

FOR OFFICE USE <small>Revised 2/09</small>	Date Received _____	CCK \$ _____ MO \$ _____ CCK or MO # _____	CASH \$ _____ CC\$ _____	Return Date _____
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Make check or money order payable to Mississippi Dept. of Wildlife, Fisheries, and Parks

MISSISSIPPI MOTOR BOAT REGISTRATION APPLICATION

CHECK ONE

- New Application
- Transfer
- Renewal
- Duplicate

**REGISTRATION
VALID FOR THREE (3) YEARS**

FOR FASTER SERVICE RENEW AT:
Any license agent location • Call 1-800-5GO-HUNT 24 hours a day • MDWFP.COM

Less than 16 feet\$9.20	40 feet and over\$46.70
16 to less than 26\$24.20	Dealer number\$39.20
26 feet to less than 40\$46.70	Duplicate\$6.70

Present Registration Number on Boat

• ALL SHADED AREAS **MUST** BE COMPLETED • SEE BACK FOR INSTRUCTIONS •

First Name		Middle		Last	
Mailing Address			City	State	Zip Code
Date of Birth	Driver's License #	DL State	Social Security #		Home Phone #
Other Phone #	Previous Owner			E-mail Address:	

ALL BOATS *MUST* HAVE A HULL IDENTIFICATION OR SERIAL NUMBER;
If not, boat must be inspected. Please call your local District Office for additional information.



*** SIGNATURE REQUIRED ***

**SIGN
HERE**

Signature Certifies Ownership

Date

Boats Built Prior To Nov. 1, 1972 MUST Give Serial Number:	Boats Built After Nov. 1, 1972 MUST Give 12 DIGIT Hull I.D. #:
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LENGTH	Feet	Inches	Year Boat Built	Make of Boat
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HULL MATERIAL	BOAT USE	PROPULSION	FUEL TYPE	TYPE OF BOAT	
1. <input type="checkbox"/> Fiberglass	1. <input type="checkbox"/> Personal Pleasure	1. <input type="checkbox"/> Outboard	1. <input type="checkbox"/> Gasoline	1. <input type="checkbox"/> Open	7. <input type="checkbox"/> Jet Ski
2. <input type="checkbox"/> Aluminum	2. <input type="checkbox"/> Rental/Lease	2. <input type="checkbox"/> Inboard/Outboard	2. <input type="checkbox"/> Diesel	2. <input type="checkbox"/> Cabin Powered	8. <input type="checkbox"/> House Boat
3. <input type="checkbox"/> Wood	3. <input type="checkbox"/> Commercial Fishing	3. <input type="checkbox"/> Inboard	3. <input type="checkbox"/> Other	3. <input type="checkbox"/> Auxiliary	9. <input type="checkbox"/> Paddle Boat
4. <input type="checkbox"/> Steel	4. <input type="checkbox"/> Other	4. <input type="checkbox"/> Other	4. <input type="checkbox"/> Electric	4. <input type="checkbox"/> Sail Boat	10. <input type="checkbox"/> Air Boat
5. <input type="checkbox"/> Other	5. <input type="checkbox"/> Commercial Pleasure	5. <input type="checkbox"/> Sail		5. <input type="checkbox"/> Jet Boat	11. <input type="checkbox"/> Other
6. <input type="checkbox"/> Inflatable	6. <input type="checkbox"/> Dealer	6. <input type="checkbox"/> Jet		6. <input type="checkbox"/> Canoe	12. <input type="checkbox"/> Pontoon
	7. <input type="checkbox"/> Agency				

Saltwater Fishing: Yes No

U.S. Citizenship: Yes No

Co-Owner	First Name:	Middle Initial	Last Name	Date of Birth	Social Security or DL Number
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• OPTIONAL • OUTBOARD MOTOR & TRAILER INFORMATION • OPTIONAL •

Motor 1 (Serial Number)	Motor 1 (Manufacturer)	Horse Power	Motor 2 (Serial Number)	Motor 2 (Manufacturer)	Horse Power
Trailer Serial Number _____					

NOTICE: Proof of Mississippi Sales Tax to accompany all new and used boats bought from an out of state or in state dealer along with dealer's invoice. A copy of a notarized or witnessed bill of sale must accompany all applications if boat is purchased from an individual. If this boat has been registered in your name in another state, please send a copy of that registration in lieu of a bill of sale.

DETACH AND KEEP WITH VESSEL UNTIL CERTIFICATE NUMBER IS RECEIVED

Name _____ Address _____
 City _____ State _____ Zip Code _____
 Make of Boat _____ HIN or SERIAL # _____

I Hereby Certify on _____ I made application for certification of number for above described boat.

**Valid for 60 days of issue. Carry on board when the vessel is being operated.
 UNDER PENALTY OF PERJURY THIS INFORMATION IS TRUE AND CORRECT.**

(OVER)

Signature of Owner _____

INSTRUCTIONS

1. Type or print in ink, except the signature.
2. Owner of boat must sign this application.
3. All shaded areas must be completed.
4. If vessel is presently numbered, enter number in space provided on front.
5. If vessel is registered in your name, in another state, please send copy of registration from that state in lieu of a bill of sale

Return Application with personal check, cashier's check, or money order with the appropriate fee to:

**Mississippi Department of Wildlife, Fisheries, and Parks
Boat Registration Division
1505 Eastover Drive • Jackson, MS 39211-6374**

**FOR YOUR CONVENIENCE, YOU MAY USE THE AREA BELOW
AS A VALID BILL OF SALE WHEN PROPERLY WITNESSED OR NOTARIZED**

Make of Boat	Year Built	Hull #	Boat Registration #	Length
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Buyer: (Print) _____
Last Name
First Name
Initial

Seller: (Print) _____
Last Name
First Name
Initial

Co-Seller: (Print) _____
Last Name
First Name
Initial

Seller's Street Address
City
State
Zip Code

Seller Signature
Date
Co-Seller Signature
Date

Buyer Signature
Date
Witness Signature
Date

SELLER(S) CERTIFY THAT STATEMENTS PROVIDED ON THE FRONT OF THIS APPLICATION FOR CERTIFICATION OF REGISTRATION ARE TRUE AND ACCURATE TO THE BEST OF SELLER(S) KNOWLEDGE.

STATE OF: _____ COUNTY OF: _____
 This day personally came and appeared before me, the undersigned stated that all of the matters, things and facts set forth are true and correct as therein stated.

SWORN TO AND SUBSCRIBED BEFORE ME, this the _____ day of _____, 20____

Notary Public
My Commission expires _____

This Stub is to serve as your receipt until you receive your Certificate of Number. This must be kept with the vessel and available for inspection by Law Enforcement Officers. Upon payment of fee this stub authorizes use of your vessel. Its validity may be verified at any time by Enforcement Officers. Make cashier's check or money order payable to the Mississippi Department of Wildlife, Fisheries, and Parks. Record your cashier's check or money order number here _____

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