

B1

STATE OF ALASKA
DIVISION OF MOTOR VEHICLES
BOAT TITLE AND REGISTRATION APPLICATION

TYPE	<input type="checkbox"/> New Number (New Registration)	<input type="checkbox"/> Renewal Number (Renew Registration)	<input type="checkbox"/> Replace (Circle one) Tabs / Certificate	<input type="checkbox"/> Add/Remove Lienholder			
	<input type="checkbox"/> Transfer of Ownership	<input type="checkbox"/> Start 3 Year NTI Process	<input type="checkbox"/> Replace Lost Stolen Destroyed Title	<input type="checkbox"/> New AK Title (original or OOS transfer)			
BOAT INFORMATION	AK BOAT NUMBER <input type="checkbox"/> Needs new boat number		Hull Identification Number(HIN) <input type="checkbox"/> Needs HIN				
	Overall Length of Vessel	Year	Make	Model	State of Principal Operation <input type="checkbox"/> AK <input type="checkbox"/> Other: _____	Prev Issued Registration Number (I/A)	
	CLASS <input type="checkbox"/> Powered boat (B1) <input type="checkbox"/> Non-powered boat (B2) <input type="checkbox"/> Barge (B3) B1- \$24 B2- \$10 B3- \$75	VESSEL TYPE <input type="checkbox"/> Airboat <input type="checkbox"/> Auxiliary sail <input type="checkbox"/> Open motorboat <input type="checkbox"/> Cabin motorboat <input type="checkbox"/> Houseboat <input type="checkbox"/> Inflatable boat <input type="checkbox"/> Paddlecraft <input type="checkbox"/> Personal watercraft (I.E. Jet Ski) <input type="checkbox"/> Pontoon boat <input type="checkbox"/> Rowboat <input type="checkbox"/> Sail only <input type="checkbox"/> Other:	ENGINE DRIVE TYPE <input type="checkbox"/> Inboard <input type="checkbox"/> Outboard <input type="checkbox"/> Pod Drive <input type="checkbox"/> Sterndrive <input type="checkbox"/> Other:	PROPULSION TYPE <input type="checkbox"/> Air Thrust <input type="checkbox"/> Manual <input type="checkbox"/> Propeller <input type="checkbox"/> Sail <input type="checkbox"/> Water Jet <input type="checkbox"/> Other:	PRIMARY OPERATION <input type="checkbox"/> Pleasure <input type="checkbox"/> Rent or lease <input type="checkbox"/> Charter fishing <input type="checkbox"/> Commercial passenger carrying <input type="checkbox"/> Commercial fishing <input type="checkbox"/> Dealer or manufacturer demonstration <input type="checkbox"/> Other commercial operation:	FUEL TYPE <input type="checkbox"/> Gas <input type="checkbox"/> Diesel <input type="checkbox"/> Electric <input type="checkbox"/> Other	HULL MATERIAL <input type="checkbox"/> Aluminum <input type="checkbox"/> Fiberglass <input type="checkbox"/> Plastic <input type="checkbox"/> Wood <input type="checkbox"/> Rubber/Vinyl /Canvas <input type="checkbox"/> Steel <input type="checkbox"/> Other:
	Hull Color	Trim Color	Cabin Color	DOES THIS VESSEL HAVE A CURRENT CERTIFICATE OF DOCUMENTATION FROM THE USCG? <input type="checkbox"/> YES <input type="checkbox"/> NO			
				IF YES, IS THE CERTIFICATE IN YOUR NAME AND EXPECTED TO REMAIN THROUGH REG. PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO			
	ADDRESS INFORMATION	Leasing Company Mailing Address (leased vehicles only)			City	State	Zip
Owner/ Lessor Mailing Address			City	State	Zip		
Owner/Lessee Residence Address			City	State	Zip		
OWNER INFORMATION	Applicant Type: <input type="checkbox"/> Individual <input type="checkbox"/> Business/Co. <input type="checkbox"/> Lessor <input type="checkbox"/> Trust <input type="checkbox"/> Charitable / Non-Profit Org <input type="checkbox"/> Gov. Agency						
	Full Legal Name including Suffix Company / Trust / Agency Name Lessor's Name						
	Alaska Driver License Number OR Social Security Number OR Date of Birth (MM/DD/YYYY)	Tax ID Number					
	Email Address	Phone #					
CONJUNCTION TYPE (Only required if more than one registered owner & not applicable between a Lessor and Lessee) <input type="checkbox"/> "And" signatures of ALL owners required to sell / transfer (Cannot be selected if owned by anything other than two or more individuals) <input type="checkbox"/> "OR" signature of a single owner required to sell / transfer							
CO-OWNER INFORMATION	Applicant Type: <input type="checkbox"/> Individual <input type="checkbox"/> Business/Co. <input type="checkbox"/> Lessee <input type="checkbox"/> Trust <input type="checkbox"/> Charitable / Non-Profit Org <input type="checkbox"/> Gov. Agency						
	Full Legal Name including Suffix Company / Trust / Agency Name Lessee's Name						
	Alaska Driver License Number OR Social Security Number OR Date of Birth (MM/DD/YYYY)	Tax ID Number					
OTHER INFORMATION	LIENHOLDER NAME (if paid in full mark "None") <input type="checkbox"/> NONE						
	LIENHOLDER ADDRESS: (PO Box or Street Address)			City	State	Zip	
	Become an Alaskan Organ Donor / Register to Vote (To use this form to register you must have an Alaska permit, license or ID card number and make an in-person application) Alaska ID/DL #: _____ <input type="checkbox"/> Organ Donor <input type="checkbox"/> Voter Reg Initial here: _____ To register to vote, you must be a US Citizen, an Alaska resident, and 18 years of age or older, or within 90 days of turning 18. If you meet these requirements, are not registered to vote in another jurisdiction or agree to cancel that registration and wish to register to vote or update your voter registration, initial above. Donate \$1 or more to the Anatomical Gift Awareness Fund: \$ _____ .00						
AFFIDAVIT OF OWNERSHIP	I/we undersigned certify that I/we are the owner(s) of the boat described above. I purchased the boat on: _____ from _____ (Date of Purchase) (Name of person or business that the boat was obtained from, if applicable)						
	I obtained the boat in the following manner: <input type="checkbox"/> Dealership – New/ Used <input type="checkbox"/> Private Sale <input type="checkbox"/> I built the boat/had boat built <input type="checkbox"/> Garage Sale <input type="checkbox"/> Newspaper Advertisement <input type="checkbox"/> Gift <input type="checkbox"/> Other: _____						
I certify under penalty of perjury that I am the legal owner of the boat described in this application, that this boats state of principal operation is primarily in Alaska. I certify under penalty of perjury that all information is true and correct and that the Hull Identification Number of this vessel is or will be permanently affixed in accordance with 33 CFR 181.29. False statements are punishable under AS 11.56.210. I also acknowledge that I must notify DMV within 15 days of change of address or if the boat is destroyed, abandoned or becomes Documented.							
Owner/Agent/ Representative Signature			Date	Co-Owner Signature		Date	

The Social Security Number (SSN) will be used only for DMV purposes and will not be disclosed as part of a boat record. Disclosure of the SSN is not required by law.