

# Instructions for Applying for a BOT BOAT TITLE and/or BOAT Registration

USE BLUE OR BLACK INK. PLEASE TYPE OR CLEARLY PRINT ALL INFORMATION.

|           |                                      |                                                                                                                                                                                                                                                                                     |
|-----------|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Section A | Type of Application                  | Check the block for the type of application you want to file.                                                                                                                                                                                                                       |
| Section B | Owner Information/<br>Tenancy Rights | Name(s) of person(s) or company name applying for registration and/or title. Include all co-owners. When applying for title with a co-owner other than a spouse, indicate the survivorship rights to the vessel. If no block is checked, title will be issued as Tenants in Common. |
| Section C | Vessel Data                          | Provide a complete description of the vessel for which you are registering and/or obtaining title. Any missing data could delay application processing.                                                                                                                             |

Section C - Vessel Data: Enter the appropriate vessel code numbers below on the application.

| Vessel Type         | Code # | Hull Material       | Code # | Engine Drive | Code # | Fuel Type  | Code # | Use                               | Code # |
|---------------------|--------|---------------------|--------|--------------|--------|------------|--------|-----------------------------------|--------|
| Other               | 0      | Fiberglass          | 1      | Outboard     | 1      | Gas        | 1      | Pleasure                          | 1      |
| Open Motorboat      | 1      | Aluminum            | 2      | Inboard      | 2      | Diesel     | 2      | Commercial Passenger <sup>1</sup> | 2      |
| Cabin Motorboat     | 2      | Steel               | 3      | Stern Drive  | 3      | Electric   | 3      | Rental                            | 3      |
| Row Boat            | 3      | Wood                | 4      | Unpowered    | 4      | Unpowered  | 4      | Charter Fishing                   | 4      |
| Pontoon Boat        | 4      | Rubber/Vinyl/Canvas | 5      | Pod Drive    | 5      | Other      | 5      | Dealer                            | 5      |
| Sail Only           | 5      | Other               | 6      | Other        | 6      | Prop Type  | Code # | Shuttle Services                  | 6      |
| Auxiliary Sail      | 6      | Plastic             | 7      |              |        | Propeller  | 1      | Tax-Exempt Organization           | 7      |
| Paddlecraft         | 7      |                     |        |              |        | Waterjet   | 2      | Commercial Fishing                | 8      |
| Inflatable Boat     | 8      |                     |        |              |        | Air Thrust | 3      | State-Owned                       | 9      |
| Personal Watercraft | 9      |                     |        |              |        | Manual     | 4      | Documented Vessel                 | 10     |
| Airboat             | 10     |                     |        |              |        | Sail       | 5      | Rescue Unit                       | 13     |
| Houseboat           | 11     |                     |        |              |        | Other      | 6      | Amphibious Craft                  | 14     |

|           |                                   |                                                                                                                                                                                                                                                                                                                                    |
|-----------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Section D | Outboard Motor Data               | Complete this section only if your lien holder requires outboard motor data on the title.                                                                                                                                                                                                                                          |
| Section E | Lien Information                  | If there is a lien against the vessel, you must complete this section. Title will be sent to the lien holder.                                                                                                                                                                                                                      |
| Section F | Seller Information                | Name of person or business selling the vessel.                                                                                                                                                                                                                                                                                     |
| Section G | Agent Information                 | To be completed only by an authorized issuing agent of the Bureau of Tourism.                                                                                                                                                                                                                                                      |
| Section H | Fees and Registration Information | Enter complete purchase information and fees for registration and/or titling. Purchase price of vessel includes vessel, motor(s), accessories, dealer preparation charges and destination or freight charges. Do not include price of trailer in purchase price of vessel.<br><br>Make check payable to <b>Bureau of Tourism</b> . |
| Section I | FIAC license Number               |                                                                                                                                                                                                                                                                                                                                    |
| Section J | Signatures                        | All parties involved in the purchase and/or sale of the vessel must sign the form. Failure to obtain necessary signatures will delay application processing.                                                                                                                                                                       |



# Application for a BOT BOAT TITLE and/or BOAT Registration

BOT Registration N

Mail or Deliver To:

Bureau of Tourism  
Division of Compliance  
Po Box 100  
1st Floor East Wing, BMR Building  
Koror, PW 96940

