



KAW NATION TAX COMMISSION

ROLL # _____

P.O. Box 50 – 698 Grandview Dr

Kaw City, OK 74641

kawtagoffice@kawnation.gov

APPLICATION FOR NEW TAG

MAILING FEES: PER PLATE/TITLE WITHOUT LIEN: \$12 – WITH LIEN: \$15

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ COUNTY: _____

PHONE: _____ EMAIL: _____

TAG WILL BE DISPLAYED ON VEHICLE LISTED BELOW:

YEAR: _____ MAKE: _____ MODEL: _____

COLOR: _____ VIN: _____

AUTO STATUS: New Used Family Transfer – Relationship _____

TYPE OF AUTO: Auto Rebuilt Farm Motorcycle Recreational

TYPE OF TAG: Standard Veteran Active Military

ANY FALSE STATEMENT IN THIS APPLICATION SUBJECTS APPLICANT TO SUCH PENALTY AS PROVIDED BY LAW.

I understand that in order to be exempt from the requirement to purchase an Oklahoma tag, I must reside within the Kaw Nation's Indian Country which includes the following: Kaw Reservation and Kaw Nation Trust Land. I swear (or affirm) that I am a Kaw Nation Tribal Citizen a resident of Oklahoma and principally garage this vehicle within the Kaw Nation's Indian Country. I understand and acknowledge that I am personally responsible for ensuring compliance with all applicable laws of the State of Oklahoma and of the Kaw Nation.

This application, your title, Kaw CDIB Card, Driver's License or current utility bill in members name, proof of insurance and current registration must be surrendered to the Kaw Nation Tag Office when applying for a new registration.

Owner or Legal Agent: _____ Date: _____

Kaw Nation Tag Agent: _____

Signatures may be completed manually or electronically

By signing this form electronically, I agree that my signature is the legal equivalent of my manual signature.

Make Checks Payable to: Kaw Nation Tax Commission

IF PAYING BY CREDIT CARD OVER PHONE YOU ARE GIVING AUTHORIZATION TO ENTER MANUALLY FOR REGISTRATION AND ANY OTHER FEES THAT MAY APPLY

Tag office use only:

_____ Title Tag Number Assigned _____

_____ Insurance Hard Copy (HC) _____ Online Verification (OV) Decal Number Assigned _____

_____ Kaw Membership (CDIB) (on file) _____ Hard Copy (HC)

_____ Valid OK ID _____ Members Current Utility Bill

_____ Current Registration _____ Dealer _____ Decal Date