

REGISTRATION NUMBER

DVH 0216

		DATE OF REGISTRATION/PUBLICATION
· · .		Month 04 Day 22
	DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SE	
1	Please give the make and model of the vessel that embodies the des	
2 (a)	What is the type or style of the design for which registration is sour FIBERGLASS MONO-HULL CUDDY CABIN SPOR	ght? RT BOAT
DESIGN (b) Check here if his is a single esign.	Provide a brief general statement setting forth the salient features of Overall aesthetic appearance, including deck layou and style lines.	the design. t and configuration, hull configuration,
Check here if = egistering nore than (C) see Form -VH/CON or additional esigns.	If this design is derived from an earlier design, describe how that de	sign has been revised, adapted, or rearranged.
3 DESIGNER(S)		(s) and (2) the individual authorship of the design is difficult
WNER, F NOT DESIGNERS)	If the owner is different from the designer(s) or employer named above Name: Chaparral Boats, Inc. Address: P. O. Drawer 928 300 Industrial Park Blvd. Nashville, GA 31639-0928	
5 (a) RIORITY CLAIM	in an application filed in a foreign country that extends to designs of owners who are citizens of the United States, or to persons filing applications in the United States, similar protection to that afforded in 17 U.S.C. chapter 13? Yes No Ser.	res, identify the country and date of application: untry: te of application: ial No:
ATE MADE DUBLIC	Was this design made public before the date of application? ☑ Yes ☐ If yes, on what date? ★ 7 16 2004 Month ☐ Day Year ** **Complete all applicable spaces (numbers 7-9) on the reverse side of the form at section 9.	

by CO by 4/19/200	y authority telephone call to remitter, 05."	CHECKED BY	
		CORRESPONDENCE	FOR
		□Yes	COPYRIGH OFFICE
			USE ONLY
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7	Please provide the name and address of the person to whor	n correspondence regarding this applica	tion may be directed:
1	Name: William S. Pegg		
CONTACT PERSON	Address: P. O. Drawer 928		
	Nashville, GA 31639-0928	E-mail address bpegg@ch	aparralboats.com
	FAX number (229) 686-3660	Daytime phone: (229)	686-7481
0	Give the name and account number if the registration fee is to	be charged to a Deposit Account establis	hed in the Copyright Office
Ŏ	Name of Account:		
DEPOSIT ACCOUNT	Account number:		
CERTIFICATION AND SWORN STATEMENTS	DECLARATION: The undersigned, as the applicant or the applicant's duly appointed agent or representative, being hereby warned that willful false statements are punishable by fine or imprisonment, or both, under 18 U.S.C. §1001, and that such willful false statements may jeopardize the validity of this application or any resulting registration, hereby declares to the best of his/her knowledge and belief: (1) that the design has been fixed in a useful article; (2) that the design has been fixed in a useful article; (3) that those aspects of the design for which registration is sought are not protected by a design patent; (4) that the design has not previously been registered on behalf of the applicant's predecessor in title; and (5) that the applicant is the person entitled to protection and to registration under chapter 13 of title 17, United States Code Complete if applicable: The design has been made public with a design notice as prescribed by 17 U.S.C. §1306. Following is the exact form of the design notice: An elliptical "Distinctive Owner Identification", with "Protected Design" across the top and "2004" across the bottom Where on the useful article is the design notice located? Aft port quarter. If the undersigned is not the applicant he/she is properly authorized to execute this application on behalf of the applicant. **United States Code Vice President Position or Title Determine or Title Department or Ti		
	y 1, 1999, the fee is \$75.00. For current fee infort Office Website at http://www.loc.gov/copyright, or		ght Office, check the
	t Office Website at http://www.ioc.gov/copyright, of	YOU MUST:	The state of the s
Mail certificate to:	Chaparral Boats, Inc	Complete all nece Sign your applicat SEND ALL 3 EL IN THE SAME P	ion in space 9
Certificate will be	Number/Street/Apt ▼ P. O. Drawer 928	1. Application form 2. Nonrefundable fill to Register of Co	ling fee in check or money order payable
	City/State/ZiP V Nashville, GA 31639-0	3. Design material MAIL TO:	
envelope	radiville, OA 01000-0	P.O. Box 71380 Washington, D.C. 2	

EXAMINED BY

FORM D-VH

*"Date in space 6 and certification confirmed

17 U.S.C. §1327. Penalty for false representation. Whoever knowingly makes a false representation materially affecting the rights obtainable under this chapter for the purpose of obtaining registration of a design under this chapter shall pay a penalty of not less than \$500 and not more than \$1,000, and any rights or privileges that individual may have in the design under this chapter shall be forfeited." **☆U.S. GOVERNMENT PRINTING OFFICE:** January 1999-60,000 PRINTED ON RECYCLED PAPER

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