



Lummi Nation
Office of Economic Policy
2665 Kwina Road
Bellingham, WA 98226
Telephone: (360) 380-8591
BusinessLicense@lummi-nsn.gov

Business License Application Form T-1

(Per 24.02 Lummi Nation Code of Laws)

Please Note: All licenses expire a year after you purchase them and renewal fee shall be due on or before your anniversary date each year. Please enclose all proper documents needed and payment for the total amount due; acceptable forms of payments include cash or check made out to LUMMI INDIAN BUSINESS COUNCIL

Section 1 TYPE OF LICENSE REQUIRED:

- General License (Engage in business 3 months or longer) **FEE: \$ 100**
 Seasonal License (Engage in business more than 30 days but less than 3 months) **FEE: \$ 50**
 Temporary License (Engage in business 30 days or less) **FEE: \$ 25**

If seasonal or temporary please list anticipated start and end date: Start: ___/___/___ End: ___/___/___

Section 2 GENERAL BUSINESS INFORMATION:

Have you registered with Lummi Nation before? Yes No

Name of Applicant: _____ Applicants Phone: _____

Business Name: _____ Business Phone: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Mailing Address (If Different) _____ City: _____ State: _____ Zip: _____

Business Email: _____

Is this business 51% owned by a Lummi tribal Member? Yes No **if yes;** please provide documentation

Do you want your business to be included in our entrepreneurs directory/phonebook? *Free of charge* using the information provided on this page? Yes No

Section 3 TYPE OF BUSINESS:

- Corporation* Limited Liability Company* Sole Proprietorship
 Partnership Non Profit/ Fundraising* Other: _____

* Please provide Certificate of Good Standing

Please check the ONE box which best describes the nature of your business.

- Arts & Crafts Legal Services Other : Please specify below
 Catering/ Food Services General Contractor Maintenance
 Construction Landscaping Professional Services

Brief description of business _____

Does your business require handling of food and/or beverages for customer consumption? Yes No **if yes; please provide us copies of proper food handling permits.**

TITLE 24 Lummi Codes of Laws 24.03.040 and 24.03.030

24.03.040 Forms

Before engaging in business on the Lummi Reservation or trust lands and during all times that any persons shall comply with the following form filing and display requirements:

(a) Form T-1 Business License and Registration Application.

Before engaging in business, all persons shall file with the LIBC Form T-1 which shall constitute an application for a business license and registration under the Business Ordinance.

(b) Form T-2 Certificate of Registration

Before engaging in any business on the Lummi Reservation or trust lands, all persons shall have in their possession a certificate of registration duly issued by the LIBC and all persons shall display at all times a valid and current certification.

24.03.030 License Delinquency; Effect

The failure of any person to pay the business license fee within thirty (30) days of the annual anniversary date constitutes a breach of the privilege of doing business within the Lummi Reservation and trust lands and such person's license to engage in business within the Lummi Reservation and trust lands shall be revoked. Persons who are not members of the Lummi Tribe and whose license is so revoked shall be expelled from the Lummi Reservation and trust lands as trespassers.

[Note: See Title 12 of the Lummi Code of Laws]

I, the undersigned, do hereby agree to abide by the Lummi Nation Code of Laws (see codes above and at www.lummi-nsn.gov/Website.php?PageID=831) and any applicable State and Federal Regulations in the conduct of business operations on the Lummi Indian Reservation and all lands held in trust by the Lummi Nation regardless of location.

(This form will be considered incomplete if it is not signed below)

_____ Signature of Licensee	_____ Printed name	____/____/____ Date Signed
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FOR OFFICE USE ONLY

Date Filed ____/____/____	Date License Issued ____/____/____	Expiration Date ____/____/____
Fee Paid \$ _____	Receipt # _____	Issued By _____
Bus License # _____	CK# _____	Mailed/Picked up ____/____/____