



Fairbanks North Star Borough

PUBLIC WORKS DEPARTMENT

Solid Waste Division

Solid_waste@fnsb.gov

Main: (907) 459-1482

Fax: (907) 459-1017

AUTOMOBILE DISPOSAL FORM

Please complete all information.

CONTACT INFORMATION	
NAME:	ADDRESS:
PHONE:	CITY STATE ZIP

VEHICLE INFORMATION	
MAKE:	COLOR:
MODEL:	LICENSE PLATE:
YEAR:	VIN:

VEHICLE OWNERSHIP <i>(Select One)</i>	
<input type="checkbox"/> NO OWNERSHIP PAPERWORK AVAILABLE	
<input type="checkbox"/> TITLE OR CURRENT DMV PAPERWORK PROVING OWNERSHIP (ATTACHED)	
SIGNATURE OF OWNER AUTHORIZING DISPOSAL	DATE
PRINTED NAME OF OWNER	

TRANSPORTER INFORMATION	
NAME OF TRANSPORTER	BUSINESS NAME (IF APPLICABLE)
SIGNATURE	DATE

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