



ARIZONA GAME AND FISH DEPARTMENT
2221 WEST GREENWAY ROAD
PHOENIX ARIZONA 85023

APPLICATION FOR ARIZONA WATERCRAFT CERTIFICATE OF NUMBER

TRAN AZ. DECAL
 CODE NO. NO.

 ABOVE FOR DEPARTMENT USE ONLY

PLEASE PRINT OR TYPE WITH BLACK INK
 MARK AN "X" IN ONE BOX FOR EACH CATEGORY

***** BOAT TYPE *****

RA <input type="checkbox"/> RUNABOUT (SKI & BASS)	UT <input type="checkbox"/> UTILITY	OU <input type="checkbox"/> OUTBOARD
DC <input type="checkbox"/> DAY CRUISER	CN <input type="checkbox"/> CANOE	OJ <input type="checkbox"/> OUTBOARD - JET
CC <input type="checkbox"/> CABIN CRUISER	IN <input type="checkbox"/> INFLATABLE	IN <input type="checkbox"/> INBOARD (I-O)
HB <input type="checkbox"/> HOUSEBOAT	PW <input type="checkbox"/> PERSONAL WATERCRAFT	IJ <input type="checkbox"/> INBOARD - JET
PB <input type="checkbox"/> PONTOON BOAT	OT <input type="checkbox"/> OTHER	EL <input type="checkbox"/> ELECTRIC
SA <input type="checkbox"/> SAILBOAT		SO <input type="checkbox"/> SAIL AUXILIARY - OUTBOARD
		SI <input type="checkbox"/> SAIL AUXILIARY - INBOARD

***** PROPULSION TYPE *****

LENGTH	FT.	IN.	MANUFACTURER
YEAR BUILT OR MODEL YEAR	HULL ID NUMBER		

***** HULL MATERIAL *****

WD <input type="checkbox"/> WOOD	GA <input type="checkbox"/> GASOLINE	RP <input type="checkbox"/> RESIDENT - PLEASURE
FI <input type="checkbox"/> FIBERGLASS	DI <input type="checkbox"/> DIESEL	NP <input type="checkbox"/> NON-RESIDENT - PLEASURE
ME <input type="checkbox"/> METAL	OT <input type="checkbox"/> OTHER	LI <input type="checkbox"/> LIVERY
IN <input type="checkbox"/> INFLATABLES		CO <input type="checkbox"/> COMMERCIAL
OT <input type="checkbox"/> OTHER		CF <input type="checkbox"/> COMMERCIAL FISHING
		CP <input type="checkbox"/> COMMERCIAL PASSENGER
		GO <input type="checkbox"/> GOVERNMENT
		TX <input type="checkbox"/> INDIAN - TAX EXEMPT
		SX <input type="checkbox"/> SOLDIER - TAX EXEMPT

REGISTRATION FEE \$ _____ TRANSFER FEE \$ _____
 LICENSE TAX \$ _____ TOTAL FEES \$ _____

OWNER'S NAME - LAST FIRST MI DATE OF BIRTH - MO - DAY - YEAR

MAILING ADDRESS STREET ADDRESS, P.O. BOX OR BOX NUMBER CITY STATE ZIP

JOINT OWNERSHIP - IF WATERCRAFT IS OWNED BY MORE THAN ONE PERSON - SEE REVERSE BEFORE CIRCLING. JS CODE - FOR DEPARTMENT USE

AND/OR AND OR CO-OWNER'S NAME - LAST FIRST MI DATE OF BIRTH - MO - DAY - YEAR

MAILING ADDRESS STREET ADDRESS, P.O. BOX OR BOX NUMBER CITY STATE ZIP

OWNER'S DAYTIME PHONE # OWNER'S HOME PHONE # IN WHICH STATE WILL BOAT BE USED MOST

CO-OWNER'S DAYTIME PHONE # CO-OWNER'S HOME PHONE # PREVIOUS WATERCRAFT# BY STATE OF

I HEREBY CERTIFY THAT THE INFORMATION ON THIS FORM IS CORRECT TO THE BEST OF MY KNOWLEDGE, AND UNDERSTAND THAT ANY FALSIFICATION OF INFORMATION ON THIS FORM CONSTITUTES A CLASS 6 FELONY PURSUANT TO A.R.S §§ 13-2407 AND 13-2704

SIGNATURE OF OWNER _____ DATE _____

SIGNATURE OF CO-OWNER _____ DATE _____

REGISTRAR'S INITIAL AND DATE _____



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JOINT OWNERSHIP DESIGNATIONS

Pursuant to R12-4-502 (A) (11), application for registration of a watercraft with more than one owner must be indicated by one of the following methods, and the Department shall record and transfer registrations as prescribed:

- a. The use of "and/or" between the names of individuals shall require the signatures of both parties if both are living. Upon legal proof of the death of either party, the Department shall transfer registration upon the signature of the living party.
- b. The use of "and" between the names of individuals shall require the signatures of both parties. In the event of the death of either party the interest of the deceased party shall be handled through probate proceedings.
- c. The use of "or" between the names of individuals shall express to the Department the intent that either of the owners have full authority to transfer registration of the watercraft.

"OR" STATEMENT

Owners who have designated ownership as "OR" on page 1 (the reverse) of this application are asked to sign this statement.

The undersigned affirm that the watercraft described on the reverse of this form is not property held as tenants in common, and not as community property, but as joint tenants with the right of survivorship, and furthermore both of us empower and authorize each other as their attorney in fact to assign ownership of this watercraft by his or her signature alone, and therefore the watercraft may be transferred, sold or otherwise encumbered in the same manner as though all joint owners had acted and signed.

Signature

Signature

Towing Company Certification Statement For Transfer of Ownership

I hereby certify that as of the date of this application, the watercraft is in the possession of the towing company and no person has presented proof of ownership or proof of interest in the watercraft and entered into an agreement for the release or return of the watercraft. I understand that any falsification of information on this form constitutes a Class 6 Felony Pursuant to A.R.S. § 13-2407 and § 13-2704.

Signature of Authorized Towing Company Representative

CONTINUATION OF OWNERS

CO-OWNER'S NAME – LAST			FIRST	MI	DATE OF BIRTH		
					MO	DAY	YR
STREET ADDRESS OR P.O. BOX NUMBER							
CITY	STATE	ZIP	SIGNATURE				
CO-OWNER'S NAME – LAST			FIRST	MI	DATE OF BIRTH		
					MO	DAY	YR
STREET ADDRESS OR P.O. BOX NUMBER							
CITY	STATE	ZIP	SIGNATURE				
CO-OWNER'S NAME – LAST			FIRST	MI	DATE OF BIRTH		
					MO	DAY	YR
STREET ADDRESS OR P.O. BOX NUMBER							
CITY	STATE	ZIP	SIGNATURE				
CO-OWNER'S NAME – LAST			FIRST	MI	DATE OF BIRTH		
					MO	DAY	YR
STREET ADDRESS OR P.O. BOX NUMBER							
CITY	STATE	ZIP	SIGNATURE				