FOR OFFICE USE			MS Registration Number
Date Received:	Payment Type:	Payment Amount: \$	
Less than 16 feet\$10.2		SSIPPI MOTOR BOAT	CHECK ONE
16 to less than 26\$25.2	⁰ REGIST	RATION APPLICATION	 New Application
26 feet and over \$47.70	0		o Transfer
Dealer number\$40.2	0	H=CB`J5@48`:CF`H <f99`fl½™95fg< td=""><td> Renewal </td></f99`fl½™95fg<>	 Renewal
Duplicate\$7.70			 Duplicate
		Individual '5 dd`]W Uij cb'	
		I new and used boats purchased from an out- our local tax collector. A copy of a notar	

Other Pho Middle HAVE A HULL ERIAL NUMBER. Ied. Please call y	City D.L. State Last	Previous C	Date		Zip	Code f or Social Security #
Middle HAVE A HULL ERIAL NUMBER. ted. Please call y	City D.L. State Last	Previous C	State Owner Date	of Birth	Driver's License ‡	t or Social Security #
HAVE A HULL ERIAL NUMBER. ted. Please call y	D.L. State	*	Owner Date	of Birth	Driver's License ‡	t or Social Security #
HAVE A HULL ERIAL NUMBER. ted. Please call y	Last	*	Date			
HAVE A HULL ERIAL NUMBER. ted. Please call y	SIC					
ERIAL NUMBER. ted. Please call y			APPLICA	NT'S SIG	NATURE P	REQUIRED *
dditional informáti). #	ion.	By signi. Mississi	ing this applicat ippi, to the best	t of my knowledg	nder penalties pres ge and belief that I	Date cribed in the statutes of own the vessel described
oat Model	Mode		Feet	Inches		stration # on Boat
ease ial Fishing I Operation enger Carry	 PROPULSION Air Thrust Manual Propeller Sail Water Jet Other 	FUEL TYPE o Gasoline o Diesel o Electric o Other	 Open Cabin Auxilia Sail C Perso 	Motorboat Motorboat ary Sail Only nal Watercraft	 Paddlecraft Air Boat Pontoon Boot Inflatable Boot 	 Outboard Dat Pod Drive
	Deat Model DPERATION ease ial Fishing I Operation enger Carry Mfr Demo ishing	Deat Model Model DPERATION PROPULSION o Air Thrust o Manual ial Fishing o Propeller I Operation o Sail enger Carry o Water Jet Mfr Demo o Other ishing o Yes	Mississ Dat Model Model Mississ DPERATION PROPULSION FUEL TYP o Air Thrust o Gasoline o Air Thrust o Diesel o Manual o Diesel o Sail o Other Mfr Demo o Other ishing o Other water Fishing: Yes No	Mississippi, to the best herein and that the dest herein and that	Mississippi, to the best of my knowledge herein and that the description and all the description and the descriptic the description and the descriptic the description	Mississippi, to the best of my knowledge and belief that I herein and that the description and all matters stated herein and that the description and all matters at

Motor Serial Number	Manufacturer	Model Year	Horse Power	
				Trailer Serial Number
Motor Serial Number	Manufacturer	Model Year	Horse Power	
	ney order payable to MS Dept. of Wildlif	e, Fisheries, and Parks	• Boat Registration	on Div. • 1505 Eastover Drive • Jackson, MS 39211-6374
~	DETACH AND KEEP WIT	H VESSEL UNTIL (NUMBER IS RECEIVED
Name		Street Address		City
State	Zip Code	HIN or Serial N	umber	
Make of Boat	Propu	ulsion		Length of Boat
	I hereby certify on Valid for 60 days o	, tha f issue. Carry on boar	at I applied for cert ad when the vesse	ification of number for above described boat. el is being operated.
LINDER PENALT	V OF PERJURY THIS INFORMATION IS	TRUE AND CORRECT	-	

UNDER PENALTY OF PERJURY THIS INFORMATION IS TRUE AND CORRECT.

(OVER)

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.

All transfer and new boats are processed at MDWFP headquarters <u>ONLY</u>, address listed below.

Return Application with personal check, cashier's check, or money order with the appropriate fee to the address listed below.

