

RELEASE OF OWNERSHIP OR INTEREST IN MOTOR VEHICLE (JUNK VEHICLE)

STILLWATER COUNTY JUNK VEHICLE RECYCLING PROGRAM
865 Hwy 10 West
COLUMBUS, MT 59019

Telephone: (406)322-5335

The undersigned, being the legal owner of, or having a legal interest in the vehicle described below, hereby authorizes a duly appointed agent of the County Junk Vehicle Program to remove this vehicle to the county motor vehicle graveyard or crushing facility. In the consideration of the foregoing removal, I hereby release all rights, title, and interest in the vehicle to the State of Montana and its agents without payment or compensation. To the best of my knowledge there is no lien of record against this vehicle. I agree to hold the State of Montana, the County and its agents harmless from any claims that may result from the release and removal of the vehicle by the program. I understand that upon release of this vehicle to a contracted towing operator of the Vehicle Recycling and Disposal Program, there is no towing charge to me.

PLEASE ATTACH VEHICLE TITLE AND/OR REGISTRATION TO THIS FORM IF AVAILABLE

Year _____ Make _____ Model _____

Color: _____ License Plate # _____ State _____

V.I.N.# _____

Vehicle location: _____

VEHICLE PARTS INFORMATION

This vehicle has (**circle** the appropriate answers):

Motor Frame Differential Transmission Body A/C

Component parts: _____

PLEASE TAKE NOTE OF THE FOLLOWING REQUIREMENTS:

1. All loose vehicle parts must be inside the vehicle. We will not pick up parts lying around the vehicle.
2. Do not fill out this form if you do not own or have an interest in this vehicle.
3. We **cannot** pick up vehicles with garbage, excess tires, or wire inside. Garbage includes household trash, burn barrel residues, similar waste materials, scrap rebar, fence wire, etc.

By checking this box, the undersigned hereby requests that the vehicle herein described be disposed of only by crushing and recycling:

Name (Must be legible) _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____

I have read and understand all of the above and agree to have all materials mentioned above removed from the junk vehicle before it is picked up.

SIGNATURE: _____ **Date:** _____

HAULER SIGNATURE: _____ **Date:** _____

JUNK VEHICLE # _____

STATEMENT OF TRANSFER

(For use by county & recycling facility only)

The county employee must sign this form. I/we certify that the ownership of the vehicle described on the front of this form has been transferred to:

STILLWATER COUNTY

Name of county employee receiving vehicle: _____

Signature of county employee releasing vehicle: _____

Date released: _____

Junk Vehicle #: _____

The recycling facility representative must sign this form. I/we certify that the ownership of the vehicle described on the front of this form has been transferred to:

RECYCLING FACILITY

Date received: _____

Recycling Facility: __ Pacific Steel & Recycling _____

Address of Recycling Facility: __ 3385 Colson Billings, MT 59101 _____

Name of employee receiving vehicle: _____

Signature of employee receiving vehicle at the recycling facility: _____

Pacific Steel & Recycling, Lockwood, Montana 59101, under DEQ Contract Number 420009.