

## PRIVATE PROPERTY JUNK CAR REMOVAL PROGRAM

(Form must be completed before the removal of vehicles from private property that qualifies for this program)

Requestors' name:		phone number:	
Mailing:			
		Zip:	
	ere the vehicle being removed from house nur		
	n MSB tax records):		
Vehicle #1:			
Make	Model:	Color:	
Year:	VIN:	Plate:	
Description:			
Vehicle #2:			
Make	Model:	Color:	
Year:	VIN:	Plate:	
Description:			

## **Attachments:**

<u>Title of Vehicle</u> (*if have one; submit your portion to the State of Alaska DMV showing the vehicle turned over for destruction*)

On *(date)* \_\_\_\_\_, I, \_\_\_\_\_ (*printed name*), approved the removal & disposal of the above-identified vehicle(s) from private property owned or in my control. I understand that removing junk vehicles by the program's contractors does not guarantee compliance with MSB 8.50 junk vehicle violations.

Signature

The contractor certifies that all the information received above is correct.

Signature