TOWN OF CANAAN

APPLICATION FOR JUNKYARD LICENSE &
CERTIFICATE OF APPROVAL FOR THE LOCATION

For Year July 1, 2019 to June 30, 2020

New License _____ Renewal of License _____

Applicant’s Name__________________________ Telephone Number_______________

Mailing Address__________________________________________________________

________________________________________________________________________

Street Address of Proposed Junkyard__________________________________________
(If different than above)

________________________________________________________________________

Tax Map Number _______ Lot Number_______

1. If the applicant is a business, is the applicant a Sole Proprietor____ a partnership____ or a corporation____?

2. If this is a partnership or corporation, please list the names and addresses of all partners or officers of the corporation. (If not a partnership or corporation, enter N/A and proceed to Question 3.)

a.__________________________________________________________

b.__________________________________________________________

c.__________________________________________________________

d.__________________________________________________________

e.__________________________________________________________

3. Does the applicant, or any individual listed in Question 2, have any record of convictions for any type of larceny or receiving of stolen goods? (RSA 236:117)

Yes _____ No _____

Revised 11/09
4. Please describe the activity expected at this junkyard or automotive recycling yard, including: items to be stored/traded/sold; quantities or volumes, or numbers of vehicles on site; anticipated timeframes; and types of vehicles and numbers of trips, in and out, to service the facility. (RSA 236:112) (Attach extra sheets, as needed)

5. Please provide a description of the land to be included within the junk yard or automotive recycling yard, by reference to so-called permanent boundary markers. (RSA 236:115) (While not required, a map may be helpful)

6. Is the proposed junkyard or automotive recycling yard located more than 660 feet from the right of way lines of any Class I, II, III or Class III-a highway and more than 300 feet from the right-of-way lines of any Class IV, Class V or Class VI highway. (RSA 236:118)

   Yes_____ No_____ 

7. Is the junk yard or automotive recycling yard completely surrounded by a solidly constructed fence, at least 6 feet in height, which substantially screens the area; with a suitable gate, which will be kept locked, except when the applicant or his agent is within?

   OR, does topography, natural growth of timber or a natural barrier accomplish the same purposes as would the fencing above? (RSA 236:123)

   Yes_____ No_____ 

Please describe, in detail, any considerations you believe the governing body should take into account, if you are requesting the security or screening requirements be reduced.
8. Was this facility established, in this location, after 1965? (RSA 236:125)

Yes_____  No_____  

9. Will this facility be operated in compliance with all health and sanitary laws, ordinances, and regulations of the Town of Canaan and the State of New Hampshire, including RSAs 236:111-129 (relating to junkyards)?

Yes_____  No_____  

10. Are you familiar with the best management practices (BMPs) established by the Department of Environmental Services (DES) for the automobile salvage industry and to the best of your knowledge and belief, based in part on your own inspection and review of (facility operations / plans and specifications for the proposed facility) do you hereby certify that the facility (is / will be) operated in compliance with the BMPs established by DES?

Yes_____  No_____  

If the answer to any question above is “No,” attach a full description of all aspects of the facility which are non-compliant, and provide a plan and schedule for achieving compliance. Prepare to present the same information at a hearing, to be scheduled by town officials pursuant to RSA 236:111-129.

By signing this application, I hereby certify that the answers, information and statements provided by me are true and accurate. If any information provided for the purpose of obtaining this license is found to be false, it may be cause for the license to be revoked.

Signed under penalty of unsworn falsification:

______________________________________                  Date_____________________
Signature of Applicant

ATTACHMENTS

A. Map of property (preferably to scale)  Yes_____  No_____  
   (optional)  
B. Proof of legal ownership or right to use the property  Yes_____  No_____  
C. Completed “Self-Audit Checklist” worksheet  Yes_____  No_____  
D. Annual License Fee of _________________  Yes_____  No_____  
This JUNKYARD LICENSE & CERTIFICATE OF APPROVAL FOR THE LOCATION remains in effect only until the following July 1. Approval is personal to the applicant and is not assignable. (RSA 236:121)