

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES  
 DIVISION OF MOTORIST SERVICES  
 SUBMIT THIS FORM TO YOUR LOCAL TAX COLLECTOR OFFICE  
[www.flhsmv.gov/offices/](http://www.flhsmv.gov/offices/)

**APPLICATION TO REGISTER NON-TITLED VESSELS**

- Out-of -State vessel registration
- Dealer vessel registration
- Documented vessel registration
- Government vessel
- Amphibious vessel registration

**OR**       **AND**  
**Note:** When joint ownership, please indicate if "or" or "and" is to be shown. If neither is checked, it will be issued with "and."

Owner's Name	Owner's Email Address	Date of Birth	Sex	Florida DL or FEID/Suffix Number	
Co-Owner's Name	Co-Owner's Email Address	Date of Birth	Sex	Florida DL or FEID/Suffix Number	
Owner's Mailing Address		City		State	Zip
Owner's Street Address in Florida (Mandatory)		City		State	Zip

(Insert applicable current registration number in the appropriate space)

FL NUMBER \_\_\_\_\_ DOCUMENTED NUMBER \_\_\_\_\_

OUT-OF-STATE NUMBER \_\_\_\_\_

(Manufacturer's Name)                      (Model Year)                      (Hull Length)                      (Hull Identification Number)

<b>Hull Material</b> <input type="checkbox"/> Wood <input type="checkbox"/> Aluminum <input type="checkbox"/> Steel <input type="checkbox"/> Fiberglass <input type="checkbox"/> Wood/Fiberglass <input type="checkbox"/> Other _____	<b>Propulsion</b> <input type="checkbox"/> Outboard <input type="checkbox"/> Inboard <input type="checkbox"/> Sail <input type="checkbox"/> Inboard/Outboard <input type="checkbox"/> Air Propelled <input type="checkbox"/> Other _____	<b>Fuel</b> <input type="checkbox"/> Gas <input type="checkbox"/> Diesel <input type="checkbox"/> Electric <input type="checkbox"/> Other	<b>Use</b> <input type="checkbox"/> Recreational (Pleasure) <input type="checkbox"/> Dealer/Manufacturer <input type="checkbox"/> Commercial Fish <input type="checkbox"/> Commercial Shrimp Reciprocal <input type="checkbox"/> Commercial Shrimp Non-Recip. <input type="checkbox"/> Commercial Oyster <input type="checkbox"/> Commercial Sponge <input type="checkbox"/> Commercial Charter <input type="checkbox"/> Commercial Stone Crab <input type="checkbox"/> Commercial Spiny Lobster <input type="checkbox"/> Commercial Live Bait <input type="checkbox"/> Commercial Mackerel <input type="checkbox"/> Hire (Livery) <input type="checkbox"/> Commercial Blue Crab <input type="checkbox"/> Commercial Other _____ <input type="checkbox"/> Government
<b>Vessel Type</b> <input type="checkbox"/> Airboat <input type="checkbox"/> Sailboat <input type="checkbox"/> Aux. Sailboat <input type="checkbox"/> Cabin Motorboat <input type="checkbox"/> Canoe <input type="checkbox"/> Houseboat <input type="checkbox"/> Inflatable <input type="checkbox"/> Open Motorboat <input type="checkbox"/> Pontoon <input type="checkbox"/> Personal Watercraft <input type="checkbox"/> Other _____			

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.**

Signature of Applicant (Owner) \_\_\_\_\_ Date \_\_\_\_\_ Signature of Applicant (Co-Owner) \_\_\_\_\_ Date \_\_\_\_\_

**NOTICE:** When this application is received by a state agency, the information contained herein becomes a public record subject to inspection under the provisions of Chapter 119, Florida Statutes.

Check your local phone book government pages or visit the following website for current mailing addresses: <http://www.flhsmv.gov/offices/>

## **IMPORTANT INFORMATION**

Applicants exempt from titling, pursuant to Section 328.01, F.S., should complete the reverse side of this form and provide the following applicable documentation and pay the appropriate taxes and fees.

### **OUT OF STATE REGISTRATION**

Applicant must provide a copy of the out-of-state registration which is in full force and effect.

### **DEALER REGISTRATION**

Applicant must provide a copy of current sales tax certificate of registration assigned by the Department of Revenue and a copy of current commercial or occupational business license, if such a license is required by the local government entity in which the manufacturer or dealer operates a vessel.

### **DOCUMENTED VESSEL**

Copy of Certificate of Documentation papers or proof that the documents are on file with the U.S. Coast Guard and sales tax, if applicable.

### **GOVERNMENT VESSEL**

Proof of ownership, i.e., manufacturers certificate of origin, court order, certificate of title signed by previous owner transferring ownership to the agency.

### **AMPHIBIOUS VESSEL**

Copy of the vehicle certificate of title issued by the department.

### **DEFINITION OF RESIDENT AND ALIEN:**

A "Resident" is any citizen of the United States who has established residence in this state and has continuously resided in this state for one year and in one county for the six months immediately preceding the initiation of a vessel titling or registration action.

An "Alien" is a person who is not a citizen of the United States, although such a person may reside in Florida.

### **SIGNATURE REQUIREMENT FOR CO-OWNERS AND FIRMS**

All persons claiming an interest in the vessel being registered are required to sign the application for registration.

### **ELECTION CAMPAIGN FINANCING TRUST FUND**

Florida law allows for a voluntary contribution of \$5 per taxpayer for the purpose of providing for public financing of political campaigns for the offices of Governor and member of the Cabinet.