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KAW NATION TAX COMMISSION

APPLICATION FOR TAG

DATE: _____

NAME: _____

ADDRESS: _____

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

HOME PHONE: _____

WORK PHONE: _____

CELL PHONE: _____

TAG WILL BE DISPLAYED ON THE VEHICLE LISTED BELOW:

YEAR _____ MAKE _____ MODEL _____ VIN # _____

Type of tag requested: Auto Farm Commercial Collectors
 Motorcycle

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

I the undersigned hereby make application for registration of the vehicle described above and do solemnly swear (or affirm) that I am the owner or the legal agent of the owner of this vehicle and that the statements contained herein are true and that the vehicle described herein complies with the Motor Vehicle Registration and Taxation Laws of the Kaw Nation. I swear or affirm that I am a resident of and principally garage this vehicle within the State of Oklahoma. This certificate and your title must be presented to obtain a new registration. This certificate and your title must be surrendered to the purchaser of this vehicle.

Owner or Legal Agent _____ Date: _____

Kaw Nation Tax Commission: _____

This certificate and your title must be presented when applying for a new registration.

Tag office use only:

___ Title

___ Insurance Verification

___ Kaw Membership (CDIB)

___ Driver's License

Tag number assigned _____

Decal number assigned _____