

## Form 27 0058

Department of Revenue Compliance Division PO Box 47473 Olympia, WA 98504

## **Broker's Agents Vessel Transaction Report**

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

1 Seller's information			
Name:		Phone:	
Address:			
City:	State:	Zip:	
2 Buyer's information			
Name:		Phone:	
Address:			
City:	State:	Zip:	
3 Description of property sold			
A. HIN:			
B. Name of vessel:			
C. Coast Guard registration number:			
<b>D.</b> Amount property sold for:			
E. Date of sale:			
			Continued

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## Broker's/Agents Vessel Transaction Report



## **4** Certification

I hereby certify that I was the broker/agent in the above 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.

Name:	
Signature:	
Date:	Account ID:

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