SANTA CLARA PUEBLO TAX ADMINISTRATION

BUSINESS REGISTRATION RENEWAL/ UPDATE FORM

Santa Clara Business License Number Business Name

☐ Change the Business Registration Status:	○ ACTIVE ○ CLOSED	Effective Date: ____/____/_____

Please list which tribal entity you will be conducting business with: _____

Please list the location(s) where you will be conducting business: _____

Briefly Describe Nature of your Business:

Describing the changes to your business license information:

☐ No Changes will be made at this time.

GRT Payments *Check one of the boxes to indicate how your business is going to pay GRT.*

Business Name	**Name(Print)**	**Title**

____: The Business I represent will pay gross receipts taxes directly to the State of New Mexico using the location code_____, for _____County.

____: The Business I represent will pay gross receipts taxes directly to Santa Clara Pueblo using the location code_____, for _____County. We understand our GRT payments are due on or before the 25th of each month by close of business 4:00 p.m.

I declare that the information reported on this form and supplemental pages(s) is true and correct.

_____ _____

Print Name & Title Signature Date

_____ _____

SCP Tax Administration Rep. Signature Date

(Office Use Only) Received on: ___/___/_____ Renew Date: ___/___/_____