menominee Indian Tribe of Wisconsin

Name:					
First	Middle		Last		
Mailing Address		City	State	Zip	
Physical Address		City	State	Zip	
Phone Number: ()					
Name of Business or Organization:					
Nature of Business to be conducted	and brief description of m	erchandise being	sold:		
Signature of Applicant		I	Date		
Signature of License & Permit Dep	partment Staff	I	Date		

SELLER'S PERMIT IS VALID ONE (1) YEAR FROM THE DATE OF PURCHASE

CC: File

FEE: \$10.00 1125-44631-1-LPD-00

COUNTER FEE: \$1.00 1125-44630-1-LPD-00