DO NOT WRITE IN THIS BOX					
Application No.					
License No.					
Date of Issue					

APPLICATION FOR JUNKYARD LICENSE

The undersigned, pursuant to the provisions of Title 23-1-243 of the Code of Alabama 1975 (Recompiled 1981) and the regulations promulgated thereunder, hereby applies for a license for a junkyard which is located within one thousand (1000) feet of nearest edge of the right-of-way of a highway on the interstate or primary systems and furnishes the following information to support this application:

OH	owing information to support this application:				
1.	Applicant's Company Name:				
	Address:				
	Phone Number: Email:				
2.	Owner's Name:				
	Address:				
	Phone Number: Email:				
3.	The type of business is (only one option applies):				
	Junkyard, Garbage Dump, Sanitary Fill, Automobile Graveyard,				
	Scrap Processing Facility, or others (Lists)				
4.	Type of Proposed or Existing Screening Option for Property:				
	Vegetative Planning, Fencing, Earthen Embankment, Combination,				
	Other				
	Does Screening exist for Property: Yes: or No:				
	Screening Option: Approved: or Denied:				
5.	I began to maintain, use and operate the business or facility as indicated above on theday of				
	, 20				
6.	This application is for the license year beginning January 1, 20, and extending through December 31 of the				
	same year				

7. This application is an original application for (check one):							
	License	_, Renewal of a License	, or Expansion of Junkyard				
	8. There is enclosed certified or cashier's check or money order payable to the Alabama Department of Transportation for twenty-five (\$25.00) dollars for the annual fee ordollars formonths of operation of a new junkyard.						
-	false statement or se fee forfeited.	r representation made by the ap	oplicant for this license may cause the license to be	revoked and the			
Date		Sign	nature of Applicant				
		Title	e				
FOR (OFFICIAL USE	<u>ONLY</u>					
RECO	OMMENDED FO	OR APPROVAL					
DISTI	RICT:						
		Printed Name	Signature	Date			
AREA	Λ:						
		Printed Name	Signature	Date			
CENT	RAL OFFICE: _						
		Printed Name	Signature	Date			
APPR	ROVED:						
TRAN	SPORTATION 1	DIRECTOR:					
		Printed Name	Signature	Date			

LOCATION AND DIMENSION SKETCH OF FACILITY

Indicate

Direction of North