For office use only



Oneida Indian Nation Department of Taxation

Application for Exhibitors License and Certificate of Authority

ODT-17.1

(6/14)

Instructions:

In accordance with rules adopted by the Oneida Indian Nation Department of Taxation (*Tax Department Rules*), every exhibitor that plans to sell goods or services on Nation land is required to complete this application and file it with the Nation Department of Taxation to do business on Nation land and collect Nation sales tax. Applications must be filed at least 5 days prior to conducting any business activity on Nation land. Upon approval of your application, you will receive an *Exhibitor License and Certificate of Authority*, which is valid only for the period of time specified in such license.

Upon commencement of any business activity on Nation land, you are required to collect and remit Oneida Nation sales tax to the Nation Department of Taxation on the sale of taxable goods and services in accordance with the *Tax Department Rules*, available from the Nation Department of Taxation.

Note: You have no obligation to remit, and should not remit, New York State sales tax to the State of New York on the sale of taxable goods and services occurring on Nation land. See http://theoneidanation.com/publicaffairs/wp-content/uploads/NYS-Nation-Counties-Settlement-Agreement.pdf.

Sectio	n A - Business	identification							
1 Lega	l Name								
2 Offic	ers (President, Cl	EO, etc.)							
3 DBA or Trade Name (if different than legal name above				e above)		4 Employer Identification Number / SSN			
5 Phys	ical Address (not	a P.O. Box)							
Number	Number and Street		City			County	State	Zip	
6 Telephone number 7 Fax Number			8 E-mail /		Address				
9 Mailii	ng Address (if diffe	erent from physical	address above	e)					
Care of (c/o)		Number and Street or PO box			City	State	Zip		
10 11	Is the applicant an individual? Yes No If yes, attach a copy of the applicant's tribal identification card, driver's license of passport. If the applicant is an entity, list the jurisdiction where the entity was formed Enter the date of formation (mm/dd/yy								
Sectio	n B - Type of E	ntity or Organiz	ation						
12	12			☐ Corporation	[☐ Partnership	Government		
	☐ Limited Liability Partnership (LLP)			☐ Limited Liability Company (LLC)		ny (LLC)	☐ Other:		
Sectio	n C - Business	Description							
13	Event Name:						·		
14	Date(s) of Ev	ent (<i>mm/dd/yy</i> –	mm/dd/vv)·	/ / - /	1				

15	In the space below, describe the goods and services that the app	licant plans to sell at the event.	Please be specific.
16	Has the applicant previously applied or been previously licensed denied, revoked or suspended? Yes No If Yes, Please e		axation, but the license was
17	The person signing below is hereby designated as applicant's ag with respect to matters arising out of any activity occurring on Nat		er notification may be served
this ap _l Indian I Iand an	that I have the authority to submit this application on behal plication is true, correct and complete. By signing below, I Nation sales tax to the Nation Department of Taxation on the d that the applicant hereby consents to the personal jurisdicti ntroversies, disputes or claims relating to the sale of taxable g	agree that the applicant sha sale of taxable goods and se on of the Oneida Indian Natio	III collect and remit Oneida ervices occurring on Nation n court for the resolution o
Name		Title	Date
Signatu	ге	Daytime Telephone Number	

 ${\rm 1}{\rm If\ your\ application\ is\ missing\ information,\ or\ is\ not\ signed,\ it\ will\ be\ returned\ to\ you.}$

Oneida Indian Nation Department of Taxation Director of Department of Taxation Mail your application to:

2037 Dream Catcher Plaza Oneida, New York 13421