



**CHEROKEE NATION TAX COMMISSION
MOTOR VEHICLE
AFFIDAVIT FOR PHYSICALLY DISABLED REGISTRATION FEE**

I, the undersigned affiant, being first duly sworn upon my oath, state and certify that I am the owner, or legal agent of the owner, of the following vehicle with the legal description of record as follows, to wit:

Insignia Number Issued by Department of Public Safety	Vehicle Identification Number	Cherokee Nation Tag Number
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Year, Make, Type	In The Name Of	Relationship to Tribal Member
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Address _____

I further state the above described vehicle has had modifications made as a direct result of physical disability of the owner, or of an individual related to the owner within the second degree of consanguinity (parent, grandparent, child, grandchild, or sibling by blood). The following is a **detailed description** of the modifications made to the vehicle:

Detailed list of modifications to vehicle

Under the above provisions, the owner hereby makes application for _____(year) registration for the above-mentioned vehicle at the handicapped rate.

Affiant Printed Name

Affiant Signature

Cherokee Nation County Of _____

Subscribed and sworn to before me this _____ *day of* _____, _____.

My Commission Expires _____

_____, *Notary Public*