

**Commercial Watercraft  
 Personal Property  
 Listing of Ships and Vessels**

➔Date Due:

Vessel Name:

Commercial Vessel Tax No.:

UBI No.:

**Note: If this vessel is registered with the Department of Licensing as a pleasure craft and the Watercraft Excise Tax has been paid, please return this listing along with a copy of your Certificate of Registration showing payment of that tax.**

**A CURRENT OWNER/PURCHASER** If partnership, attach list of all partners and spouses. If corporation, attach annual list of corporate officers and FEIN number. Provide attachments in the following format.

Owner's Name (last, first, middle): \_\_\_\_\_

Birthdate: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Is the name of the spouse to appear on the listing?  Yes  No

Home Phone: ( ) \_\_\_\_\_ Contact Message Phone: ( ) \_\_\_\_\_

**If listed under a business name:**

Business Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: ( ) \_\_\_\_\_ Fax No.: ( ) \_\_\_\_\_

**B. SELLER INFORMATION**

Seller's Name: \_\_\_\_\_ OID (Owner ID) No.: \_\_\_\_\_

Seller's Current Address: \_\_\_\_\_

Seller's Contact Phone: ( ) \_\_\_\_\_

**C PURCHASE PRICE DETAIL** (Attach a copy of the Purchase/Sale Agreement)

Date of Purchase: \_\_\_\_\_

Ship or Vessel Price..... \$ \_\_\_\_\_

Motor Price (if separate)..... \$ \_\_\_\_\_

Accessories Price (if separate)..... \$ \_\_\_\_\_

**Total Purchase Price** (exclude fees, licenses, and taxes)..... \$ \_\_\_\_\_

Date of Entry into Washington Waters for Commercial Purposes (month/day/year) \_\_\_\_\_

**D SHIP OR VESSEL**

Length: \_\_\_\_\_ Width: \_\_\_\_\_ Depth: \_\_\_\_\_

Make \_\_\_\_\_ Model: \_\_\_\_\_ Year Built: \_\_\_\_\_

**Hull Material (check one):**  Aluminum  Fiberglass  Steel  Wood  Other**Engine Type (check one):**  Single Diesel  Single Gas  Outboard Only Twin Diesel  Twin Gas  I/O Only Triple Diesel  Triple Gas

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Horsepower: \_\_\_\_\_

**Type of Use (check one):**1.  Commercial Fishing (a)  Trawler (b)  Purse Seiner (c)  Longliner  
(d)  Gillnet (e)  Crabber (f)  Other (specify) \_\_\_\_\_2.  Charter/Time Share (a)  Bareboat (b)  Skippered (c)  Powered (d)  Sail3.  Freight (a)  Barge, Covered (b)  Barge, Uncovered (c)  Other (specify) \_\_\_\_\_4.  Towing/Pushing (a)  Towboat (b)  Pushboat5.  Other (specify use): \_\_\_\_\_6.  Personal Pleasure (If checked, refer to note on front page)

Department of Licensing WN No.: \_\_\_\_\_

Federal Documentation No.: \_\_\_\_\_ Dept. of Fish/Wildlife Vessel Registration No.: \_\_\_\_\_

Hull Identification No.: \_\_\_\_\_ Port of Registry: \_\_\_\_\_

Name of Moorage Facility: \_\_\_\_\_ Dock/Slip No.: \_\_\_\_\_

Address of Facility: \_\_\_\_\_ County in Which Moored: \_\_\_\_\_

**E. SIGNATURE**

The undersigned hereby certifies that to the best of their knowledge the above information is true and correct.

Name (Print): \_\_\_\_\_ Date: \_\_\_\_\_

Name (Signature): \_\_\_\_\_

For tax assistance visit dor.wa.gov or call (360) 570-3265. To inquire about the availability of this document in an alternate format for the visually impaired, please call (360) 705-6715. Teletype (TTY) users may call 1-800-451-7985.