



Town of Christiansburg Secondhand Building Fixtures Transaction Form

Reference Code of Virginia § 59.1-120, 59.1-121

DEALER INFO Business Name and Address: \_\_\_\_\_  
Junk Dealer Permit #: \_\_\_\_\_

TRANSACTION INFO Date: \_\_\_\_\_ Time: \_\_\_\_\_ Address from which property was acquired: \_\_\_\_\_

Name (Last, First, Middle) \_\_\_\_\_ Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_

Residential Address (Street/Apt #/City/State/Zip) \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Enter driver's license or other government identification below:

ID Type \_\_\_\_\_ ID Number \_\_\_\_\_ ID State \_\_\_\_\_ If obtained from another dealer, enter their permit number here: \_\_\_\_\_

Vehicle Used to Transport / Deliver Metal: Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ State \_\_\_\_\_ Tag \_\_\_\_\_

Trailer Used to Transport / Deliver Metal: Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ State \_\_\_\_\_ Tag \_\_\_\_\_

Item Type/Grade of Metal \_\_\_\_\_ Manufacturer \_\_\_\_\_ Model \_\_\_\_\_ Serial # \_\_\_\_\_ Other # \_\_\_\_\_  
Quantity \_\_\_\_\_ Weight \_\_\_\_\_ Add'l Description (cut, markings) \_\_\_\_\_

Item Type/Grade of Metal \_\_\_\_\_ Manufacturer \_\_\_\_\_ Model \_\_\_\_\_ Serial # \_\_\_\_\_ Other # \_\_\_\_\_  
Quantity \_\_\_\_\_ Weight \_\_\_\_\_ Add'l Description (cut, markings) \_\_\_\_\_

Item Type/Grade of Metal \_\_\_\_\_ Manufacturer \_\_\_\_\_ Model \_\_\_\_\_ Serial # \_\_\_\_\_ Other # \_\_\_\_\_  
Quantity \_\_\_\_\_ Weight \_\_\_\_\_ Add'l Description (cut, markings) \_\_\_\_\_

Item Type/Grade of Metal \_\_\_\_\_ Manufacturer \_\_\_\_\_ Model \_\_\_\_\_ Serial # \_\_\_\_\_ Other # \_\_\_\_\_  
Quantity \_\_\_\_\_ Weight \_\_\_\_\_ Add'l Description (cut, markings) \_\_\_\_\_

I certify that the information contained above is accurate to the best of my knowledge:

Signature of Dealer \_\_\_\_\_ Date \_\_\_\_\_