

STATE OF HAWAI'I
DEPARTMENT OF LAND AND NATURAL RESOURCES
DIVISION OF BOATING AND OCEAN RECREATION
4 Sand Island Access Road, Honolulu, Hawai'i 96819 • (808) 587-1970

CONFIDENTIAL
HOME ADDRESS, HOME TELEPHONE NUMBER,
CELLULAR PHONE NUMBER, PAGER NUMBER,
EMPLOYER, DATE OF BIRTH, CITIZENSHIP

APPLICATION FOR VESSEL CERTIFICATE OF TITLE AND/OR CERTIFICATE OF NUMBER

For Undocumented Vessel Principally Used in Hawai'i

HIN: HAZ VERIFIED HA-

TYPE OF REGISTRATION (Check One) 1-NEW 2-RENEWAL OF CERTIFICATE 3-TRANSFER OF OWNERSHIP (PREVIOUS NUMBER IF DIFFERENT) SALE PRICE (if applicable) \$

PRINCIPAL OWNER (BUSINESS OR INDIVIDUAL)

BUSINESS NAME

INDIVIDUAL LAST NAME	FIRST NAME	MIDDLE NAME	CITIZENSHIP OF OWNER
----------------------	------------	-------------	----------------------

CONTACT PHONE (XXX-XXX-XXXX)	DATE OF BIRTH	EMAIL ADDRESS
------------------------------	---------------	---------------

DRIVER'S LICENSE, TAX ID NUMBER, STATE ID NUMBER OR PASSPORT NUMBER

MAILING ADDRESS

STREET	CITY	STATE
--------	------	-------

ZIP CODE	COUNTRY	PROVINCE
----------	---------	----------

STREET ADDRESS SAME AS MAILING ADDRESS

STREET	CITY	STATE
--------	------	-------

ZIP CODE	COUNTRY	PROVINCE
----------	---------	----------

CO-OWNER (BUSINESS OR INDIVIDUAL)

BUSINESS NAME

INDIVIDUAL LAST NAME	FIRST NAME	MIDDLE NAME	CITIZENSHIP OF OWNER
----------------------	------------	-------------	----------------------

CONTACT PHONE (XXX-XXX-XXXX)	DATE OF BIRTH	EMAIL ADDRESS
------------------------------	---------------	---------------

DRIVER'S LICENSE, TAX ID NUMBER, STATE ID NUMBER OR PASSPORT NUMBER

STREET ADDRESS

STREET	CITY	STATE
--------	------	-------

ZIP CODE	COUNTRY	PROVINCE
----------	---------	----------

ATTACH THE REGISTRATION DOCUMENTS ISSUED BY THE STATE OR COUNTRY OF ORIGIN AND COMPLETE THE FOLLOWING:

1. VESSEL ENTERED HAWAI'I (Date) _____
2. VESSEL FIRST OPERATED IN HAWAI'I (Date) _____
3. U.S. PORT OF IMPORTATION: _____
4. DATE OF DUTY PAYMENT: _____
5. ENTRY NUMBER: _____
6. STATE OF PRINCIPAL OPERATION - ANSWER REQUIRED - _____

VESSEL NAME	VESSEL LENGTH			HOMEBUILT? <input type="checkbox"/> YES <input type="checkbox"/> NO
	YEAR BUILT	MODEL YEAR	FEET INCHES	

VESSEL TYPE

1-AIR BOAT 2-AUXILIARY SAIL 3-CABIN MOTORBOAT 4-HOUSEBOAT 5-INFLATABLE BOAT 6-OPEN MOTORBOAT

7-PADDLECRAFT 8-PERSONAL WATERCRAFT 9-PONTOON BOAT 10-ROWBOAT 11-SAIL ONLY

12-OTHER _____

PRIMARY OPERATION

1-CHARTER FISHING 2-COMMERCIAL FISHING 3-COMMERCIAL PASSENGER CARRYING 4-DEALER DEMONSTRATION

5-MANUFACTURER DEMONSTRATION 6-OTHER COMMERCIAL OPERATION 7-PLEASURE 8-RENT OR LEASE (LIVERY)

11-OTHER* _____

FUEL

1-ELECTRIC 2-DIESEL 3-GASOLINE 4-OTHER _____

ENGINE

MANUFACTURER _____ SERIAL NUMBER _____

ENGINE DRIVE TYPE

1-INBOARD 2-OUTBOARD 3-POD DRIVE 4-STERNDRIVE 5-OTHER _____

PROPULSION TYPE

1-AIR THRUST 2-MANUAL 3-PROPELLER 4-SAIL 5-WATER JET 6-OTHER _____

HULL

HULL DAMAGE YES NO

NUMBER OF HULLS _____ MAKE AND MODEL _____ HULL COUNTRY OF ORIGIN _____

HULL COLOR _____ CABIN / DECK COLOR _____ TRIM COLOR _____

HULL MATERIAL

1-ALUMINUM 2-FIBERGLASS 3-PLASTIC 4-RUBBER / VINYL / CANVAS 5-STEEL 6-WOOD

7-OTHER _____

AUTHENTICATION. THIS SECTION MUST BE COMPLETED BY ALL APPLICANTS. By signing below, I/We hereby certify under penalty of law that: (1) any title brand information known to me/us is attached to this application; (2) the vessel described herein is not a documented vessel, a foreign documented vessel, or a barge; and (3) the information given by me/us on this application is true, correct, and complete to the best of my/our knowledge and belief.

Signature(s) _____ Date(s) Signed _____

Owner: _____

Co-Owner: _____

IF VESSEL IS REGISTERED AS COMMERCIAL

NET TONS (IF VESSEL IS OVER 31 FT) _____ AVERAGE NUMBER OF PASSENGERS _____

IF VESSEL IS REGISTERED AS COMMERCIAL FISHING

HAILING HOME PORT _____ FISHERIES CATEGORY AND COMMERCIAL MARINE LICENSES (FEDERAL LONGLINE, "DEEP 7" BOTTOM-FISH, AQUARIUM PERMIT OR OTHER NON-PERMITTED FISHERIES)

PLACE VESSEL KEPT

1-MOORED (ISLAND) _____ 2-STORED ON LAND (ISLAND) _____

HARBOR (IF MOORED) _____ USE TRAILER TO LAUNCH BOAT FROM STATE BOAT RAMP

LIEN

NAME _____

ADDRESS _____

FOR DEPARTMENTAL USE ONLY

Subscribed before me this _____ day of _____, 20____ (Signature) _____

DATE PROCESSING COMPLETED _____ By: _____

EXPIRATION DATE _____

IF VESSEL REGISTERED AS PLEASURE – ANSWER REQUIRED – IF FISHING (OF ANY KIND) IS NOT YOUR PRIMARY OPERATION, DO YOU EVER USE YOUR VESSEL FOR NON-COMMERCIAL (RECREATIONAL, SUBSISTENCE) FISHING? YES NO

* Fee Exempt, Government Fee Exempt, Youth Group