

Application No.: _____

Receipt No.: _____

Date of Application: _____



SHIVWITS BAND OF PAIUTE INDIAN TRIBE OF UTAH

TRESPASS PERMIT APPLICATION

Permit Classification:	<input type="checkbox"/> Relative of Band Member	<input type="checkbox"/> Business Trespass Permit (Needed in addition to Band Business License)	<input type="checkbox"/> Farm Workers (Agricultural Season)	<input type="checkbox"/> Non-Indian (Limited to a specific activity and defined area)
	<input type="checkbox"/> Non-Member Indian	<input type="checkbox"/> Trespass Hunting Permit (Needed in addition to a Band Fishing & Hunting Permit)	<input type="checkbox"/> Special Shipment (Oversized, tanks, structures, escorts, etc.)	<input type="checkbox"/> Trespass Grazing Permit (Needed in addition to Band and BIA grazing permit)

Duration:	Start Date: _____	End Date: _____
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Applicant's Name:	Applicant's Phone:	Business Name:	Applicant's Email Address:
1) _____	_____	_____	_____
2) _____	_____		Business License #: _____

Mailing Address:	_____	_____	_____	_____
	Street or PO Box	City	State	Zip code

Covered Individuals:	Name: _____	Address: _____	US Citizen: <input type="checkbox"/> Yes	Identification Number: _____
	Phone: _____	_____	<input type="checkbox"/> No	_____
	Name: _____	Address: _____	US Citizen: <input type="checkbox"/> Yes	Identification Number: _____
	Phone: _____	_____	<input type="checkbox"/> No	_____
Name: _____	Address: _____	US Citizen: <input type="checkbox"/> Yes	Identification Number: _____	
Phone: _____	_____	<input type="checkbox"/> No	_____	

If accompanied by Shivwits Band Tribal Member(s)	Name: _____	Address: _____	Relationship to applicant: _____	Enrollment #: _____
	Phone: _____	_____	_____	_____
	Name: _____	Address: _____	Relationship to applicant: _____	Enrollment #: _____
	Phone: _____	_____	_____	_____

Purpose of Application: _____

Provide a detailed description of the proposed activity and location.

By submission of this Application I consent to the jurisdiction of the Shivwits Band of Paiutes of the Paiute Indian Tribe of Utah, and affirm that I will be bound by all provisions of the Shivwits Band Tax Code and Trespass Code, Band Council Resolutions, other Band laws and regulations, and all applicable federal laws. I further affirm that I am authorized as the owner, partner, corporate officer, agent or representative of the aforementioned entity, and now voluntarily enter this consensual relationship with the Shivwits Band of Paiutes of the Paiute Indian Tribe of Utah. I hereby consent to the exclusive regulatory and adjudicatory jurisdiction of the Shivwits Band of Paiutes. I recognize that the activities contemplated by this Application directly and substantially impact the political integrity, economic security, and health and welfare of the Shivwits Band, and have a direct nexus to the assertion of civil adjudicatory authority by the Band if necessary. This Permit does not authorize the permit holder(s) to hunt, fish, harvest or gather, or conduct business activities. This permit only authorizes entry, trespass, or crossing of the Shivwits Band Paiute Reservation.

Applicant Signature: _____ Date: _____

Do Not Write Below This Line -----Office Use Only

Approved Areas:

Decision Rendered: Approved Denied Decision Date: _____

Comments:

Special Condition(s) _____
and/or Decision _____

Shivwits Band Business Council:

Date: _____

Shivwits Band Business Council:

Date: _____

Shivwits Band Business Council:

Date: _____

Shivwits Band Business Council:

Date: _____

Shivwits Band Business Council:

Date: _____

Return Completed Application and Fee to: Mark Echo Hawk, Tribal Attorney (mark@echohawk.com); FAX (208)478.1670.