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

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	Serial Number or 12 Digit Hull ID #		Present Registra	ation #	Feet	Inches	
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 Initial Buyer Signature Date Co-Seller Signature Initial Seller Signature Date Witness Signature Initial Seller Signature Date Witness Signature Initial SELLER(S) CERTIFY THAT STATEMENTS PROVIDED ON THE FRONT OF THIS APPLICATION FOR CERTIFIC/ 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. State State	Make of Boat Boat I		Boat Model	Model		Model Year	
Seller: (Print) Last Name First Name Initial Co-Seller: (Print) Last Name First Name Initial Seller's Street Address City State Zip Code Seller's Street Address City State Zip Code Seller's Street Address Date Co-Seller Signature Date Buyer Signature Date Witness Signature OF SELLER(S) CERTIFY THAT STATEMENTS PROVIDED ON THE FRONT OF THIS APPLICATION FOR CERTIFIC/OF REGISTRATION ARE TRUE AND ACCURATE TO THE BEST OF SELLER(S) KNOWLEDGE. STATE OF: COUNTY OF: STATE OF: COUNTY 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.	uyer: (Print)						
Co-Seller: (Print)		Last Name	F	irst Name		Initial	
Co-Seller: (Print)	eller: (Print)		F	int Name			
Last Name First Name Initial Seller's Street Address City State Zip Code Seller Signature Date Co-Seller Signature Initial Buyer Signature Date Co-Seller Signature Initial Seller Signature Date Co-Seller Signature Initial Seller Signature Date Co-Seller Signature Initial Buyer Signature Date Witness Signature Initial SELLER(S) CERTIFY THAT STATEMENTS PROVIDED ON THE FRONT OF THIS APPLICATION FOR CERTIFIC/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. State		Last Name	F	Irst Name		Initial	
Seller's Street Address City State Zip Code Seller Signature Date Co-Seller Signature Buyer Signature Date Witness Signature SELLER(S) CERTIFY THAT STATEMENTS PROVIDED ON THE FRONT OF THIS APPLICATION FOR CERTIFIC/ 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.	o-Seller: (Print)	Last Name	F	irst Name		loitial	
Seller Signature Date Co-Seller Signature Buyer Signature Date Witness Signature SELLER(S) CERTIFY THAT STATEMENTS PROVIDED ON THE FRONT OF THIS APPLICATION FOR CERTIFICA OF REGISTRATION ARE TRUE AND ACCURATE TO THE BEST OF SELLER(S) KNOWLEDGE. STATE OF:						inited.	
Seller Signature Date Co-Seller Signature Buyer Signature Date Witness Signature SELLER(S) CERTIFY THAT STATEMENTS PROVIDED ON THE FRONT OF THIS APPLICATION FOR CERTIFICA OF REGISTRATION ARE TRUE AND ACCURATE TO THE BEST OF SELLER(S) KNOWLEDGE. STATE OF:	Sollor's Str	aat Addraga	City			Zin Code	
Buyer Signature Date Witness Signature SELLER(S) CERTIFY THAT STATEMENTS PROVIDED ON THE FRONT OF THIS APPLICATION FOR CERTIFICA 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.	Seller's Street Address		Ony	City Stat			
SELLER(S) CERTIFY THAT STATEMENTS PROVIDED ON THE FRONT OF THIS APPLICATION FOR CERTIFICA 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.	Seller Signature		Date	Co-Seller Signature		Date	
SELLER(S) CERTIFY THAT STATEMENTS PROVIDED ON THE FRONT OF THIS APPLICATION FOR CERTIFICA 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.	Ruver Signature		Date			Date	
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.	Buyer	Signature	200	witness Si	gnature	Dute	
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.							
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.					()		
things and facts set forth are true and correct as therein stated.						 natters	
	The day por					nationo,	
SWORN TO AND SUBSCRIBED BEFORE ME, this the day of , 20	SWORN TO AND	SUBSCRIBED BEFC	ORE 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 Law Enforcement Officers. Make check or money order payable to the Mississippi Department of Wildlife, Fisheries, and Parks. Record your check or money order number here

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Internet Boater Education Course • www.mdwfp.com • \$15.00 (Online Fee) Free 6-Hour Classroom Courses/Contact MDWFP Region Offices;Classes Available April-September

Call 1-888-874-5785 to Subscribe to Mississippi Outdoors Magazine. (this number is for magazine subscription only)