

WASHINGTON STATE DEPARTMENT OF Venicle/ Vessel LICENSING Excise Tax Exemption Affidavit for Enrolled Tribal Member **Living in Indian Country**

Vehicle/Vessel

License/Registration number	Year	Make	Series/Body type				
Vehicle or Hull Identification Number							

Applicant			
Name			
Address, City, State, ZIP code			
Indian tribe	Reservation	Enrollmer	nt or BIA number
enrolled tribal members is within the boundari	nent, I declare, under pena er and actually reside at my es of this reservation. The e address on the vehicle/	principa princip	al address, which le address on
Signature of applicant			Date
X			

Tribal certification

Name of authorized tribal authority	Reservation				
Position or title	(Area code) Telephone nu	umber			
I certify the above applicant is an enrolled tribal member and that the address above is within the boundaries of this reservation.					
Signature of authorized tribal authority		Date			