

## **Vessel Title Application**

Vessel–Please type	e or print plainly						Lea	ase L	For title purposes only	
Hull identification number (HIN)		Primary use type	Fuel t	Fuel type		del yr	Make			
Model Vessel type		Vessel type	Hu	Hull material		Engi	jine drive		Propulsion type	
Length (ft) Location of v	essel (Address, City, Si	tate, ZIP code)							L	
Manufacturer				Purchase pri	ce Date e	ntered	WA Qu		e Historic donation □ No □ Yes □ No	
Conditions (choose one) Condition 1 means your vessel is well maintained. Considerations may include, but are not limited to: Mechanically sound Minor repairs needed May have additional options added Low to average engine hours			<ul> <li>Condition 2 means your vessel is in need of repair. Considerations may include, but are not limited to:</li> <li>Areas are worn and faded even after cleanup</li> <li>Major repairs needed</li> <li>Corrosion, dents, cracks, and/or tears evident</li> <li>Higher than average engine hours</li> </ul>							
	-	al owners, see <u>Vessel T</u> i		-				form	120-2800	
	D type	Driver license/ID/TIN/EIN/UBI r			Phone type		<u>icrs</u> , i		code) Phone number	
Registered owner full na	me ( <b>Last, First, Middle</b>	s <b>, Suffix</b> ) or Business name					[		Owner date of birth	
WA primary residence ad	ddress <i>(if an individual)</i>	or WA principal place of busines	s addres	ss (if a busine:	ss) or WA m	noorage	e addres	ss (if n	on-resident)	
Mailing address, if differe	ent than above address	(Street address or PO Box, City,	, State, 2	ZIP code)						
One-time mailing addres	s, if applicable									
2	pe Ownership – Joint tenants w/right ID type Driver license/ID/TIN/EIN/UBI no Ex of survivorship (JTWROS) □ Yes □ No				Expi	ration da	ate (A	Area code) Phone number		
		<b>e, Suffix</b> ) or Business name						D	ate of birth	
		if different than registered orm 420-289A. *Approve								
		dle initial or Business name)		<u></u>				<u> </u>		
Legal owner/Lienholder type	ID type	Driver license/ID/TIN/EIN	I/UBI nu	mber	Expiration	ı date			ELT participant	
Mailing address (Street a	address or PO Box, City	, State, ZIP code)								
Dealer										
Dealer type Dealer	no Dealer name		Sale	e date	Delivery da		Vehicle		Used 🗌 Prev titled	
		t. The vessel is clear of en ax has been collected.	cumbr	ances Dea	ler authoriz	ed sign	ature			
		ement may be guilty of a feloi alty of perjury under the law o								
Signature of registered owner Title, if signing for business				Signature of registered owner Title, if signing for business						
Date and place (city or county) signed				Date and place (city or county) signed						
Notarization/Certific		your signature notarized if you s	-							
State of Signed or attested before me on			County of by Name of person(s) signing this document							
(Seal or stamp)		Notary/Agent/Subagent signature								
				Notary p	rinted or sta					
				_ and Dealer o	r county/off	ce nun	nber or i	notary	expiration date	