

SCIT Sales Tax Exemption Application



Saginaw Chippewa Indian Tribe

Tribal Licensing & Regulations Office Use Only

Date:		Exemption ID #	
Business Information (please print clearly	and complete al	L sections)	
First Name	Last Name	- socions)	
Company Name		Company FEIN #	
Company Address			
ity		State	Zip
Telephone Number	Email Addres	S	
Tax Information			
☐ Nonprofit Organization ☐ Governmental			
A Copy Of Your Tax-Exem If you have any questions, please contact the or a Licensing Special Business Type (check one box)	he Director of Tr		tions at (989) 775-4105
□ Bank/Finance □ Communications □ Consulting/Data □ Processing/Advertising □ Marketing	□ Education□ Government□ Manufacturing□ Printing/Publishing□ Social Services		☐ Medical/Hospital☐ Nonprofit☐ Retailer☐ Wholesaler☐ Other
If reservations have already been arranged, please provide the following information to ensure your exemption has applied to all guest(s) reservations: Event Attending:			
Confirmation # Guest N		s)	Arrival Date

To be approved for a tax exemption, complete this form and send in with a copy of your tax-exemption certificate letter. The documentation will be verified once the application is approved, you will receive an Exemption Certificate and ID Number from the Saginaw Chippewa Indian Tribe.

Complete and Return Forms To:

Office of Tribal Licensing & Regulations
7500 Soaring Eagle Blvd • Mount Pleasant, MI 48858
Email: OTLR@sagchip.org
Fax: (989) 775-4107