



Delaware Fish & Wildlife
Boat Registration Office
 89 Kings Highway, Dover, DE 19901
 Phone: (302) 739-9916 / Fax: (302) 739-1317

State of Principal Operation* **DELAWARE**

VESSEL REGISTRATION APPLICATION

OFFICE USE ONLY DL # _____ FORM # _____	Reason for Application: <input type="checkbox"/> New <input type="checkbox"/> Transfer <input type="checkbox"/> Renew <input type="checkbox"/> 1 Year <input type="checkbox"/> 3 Years
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NOTICE: VESSELS CAN ONLY BE REGISTERED IN THE STATE OF PRINCIPLE OPERATION*. (If you do not use your vessel in Delaware waters more often than waters of another state during the calendar year, you cannot register your vessel in Delaware.)

Do you intend to operate this vessel outside the waters of the U.S. and its territories? **YES** **NO**

Please print or type; mark an "X" on appropriate line for EACH category.

HULL MATERIAL		PROPULSION TYPE		PRIMARY OPERATION	
AL <input type="checkbox"/> Aluminum	RV <input type="checkbox"/> Rubber/Vinyl/Canvas	AT <input type="checkbox"/> Air Thrust	ML <input type="checkbox"/> Manual	CH <input type="checkbox"/> Charter Fishing	DL <input type="checkbox"/> Dealer/Manu Demo
FI <input type="checkbox"/> Fiberglass	ST <input type="checkbox"/> Steel	OT <input type="checkbox"/> Other	OT <input type="checkbox"/> Other	CF <input type="checkbox"/> Commercial Fishing	PL <input type="checkbox"/> Pleasure
OT <input type="checkbox"/> Other	WD <input type="checkbox"/> Wood	PR <input type="checkbox"/> Propeller	SL <input type="checkbox"/> Sail	CO <input type="checkbox"/> Commercial Other	RL <input type="checkbox"/> Rental/Lease
PL <input type="checkbox"/> Plastic		WJ <input type="checkbox"/> Water Jet		CP <input type="checkbox"/> Commercial Passenger	DO <input type="checkbox"/> Documented

VESSEL TYPE		FUEL		ENGINE DRIVE TYPE	
AB <input type="checkbox"/> Air Boat	OT <input type="checkbox"/> Other	DI <input type="checkbox"/> Diesel	IN <input type="checkbox"/> Inboard	OT <input type="checkbox"/> Other	
AS <input type="checkbox"/> Auxiliary Sail	PC <input type="checkbox"/> Paddle Craft	EL <input type="checkbox"/> Electric	OU <input type="checkbox"/> Outboard	OU <input type="checkbox"/> Outboard	
CB <input type="checkbox"/> Cabin Motorboat	PB <input type="checkbox"/> Pontoon Boat	GA <input type="checkbox"/> Gasoline	PD <input type="checkbox"/> Pod Drive	PD <input type="checkbox"/> Pod Drive	
HB <input type="checkbox"/> House Boat	PW <input type="checkbox"/> Personal Watercraft	OT <input type="checkbox"/> Other	SD <input type="checkbox"/> Stern Drive	SD <input type="checkbox"/> Stern Drive	
IN <input type="checkbox"/> Inflatable	RB <input type="checkbox"/> Row Boat				
OM <input type="checkbox"/> Open Motorboat	SO <input type="checkbox"/> Sail Only				

Length		FT		IN	Make & Model	Vessel Name (if applicable)
Model Year OR Year Built					Hull ID #	
Previous Owner (if applicable)					Number Previously Issued	

Lienholder (if applicable) _____

**** ALL INFORMATION IS REQUIRED FOR REGISTRATION ****

*Owner Name (FIRST, MIDDLE, LAST, SUFF.) OR Company Name	*Phone Number	*Email Address
*Owner Address: STREET ADDRESS, PO BOX, CITY, STATE, & ZIP	*Date of Birth	*State ID NUMBER & State of Issue OR Passport NUMBER/Foreign ID NUMBER & Country of Issue OR File Number/EIN
Joint Ownership if Watercraft is Owned by More Than One Person (circle one): <input type="checkbox"/> AND / <input type="checkbox"/> OR		
2 nd Owner Name (FIRST, MIDDLE, LAST, SUFF.) OR Company Name	Phone Number	Email Address
Owner Address: STREET ADDRESS, PO BOX, CITY, STATE, & ZIP	Date of Birth	State ID NUMBER & State of Issue OR Passport NUMBER/Foreign ID NUMBER & Country of Issue OR File Number/EIN
3 rd Owner Name (FIRST, MIDDLE, LAST, SUFF.) OR Company Name	Phone Number	Email Address
Owner Address: STREET ADDRESS, PO BOX, CITY, STATE, & ZIP	Date of Birth	State ID NUMBER & State of Issue OR Passport NUMBER/Foreign ID NUMBER & Country of Issue OR File Number/EIN

_____ I certify under penalty of perjury that I/we am/are the legal owner(s), or agents thereof, of the vessel described in this application and that Delaware is the
 initial "State of Principal Operation" for this vessel.

_____ I declare under penalty of perjury under the laws of Delaware that the foregoing is true and correct.
 initial

_____ I also acknowledge that I must notify the Division of Fish & Wildlife within 15 days of the owner(s) change of address and/or if the vessel is sold, destroyed,
 initial abandoned, becomes documented, or is no longer principally operated in the waters of Delaware.

NOTICE: False statements made herein are punishable by law pursuant to 11 Del. C. § 1233.

Signature of Owner	Printed Name	Date
Signature Co-Owner (if applicable)	Printed Name	Date