

Duchesne County Junk Vehicle Removal Program

Certification Form

(Please print)

Vehicle Owner Name(s)_____

Vehicle Owner Address_____

Vehicle Owner Phone_____

Location Vehicle(s) removed from_____

Vehicle(s) Removed by_____

Date of Vehicle Removal_____

Description of Vehicle(s) Removed_____

Signature of Vehicle Owner(s)

Signature of Vehicle Remover