



KENTUCKY TRANSPORTATION CABINET
 Department of Vehicle Regulation
 Frankfort, Kentucky 40622

TC 96-184
 Rev. 8/05

ORIGINAL - Transportation
 COPY - Clerk
 COPY - Buyer

**MOTOR BOAT TRANSACTION RECORD
 APPLICATION FOR TITLE / REGISTRATION**

KRS 186A states that:
 Any person who knowingly enters or attests to the entry
 of false or erroneous information upon this form will be
 subject to the penalties of forgery in the second degree.

PLEASE NOTE: The original of this form must be completed in blue or black ink.

SELLER SECTION

NAME OF SELLER OR TRANSFEROR _____

NAME OF CO-OWNER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____ COUNTY _____

OWNER-BUYER SECTION

DATE OF BIRTH _____

NAME OF OWNER OR BUYER _____ SSN. OR FED. I.D. _____

NAME OF CO-OWNER OR BUYER _____ SSN. OR FED. I.D. _____

STREET ADDRESS _____ PHONE NUMBER _____

CITY _____ STATE _____ ZIP _____ COUNTY _____

MOTORBOAT IDENTIFICATION SECTION (See reverse of copy for codes)

KY NO. _____ BOAT TYPE _____ HULL IDENTIFICATION _____

YEAR _____ MAKE _____ MODEL _____

LENGTH _____ BEAM _____ HULL MATERIAL _____ PROPULSION _____

FUEL _____ CAPACITY _____ USE _____

NO. TOILETS _____ TYPE _____ APPROVED _____

PURCHASE YEAR _____ PURCHASE AMOUNT _____

MOTOR MAKE _____ YEAR _____ H.P. _____ # MOTORS _____

MOTOR SERIAL NUMBER _____ PURCHASE YEAR _____ PURCHASE AMOUNT _____

CITIZENSHIP OF APPLICANT _____ SEX _____

DEALER NUMBER _____ COUNTY OF DOCKAGE _____

I have have not applied for a loan in connection with the motorboat described herein and if not, I will will not apply for a loan within 30 days of this application.

1st LIENHOLDER _____

ADDRESS _____

2nd LIENHOLDER _____

ADDRESS _____

I WARRANT THAT THE MOTORBOAT DESCRIBED ABOVE IS NOT SUBJECT TO AN UNTERMINATED LIEN AND THAT NO LOAN IN CONNECTION WITH THIS MOTOR BOAT HAS NOR WILL BE APPLIED FOR BY SELLER WITHIN 30 DAYS OF THIS APPLICATION. I HEREBY CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

I HEREBY APPLY FOR (REGISTRATION) _____ REGISTRATION AND/OR A CERTIFICATE OF TITLE. I CERTIFY THAT THE DESCRIBED MOTORBOAT WILL BE OPERATED CONSISTENT WITH THE CLASSIFICATION REQUESTED ABOVE, AND THE MARINE SANITATION DEVICE FOR THE TOILET IS PROPERLY OPERATING AND PROPERLY USED FOR THE WATER BODY WHERE THE MOTORBOAT IS KEPT OR OPERATED. I FURTHER CERTIFY UNDER THE PENALTY DESCRIBED ABOVE, THAT I HAVE SUPPLIED TRUE AND CORRECT INFORMATION TO THE BEST OF MY KNOWLEDGE AND BELIEF.

SELLER'S SIGNATURE _____ TITLE _____

OWNER BUYER SIGNATURE _____ TITLE _____

ATTESTING OFFICIAL _____ TITLE _____

ATTESTING OFFICIAL _____ TITLE _____

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____ 20 _____

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____ 20 _____

MY COMMISSION EXPIRES _____

MY COMMISSION EXPIRES _____

CLERK SECTION

TYPE APPLICATION	CONTROL NO.	DECAL #
CLERK'S ID	CLERK'S FEE	
REG. EXPIRES	DATE OF ISSUANCE	STATE FEE
DVR USE ONLY	RECEIPT	VERIFICATION
	VERIFICATION	

- HAS THE APPLICANT BEEN PREVIOUSLY LICENSED OR REGISTERED AS AN OWNER?
- IF SO, WHEN AND BY WHAT STATE OR COUNTY?
- HAS THE APPLICANT'S LICENSE REGISTRATION OR CERTIFICATE NUMBER BEEN CANCELLED, SUSPENDED, REVOKED, OR REFUSED?
- IF SO, GIVE DATE AND REASON.

CLERK SIGNATURE _____ DATE _____

