



Kentucky Transportation Cabinet
Division of Motor Vehicle Licensing

Motor Boat Transaction Record/Application for Registration and/or Title

Check the type of application desired. Duplicate Title Only Transfer First Time Salvage Update
 If Duplicate is checked, the original Certificate of Title is: Lost Destroyed Damaged Illegible Other

BOAT IDENTIFICATION SECTION				BOAT OWNER /BUYER SECTION	
YYY	PNYUSDH0F910			08/01/1960	
KY #	BOAT TYPE	HULL IDENTIFICATION		DATE OF BIRTH	
2010	STINGRAY	180RX		US	FEMALE
YEAR	MAKE	MODEL	OB	CITIZENSHIP OF APPLICANT	SEX
18	6.5	PL	OB	FAYETTE	
LENGTH	BEAM	HULL MATERIAL	PROPULSION	COUNTY OF DOCKAGE	
G	6		PL	I HEREBY APPLY FOR REGISTRATION AND/OR A CERTIFICATE OF TITLE. I CERTIFY THAT THE DESCRIBED MOTORBOAT WILL BE OPERATED CONSISTENT WITH THE CLASSIFICATION REQUESTED HEREIN, 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 HEREIN, THAT I HAVE SUPPLIED TRUE AND CORRECT INFORMATION TO THE BEST OF MY KNOWLEDGE AND BELIEF.	
FUEL TYPE	CAPACITY	USE		*HAS THE APPLICANT BEEN PREVIOUSLY LICENSED OR REGISTERED AS AN OWNER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
0				*IF YES, WHEN AND BY WHAT STATE OR COUNTY?	
# TOILETS	TOILET TYPE	APPROVED	HORSEPOWER	* HAS THE APPLICANTS LICENSE REGISTRATION OR CERTIFICATE NUMBER BEEN CANCELLED, SUSPENDED, REVOKED, OR REFUSED? <input type="checkbox"/> YES <input type="checkbox"/> NO	
\$12000.00		2010		*IF YES, GIVE DATE AND REASON. <input type="text"/>	
PURCHASE PRICE	PURCHASE DATE				
MERCURY	2010	135	1		
MOTOR MAKE	YEAR	H.P	# MOTORS		
L379503					
MOTOR SERIAL #	YEAR PURCHASED	PURCHASE AMOUNT			

MOTOR BOAT BRAND DISCLOSURE: Check appropriate block if applicable: Rebuilt Salvage Hail Damage

KRS 235.990 Any person who violates any of the provisions of this chapter or administrative regulations adopted under this chapter shall be fined not less than fifty dollars (\$50) nor more than two hundred dollars (\$200).

JOINT OWNERSHIP: OR AND (NOTE: If neither box is checked, the transfer shall require both signatures.)

FUN IN THE SUN BOAT SALES

NAME OF SELLER(S) _____ SELLER DEALER # _____

123 LAKESHORE DR

STREET ADDRESS _____

CINCINNATI OH 45231

CITY COUNTY STATE ZIP _____

FUNSUNBOATS@EMAIL.COM (000) 000-0000

EMAIL ADDRESS PHONE # _____

JANE DOE 000-00-000

NAME OF OWNER/BUYER(S) _____ SSN/Federal ID # _____

NAME OF OWNER/BUYER(S) _____ SSN/Federal ID # _____

123 MAIN STREET

ADDRESS _____

LEXINGTON FAYETTE KY 40507

CITY COUNTY STATE ZIP _____

JANE.DOE@EMAIL.COM (000)000-0000

EMAIL ADDRESS PHONE NUMBER _____

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

I WARRANT THAT THE MOTORBOAT DESCRIBED ABOVE IS NOT SUBJECT TO AN UNTERMINATED LIEN AND THAT NO LOAN IN CONNECTION WITH THIS MOTORBOAT HAS NOR WILL BE APPLIED FOR BY SELLER WITHIN 30 DAYS OF THIS APPLICATION.

STATE NATIONAL BANK

FIRST LIENHOLDER _____

501 W MAIN ST FRANKFORT, KY 40601

ADDRESS _____

FAYETTE

COUNTY WHERE LIEN WILL BE FILED _____

Jane Doe

OWNER/BUYER(S) SIGNATURE(S) _____

OWNER/BUYER(S) SIGNATURE(S) _____

John B Public notary

Attesting Official Signature Title _____

Subscribed an affirmed before me this 01 day of 09 20 10

My commission expires 12-31-211

SELLER'S SIGNATURE _____

SELLER'S SIGNATURE _____ Date of Transfer _____

Attesting Official signature _____ Title _____

Subscribed and affirmed before me ng before me this _____ day of _____ 20 _____

My commission expires _____

COUNTY CLERK USE ONLY

TYPE APPLICATION	DATE OF ISSUANCE	TITLE #	DECAL #.

SIGNATURE & TITLE OF ISSUER _____ Clerk Fee _____ State fee _____ COUNTY _____ DATE _____

I certify that the lien indicated to be filed has been noted into the automated system and that a title will be withheld for 30 days, or until financing statement and fees required are received, whichever occurs first.

Signature _____ Date _____

DO NOT ACCEPT TITLE SHOWING ANY ERASURES, ALTERATION, OR MUTILATIONS. SHALL BE COMPLETED IN BLUE OR BLACK INK.

BOAT TYPE

Airboat	AIR
Commercial	COM
Cruiser	CRU
Houseboat	HSE
Hovercraft	HOV
Hydrofoil	HYD
Hydroplane	HRO
Runabout	RUN
Pontoon	PON
Sailboat	SAL
Utility	UTL
Yacht	YAT
All Others	YYY

HULL MATERIAL

Wooden	WD
Fiberglass	PL
Steel	ST
Aluminum	AL
Other	OT

FUEL TYPE

Gas	G
Diesel	D
Other	O

PROPULSION

Outboard	OB
Inboard	IB
Inboard /Outboard	IO
Sail w /Inboard	SI
Sail w/Outboard	SO
Water Jet	WJ
Electric Trolling	ET

TYPE OF TOILETS

Type	Type	Code
Type 1	Chemical	C
Type 2	Incinerators	I
Type 3	Holding Tank	T

PRIMARY USE

Pleasure	PL
Rent or Lease	RL
Demonstration	DM
Commercial	CM
Government Agency	GA

COUNTY OF RESIDENCE / COUNTY OF DOCKAGE

4 position alpha code

CITIZENSHIP

United States	US
Canadian	CA
Foreign	FR