



INDIANA CLEAN YARD CERTIFICATION STATEMENT

State Form 53766 (R / 1-17)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ASSISTANCE AND OUTREACH BRANCH
OFFICE OF PROGRAM SUPPORT
100 North Senate Avenue
Indianapolis, IN 46204-2251

- INSTRUCTIONS:**
1. Complete the Auto Salvage Recyclers Environmental Self-Audit Checklist (State Form 53765).
 2. Sign and mail this form (State Form 53766) along with Auto Salvage Recyclers Environmental Self-Audit Checklist (State Form 53765) to the address at the upper right.

AUTHORITATIVE STATEMENT

1. I _____, hereby certify to the following:
- I) That I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this certification statement.
 - II) That, based on my inquiry of those individuals responsible for obtaining the information, the information contained in this submittal is, to the best of my knowledge, true, accurate and complete.
 - III) Those systems to maintain compliance are in place.
 - IV) That I am fully authorized to make this attestation on behalf of this facility.

I certify that the information I have provided in this form is true, accurate and complete, to the best of my knowledge.

Signature

Date (month, day, year)

Printed Name

Title

2. Source of Signatory Authority:

If a Corporation:

- President** **Secretary** **Treasurer**
 Vice President (If authorized by corporate vote.)
 Representative of the above (If authorized by corporate vote and if responsible for overall operation of the facility.)

If a Partnership:

- General Partner**

If a Sole Proprietorship:

- Owner / Proprietor**

INDIANA CLEAN YARD PARTICIPATION

3. Please indicate the level of Indiana Clean Yard recognition for which you are applying:

- Indiana Clean Yard
 Indiana Clean Yard Gold