



Minnesota Certified Automotive Recycler (MN-CAR) Application Form

Owner/Contact Name(s): _____
Business Name: _____
Street Address: _____
City: _____ State: _____
Mailing Address (if different): _____
Zip Code: _____
Phone: _____ Fax: _____
E-mail: _____

I wish to participate in the Minnesota Certified Automotive Recycler (MN-CAR) program.

I agree to meet the MN-CAR standards.

I agree to participate in the MN-CAR auditing program to verify compliance with the MN-CAR standards.

I have enclosed my MN-CAR membership fee of \$425.00, made payable to "ARM".

I agree to comply with the following guidelines:

- Be a member of ARM, and meet the membership requirements.
- Appropriately display applicable MN-CAR program identity and promotional materials. I agree to surrender the same if ARM membership is canceled or terminated.
- Improve my effectiveness as a business person and professional automotive recycler through trainings and seminars offered by ARM.
- To not knowingly purchase and/or sell automotive parts of questionable origin. A MN-CAR member should take pride in his industry and business, thereby enhancing quality, customer service and confidence.

I understand that as the automotive recycling industry changes, the requirements to be a MN-CAR member may also change. I agree to incorporate any such changes in my business. If I fail to do so, my MN-CAR membership will be subject to termination.

Business Owner Signature: _____ Date: _____

Staff Use Only:

Date Received by ARM: _____

Disclaimer: Each automotive recycling facility participating in the MN-CAR program is responsible for complying with applicable local, state, and federal regulations. Meeting the MN-CAR standards does not guarantee compliance with all regulations that apply to the facility, nor does it provide against citizen or third party legal actions.