



TONKAWA TRIBE OF OKLAHOMA
TONKAWA TRIBAL TAX COMMISSION

VEHICLE INFORMATION REQUEST
(ONE FORM PER VEHICLE)

I hereby request ownership/lienholder information on the following vehicle:

*VIN _____ *LICENSE PLATE _____

YEAR _____ MAKE _____ REGISTRATION DECAL _____

*TITLE NUMBER _____ VEHICLE TYPE _____

*At least one (1) of these items is required to access record.

DATE OF REQUEST _____

TO GUARANTEE RETURN OF YOUR REQUEST, THIS SECTION MUST BE COMPLETED. A NOTARY SEAL IS REQUIRED.

I understand the information being provided is confidential under tribal law and is being released to me only for the reason I have indicated below and is to be released to no other entity.

Signature _____ Printed Name _____

Company, if applicable _____
(Print name of company, wrecker/towing service, or governmental court of law enforcement agency)

Address _____

City _____ State _____ ZIP Code _____

Subscribed and sworn to before me on this _____ day of _____, 20 _____

My commission expires _____

Notary Public _____

Mail request to:
Tonkawa Tribal Tax Commission
1 Rush Buffalo Road
Tonkawa, Ok 74653

Or Fax/Email to:
580-203-0173
mmahtapene@tonkawatribe.com



(NOTARY SEAL)