



### Indian Tribal Permit Application

**Part 1 - Applicant Information**

Name of Indian tribe:		
Gaming casino address:		
City:	Zip Code:	
City/township/village where permit will be issued:		County:
Contact Name:	Phone:	Email:
Mailing Address (if different than above):		
City:	Zip Code:	

**Part 2 - Required Documents**

<input type="checkbox"/> Copy of Compact entered into with the State of Michigan
<input type="checkbox"/> Copy of tribal ordinances relating to the sale and regulation of alcoholic beverages

**Part 3 - Applicant Signature**

The above named Tribe requests that the Michigan Liquor Control Commission grant an Indian Tribal Permit for the purchase of alcoholic liquor over 21% alcohol by volume.

The alcoholic liquor purchased under this permit is to be used in accordance with the Compact entered into with the State of Michigan.

The Tribe has adopted and applied to its Tribal law those State laws, as amended, relating to the the sale and regulation of alcoholic beverages in the following areas: sale to a person under the age of 21; sale to a visibly intoxicated person; sales of adulterated or misbranded alcoholic liquor; hours of operation for the sale and consumption of alcoholic liquor; and similar substantive provisions.

The person(s) signing below is authorized to execute this application on behalf of the Tribe and any and all documents required by the Michigan Liquor Control Commission.

_____	_____	_____
Print Name & Title	Signature of Applicant	Date
_____	_____	_____
Print Name & Title	Signature of Applicant	Date
_____	_____	_____
Print Name & Title	Signature of Applicant	Date

Please return this completed form along with corresponding documents to:  
 Michigan Liquor Control Commission  
 Mailing address: P.O. Box 30005, Lansing, MI 48909  
 Overnight packages: 2407 N. Grand River Ave., Lansing, MI 48906  
 Fax to: 517-763-0059