



Broker's/Agent's Vessel Transaction Report

I hereby certify that I was the broker/ agent in the below transaction. However, I only received a commission on this transaction and I did not collect the sales proceeds from the buyer. This report is being filed within 10 days of the date of sale.

Note: Not all areas below apply on all sales, but all applicable areas must be filled in.

1. Seller:

_____		_____	
Name		Mailing address	
_____		_____	
City	State	Zip	Telephone number

2. Buyer:

_____		_____	
Name		Mailing address	
_____		_____	
City	State	Zip	Telephone number

3. Description of property sold:

- a) HIN: _____
- b) Name of Vessel: _____
- c) Coast Guard Registration Number: _____

4. Amount for which the property sold: _____

5. Date of Sale: _____

_____	_____	_____
Printed Name	Date	Signature

Tax Registration No.

Please mail the completed form to:

**Washington State Department of Revenue
Compliance Division
PO Box 47473
Olympia WA 98504**

For assistance or to inquire about this document in an alternate format, please call 1-800-647-7706. Teletype (TTY) users may use the Washington Relay Service by calling 711.