KAW NATION TAX COMMISSION

P.O. Box 50 - 698 Grandview Dr
Kaw City, OK 74641
kawtagoffice@kawnation.gov

ROLL #
_____

ACTIVE-DUTY MILITARY AFFIDAVIT

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

This is to certify the following vehicle is owned by a service member, Guardsman, or Reservist under the qualifying criteria below.

- **The service person must be a Kaw Nation Tribal Citizen and an Oklahoma resident.**
- **You cannot be retired, inactive or a former service member.**

TRIBAL CITIZENS NAME: _____ RANK: _____

PHYSICAL ADDRESS: _____

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

PHONE: _____ EMAIL: _____

MILITARY INSTALLATION: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TAG WILL BE DISPLAYED ON VEHICLE LISTED BELOW:

YEAR: _____ MAKE: _____ MODEL: _____

COLOR: _____ VIN: _____

AUTO STATUS: ☐ New ☐ Used ☐ Rebuilt ☐ Family Transfer – Relationship _____

TYPE OF AUTO: ☐ Auto ☐ Motorcycle ☐ Recreational

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.

Late Fee Starts on the 61st Day Rate is $.25 per day.

Please Include Kaw CDIB Card, Valid OK ID or current utility bill in members name, and Valid Military ID.

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: _____

_____ Title

_____ Insurance Hard Copy (HC) _____ Online Verification (OV) _____ Not Applicable (NA)

_____ Kaw Membership (CDIB) (HC) _____ On File Tag Number _____

_____ Valid Military ID ____ Valid OK ID ____ Members Current Utility Bill Decal Number_____

_____Current Registration ____ Dealer _____ Decal Date Current Orders ___ YES ___ NO