

Junk Vehicle Removal Program

2706 South Tongass Highway Ketchikan, Alaska 99901 Office: (907) 247-2502 Fax: (907) 247 -2504

info@saxmantribe.org

APPLICANT INFORMATION		
First Name:	Phone Number:	
Last Name:	Physical Address:	
JUNK VEHICLE REMOVAL DI	ETAILS	······································
Make & Model:	Year:	Color:
License Plate:	VIN:	
Exact Location of Junk Vehicle: *Please spe JUNK VEHICLE REMOVAL DI	cify the exact location, especially if it	differs from your physical address above.
By signing this document, I attest that I have the legal right hereby agree to indemnify and hold harmless the Organize by a third party that otherwise does not agree and challeng	to have the above-listed vehicle remoded Village of Saxman, its Contractors ages the authority of this action to remo	and Employees, against any potential claimove the junk vehicle specified above.
*Once this application has been approved or denied, the C	Organized Village of Saxman will proce	ess this request accordingly.
Applicant's Signature	Signed Date	
For internal official use only.	Approver's Signatur	701
	Approver's Signatur	re: