



Arizona Game and Fish Department
5000 W Carefree Highway • Phoenix, AZ 85086
(602) 942-3000 • www.azgfd.gov

FOR DEPARTMENT USE ONLY

TRAN CODE _____

AZ NO. _____

JS Code: _____

Registrars Initials and Date

APPLICATION FOR ARIZONA WATERCRAFT CERTIFICATE OF NUMBER

* WILL THE WATERCRAFT BE OPERATED MOST IN:
ARIZONA- YES NO / MEXICO- YES NO

PRIMARY OWNER'S EMAIL:

| | | | | | | | | | | | | | | | |
|---|--|--|-------|-------------------|--|------|--|-----------------------|--------------------------|--------|-----------|-----|--|----|--|
| PRIMARY OWNER'S NAME: LAST | | | FIRST | | | MI | | | DATE OF BIRTH (MO-DY-YR) | | | | | | |
| MAILING ADDRESS: STREET/ PO BOX | | | | | | CITY | | | ST | | ZIP | | | | |
| JOINT OWNERSHIP: IF WATERCRAFT IS OWNED BY MORE THAN ONE PERSON, SEE PAGE 2 BEFORE CIRCLING | | | | | | | | | | AND/OR | | AND | | OR | |
| CO-OWNER'S NAME: LAST | | | FIRST | | | MI | | | DATE OF BIRTH (MO-DY-YR) | | | | | | |
| MAILING ADDRESS IF DIFFERENT THAN ABOVE: | | | | | | | | TAX ID NO. | | | | | | | |
| PRIMARY OWNER'S PHONE: | | | | CO-OWNER'S PHONE: | | | | PREVIOUS WATERCRAFT # | | | BY ST OF: | | | | |

PRIMARY OPERATION

BOAT TYPE

PROPULSION TYPE

- | | | | | |
|------------------------------|-----------------------------|------------------------|----------------------------|-------------------|
| RP ___ Resident Pleasure | CO ___ Commercial Other | OM ___ Open Motorboat | PB ___ Pontoon Boat | AT ___ Air Thrust |
| NP ___ Non-Resident Pleasure | CF ___ Commercial Fishing | AB ___ Air Boat | AS ___ Auxiliary Sail | PR ___ Propeller |
| LI ___ Rent/Livery | CP ___ Commercial Passenger | CM ___ Cabin Motorboat | IN ___ Inflatable | WJ ___ Water Jet |
| LE ___ Lease | DL ___ Dealer/Manu Demo | HB ___ Houseboat | PW ___ Personal Watercraft | OT ___ Other |
| CH ___ Charter Fishing | GO ___ Government | OT ___ Other | | |

| | | | | | | | | | | | | | | | | | | |
|--------------------------|-----|--|--|--|-----|----------------|--|--|-------------------------|--|--|--|--|--|--|--|--|--|
| Length | FT. | | | | IN. | | | | Manufacturer and Model: | | | | | | | | | |
| Year built or model year | | | | | | Hull ID Number | | | | | | | | | | | | |

ENGINE DRIVE TYPE

HULL MATERIAL

FUEL

- | | | | |
|--------------------|----------------------------|-----------------|-----------------|
| IN ___ Inboard | WD ___ Wood | PL ___ Plastic | GA ___ Gasoline |
| OU ___ Outboard | FI ___ Fiberglass | AL ___ Aluminum | DI ___ Diesel |
| PD ___ Pod Drive | ST ___ Steel | OT ___ Other | EL ___ Electric |
| SD ___ Stern Drive | RV ___ Rubber/Vinyl/Canvas | | OT ___ Other |
| OT ___ Other | | | |

REGISTRATION FEE _____ NON-RESIDENT INFRASTRUCTURE FEE _____ TRANSFER FEE _____ TOTAL _____

I HEREBY CERTIFY THAT THE INFORMATION ON THIS FORM IS CORRECT TO THE BEST OF MY KNOWLEDGE, AND UNDERSTAND THAT ANY FALSIFICATION OF INFORMATION ON THIS FORM CONSTITUTES A CLASS 6 FELONY PURSUANT TO A.R.S. 13-2407 AND 2704. I CERTIFY THAT THE RESIDENT INFORMATION PROVIDED IS TRUE AND CORRECT PER ARS 5-301 (See back for definition)

SIGNATURE OF PRIMARY OWNER (REQUIRED)

DATE

SIGNATURE OF CO-OWNER (REQUIRED)

DATE



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JOINT OWNERSHIP DESIGNATION

Pursuant to R12-4-502 (B) (14), applicant for registration of a watercraft with more than one owner must be indicated by one of the following methods, and the Department shall record and transfer registrations as prescribed:

a. The use of "and/or" between the names of the individuals shall require the signatures of both parties if both are living. Upon legal proof of the death of either party, the Department shall transfer registration upon the signature of the living party.

b. The use of "and" between the names of individuals shall require the signatures of both parties. In the event of the death of either party the interest of the deceased party shall be handled through appropriate legal proceedings.

c. The use of "or" between the names of individuals shall express to the Department the intent that either of the owners signatures is sufficient for transfer.

RESIDENCY DEFINITIONS A.R.S. § 5-301

"Resident" means a person who is either:

1. A member of the armed forces of the United States on active duty and stationed in this state for a period of thirty days immediately before the date of application for a watercraft decal.

2. A member of the armed forces of the United States on active duty and stationed in another state or another country and who lists this state as that member's home of record at the time of an

application for a watercraft decal.

3. Domiciled in this state for at least six consecutive months immediately before the date of the application for a watercraft decal and who does not claim residency for any purpose in any other state or country.

"Domicile" means a person's true, fixed and permanent home and principal residence, proof of which may be demonstrated as prescribed by rules adopted by the commission.

TOWING COMPANY CERTIFICATION STATEMENT FOR TRANSFER OF OWNERSHIP

I hereby certify that as of the date of this application, the watercraft is in the possession of the towing company and no person has presented proof of ownership of interest on the watercraft and entered into an agreement for the release or return of the watercraft. I understand that any falsification of information on this form constitutes a Class 6 felony pursuant to A.R. S. § 13-2407 and § 13-2704

SIGNATURE OF AUTHORIZED TOWING COMPANY REPRESENTATIVE

CONTINUATION OF OWNERS

| | | | | | | |
|---|-------|------|--------------------------|-----|--|--|
| CO-OWNER'S NAME: LAST | FIRST | MI | Date of Birth (MO-DY-YR) | | | |
| MAILING ADDRESS: STREET ADDRESS, PO BOX OR BOX NUMBER | | CITY | STATE | ZIP | | |
| SIGNATURE: | | | | | | |
| CO-OWNER'S NAME: LAST | FIRST | MI | Date of Birth (MO-DY-YR) | | | |
| MAILING ADDRESS: STREET ADDRESS, PO BOX OR BOX NUMBER | | CITY | STATE | ZIP | | |
| SIGNATURE: | | | | | | |
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| MAILING ADDRESS: STREET ADDRESS, PO BOX OR BOX NUMBER | | CITY | STATE | ZIP | | |
| SIGNATURE: | | | | | | |