



**KAW NATION TAX COMMISSION**

ROLL # \_\_\_\_\_

P.O. Box 50 – 698 Grandview Dr

Kaw City, OK 74641

[kawtagoffice@kawnation.gov](mailto:kawtagoffice@kawnation.gov)

**APPLICATION FOR REPLACEMENT DECAL**

**DECAL FEE: \$5 - MAILING FEE: \$6**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ COUNTY: \_\_\_\_\_

PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

I/We declare that the title on the listed vehicle below was:

lost     stolen     destroyed

YEAR: \_\_\_\_\_ MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

VIN: \_\_\_\_\_

TAG #: \_\_\_\_\_ DECAL #: \_\_\_\_\_

I/We affix our signature(s) below in attestation of the promises and agreements described above, and hereby apply for a replacement decal.

**ANY FALSE STATEMENT IN THIS AFFIDAVIT 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.

Owner or Legal Agent: \_\_\_\_\_ DATE: \_\_\_\_\_

**\*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:**

**Kaw Nation Tag Agent:** \_\_\_\_\_

**Valid OK ID** \_\_\_\_\_

**Decal Number Assigned** \_\_\_\_\_