

Certificate of Recycling

JOHN'S Twin Ports Recycling
614 1/2 East 1st Street
Duluth, MN 55805
(218)727-3185

This Document Certifies:

(BUSINESS NAME – CONTACT)
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(BUSINESS ADDRESS, CITY, STATE, ZIP)

Recycled the Following Equipment (see attached) on

(MONTH, DAY, YEAR)

In accordance with all Federal, State and Local laws releasing the above named business of all Liabilities.

JOHN'S Twin Ports Recycling assumes all liabilities once in possession of above listed equipment.

SAMPLE

JOHN'S Twin Ports Recycling will not landfill or export to countries less regulated than the United States of America.

I do hereby swear that all equipment listed was disposed of in accordance with all Federal and State Laws.

By: _____

Name: _____

SWORN/AFFIRMED BEFORE ME THIS ____ DAY OF _____

(NOTARY PUBLIC)

Print Certificate