

BOAT QUESTIONNAIRE

Name: _____

Address: _____

City, State, Zip: _____

1. Date purchased? _____ If sold, when? _____

2. Were taxes paid in another county? YES _____ NO _____

If YES, which county? _____

3. Were taxes paid under a different name? YES _____ NO _____

If YES, what name and address were used?

Name Phone

Street City & State Zip

4. Please complete the following:

Watercraft: Year _____ Make _____ Model _____ Length _____

Watercraft: Hull ID: (If known) _____

Motor: Year _____ Make _____ Model _____ HP _____

Watercraft Trailer: Year _____ Make _____ Model _____ Length _____

Watercraft Trailer VIN Number: _____

5. When not in use, where are these units kept?

Street City State Zip

Signature Date Phone Number

YOU MAY USE THE BACK OF THIS FORM FOR ANY ADDITIONAL INFORMATION.