



Pueblo de San Ildefonso

Department of Tribal Services - Office of Taxation

BUSINESS REGISTRATION APPLICATION

Check here if this application
is to update information only

FILING YOUR BUSINESS REGISTRATION APPLICATION

Pursuant to Section 1.11 of the Pueblo de San Ildefonso Tax Act, before engaging in any transaction or activity that is subject to the Pueblo's tax, the person or business must register with the Pueblo's Tax Office.

The Business Registration Application must be fully completed. Be sure the information is complete, legible and accurate. Incomplete applications will not be processed. Additional information may be requested in order to process an application.

FEES

There is a non-refundable registration fee collected which pays to set up and maintain your registration. The annual fee for a Business Registration is \$50.00. This must be paid at the time your application is returned to the Department of Tribal Services. Checks may be made out to "Pueblo de San Ildefonso." There is no fee for filing an updated registration application.

Late Fees: Businesses that do not pay the registration fee by the date business has commenced or annually on or before the anniversary date will be charged a late fee of \$30.00.

QUESTIONS

Please contact Marcel Povijua in the Pueblo de San Ildefonso Department of Tribal Services - Office of Taxation with any business registration questions or concerns at (505) 455-2273.



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BUSINESS REGISTRATION APPLICATION

BUSINESS INFORMATION

Business Name: _____
DBA: _____
Business Structure (Corporation, Partnership, etc): _____
Business Phone: _____ Business Fax: _____
Business Address: _____ City: _____ State: _____ Zip: _____
Business State CRS#: _____ Business Federal ID#: _____
Describe Type of Business, Products or Services Provided: _____

OWNER INFORMATION

Owner 1 Name: _____ Email: _____
Phone: _____ Fax: _____
Mailing address (if different from above): _____
Owner 2 Name: _____ Email: _____
Phone: _____ Fax: _____
Mailing address (if different from above): _____

CONTACT INFORMATION (Other than Owner)

Name: _____ Email: _____
Phone: _____ Fax: _____
Address: _____ City: _____ State: _____ Zip: _____

PROJECT INFORMATION (If applicable)

Project Name: _____ Project Manager: _____
Project Manager Email: _____ Project Manager Phone: _____
Project Location: _____
Start date of Project: (mm/dd/yy) _____ End date of Project: (mm/dd/yy) _____

I hereby certify that the above information is true and correct to the best of my knowledge. The Business Registrant, while doing business on Pueblo de San Ildefonso lands, agrees to abide by the applicable Federal laws and the Tribal Laws of the Pueblo de San Ildefonso, including all applicable gross receipts taxes on taxable transactions occurring on the Pueblo de San Ildefonso lands and the Business Registration and Business License Policy.

Signature

Print Name

Date

FOR OFFICIAL USE ONLY: Business Registration Application Rec'd _____
Application Fee Rec'd ___Y___N___ Amount Rec'd: _____ Check No. _____
Business Registration for Period of ___/___/___ through ___/___/___
Permit or License Number: _____ Employee Initials _____
Year/Month - Registration No.