



TAX EXEMPTION FORM
(Attach copy of current Tribal I.D.)

Three Affiliated Tribes DOT
Licensing Administration
PO Box 609
335 Main Street
New Town, ND 58763
(701) 627-4513
Website: www.mhadot.com

Part I: APPLICANT

Applicants Legal Name (First, Middle, Last)		Tribal Enrollment #		Phone Number	
Mailing Address		City	State	Zip	County
<i>Signing this form certifies that I am enrolled member of the Three Affiliated Tribes MHA Nation and I reside on the Fort Berthold Indian Reservation.</i>					
Applicant's Signature				Date	

Part II: VEHICLE INFORMATION

Year	Make	Model		Body Style
Vehicle Identification Number		Color	Weight	Trailer Length (if applicable)

Part III: DEALERSHIP INFORMATION (COMPLETED BY SELLER/DEALERSHIP)

<i>Dealership/Seller Name</i>		<i>Delivery Date</i>	<i>Phone #</i>
<i>Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>

I certify that that I have sold the above-described vehicle to an enrolled member of the Three Affiliated Tribes MHA Nation and the enrolled member resides on the Fort Berthold Indian Reservation.

<i>Printed Name</i>	<i>Signature</i>
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***Falsifying an affidavit is a Class A misdemeanor offense, punishable to one year in prison and a fine of \$2,000.00 (CDCC 12.1-11)
Providing false information to authorities is punishable of up to 30 days in jail and a fine of \$100.00 (TAT Tribal Criminal Code 520.4)***