**A Please check proper block:** ☐ Registration & Title ☐ Registration Only ☐ Title Only  
☐ Registration Update

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                  |                                  |                                             |                      |                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|----------------------------------|---------------------------------------------|----------------------|-------------------|
| <b>B</b><br><b>BUYER(S)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Buyer's Last Name/Company Name                                                                                                                                                                                                                                                                                                                                                                                                                |                                  | First Name                       |                                             | M.I.                 |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                               |                                  |                                  |                                             |                      |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | City                                                                                                                                                                                                                                                                                                                                                                                                                                          | State                            | ZIP Code                         | County #                                    | Buyer's Phone Number |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Buyer's Email Address                                                                                                                                                                                                                                                                                                                                                                                                                         |                                  |                                  | Buyer's Driver's License Number/Company EIN |                      |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Co-Buyer Last Name                                                                                                                                                                                                                                                                                                                                                                                                                            |                                  | First Name                       |                                             | M.I.                 |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                               |                                  |                                  |                                             |                      |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | City                                                                                                                                                                                                                                                                                                                                                                                                                                          | State                            | ZIP Code                         | Co-Buyer's Phone Number                     |                      |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Co-Buyer's Email Address                                                                                                                                                                                                                                                                                                                                                                                                                      |                                  |                                  | Co-Buyer's Driver's License Number          |                      |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <p>When applying for title with a co-owner other than your spouse, check one of the blocks below. If no block is checked, title will be issued as "Tenants in Common."</p> <p>A. <input type="checkbox"/> Joint Tenants with Right of Survivorship (on death of one owner, title goes to the surviving owner).</p> <p>B. <input type="checkbox"/> Tenants in Common (on death of one owner, interest goes to his or her heirs or estate).</p> |                                  |                                  |                                             |                      |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>C</b><br><b>BOAT DATA</b>                                                                                                                                                                                                                                                                                                                                                                                                                  | Hull Identification Number (HIN) |                                  | Make of Boat                                |                      | Model Name/Number |
| Year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                               | Ft.                              | In.                              | Boat Length                                 | Type                 | Hull Material     |
| Engine Drive                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                               | Fuel                             | Prop                             | Use                                         |                      |                   |
| <b>D</b><br><b>MOTOR DATA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Outboard Motor #1                                                                                                                                                                                                                                                                                                                                                                                                                             |                                  | Outboard Motor Serial Number     |                                             | Manufacturer         |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Outboard Motor #2                                                                                                                                                                                                                                                                                                                                                                                                                             |                                  | Outboard Motor Serial Number     |                                             | Manufacturer         |                   |
| <b>E</b><br><b>LIEN</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> YES <input type="checkbox"/> NO                                                                                                                                                                                                                                                                                                                                                                                      |                                  |                                  |                                             |                      |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Name of Lien Holder                                                                                                                                                                                                                                                                                                                                                                                                                           |                                  |                                  |                                             |                      |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                               |                                  |                                  |                                             | Date of Lien         |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | City                                                                                                                                                                                                                                                                                                                                                                                                                                          | State                            | ZIP Code                         | Phone Number                                |                      |                   |
| <b>F</b><br><b>SELLER</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> Registered or Titled Owner <input type="checkbox"/> Seller who is NOT the Registered or Titled Owner <input type="checkbox"/> Boat Dealer                                                                                                                                                                                                                                                                            |                                  |                                  |                                             |                      |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Last Name                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                  | First Name                       |                                             | M.I.                 |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                               |                                  |                                  |                                             | Date of Birth        |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | City                                                                                                                                                                                                                                                                                                                                                                                                                                          | State                            | ZIP Code                         | Phone Number                                |                      |                   |
| <b>G</b><br><b>AGENT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Temporary Expires (mm/dd/yy)                                                                                                                                                                                                                                                                                                                                                                                                                  |                                  | Issuing Agent Number             |                                             | Name of Agency       |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <p><b>J</b> I/We certify under penalty of law the statements made herein are true and correct to the best of my/our knowledge, information and belief.</p>                                                                                                                                                                                                                                                                                    |                                  |                                  |                                             |                      |                   |
| Signature of Buyer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                  | Signature of Seller/Owner/Dealer |                                             |                      |                   |
| Signature of Co-Buyer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                  | Signature of Co-Owner            |                                             |                      |                   |
| Date:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                  | Date:                            |                                             |                      |                   |
| <p><b>H</b></p> <p>Date of Purchase / /</p> <p>Line 1 \$ Purchase Price</p> <p>Line 2 \$ Discounted/Collateral Value</p> <p>Line 3 \$ Total Value = Line 1 + Line 2</p> <p>Discounted or Collateral Value is the amount of discount given, or the value of the collateral used to secure the asset.</p> <p>Line 5 \$ Marine and Transportation Safety Registration Fee</p> <p>State Registration Fee</p> <p>Line 11 \$ Grand Total - Add Lines 4 &amp; 5</p> <p>Applicant FIAC Number</p> <p>Date of Issuance:</p> <p>Was this boat ever registered or titled in PW? YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Current Boat Registration or Title Number</p> <p>Official Use Only</p> |                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                  |                                  |                                             |                      |                   |



# INFORMATION ON FEES AND REGISTRATION

1. Bureau of Marine Transportation and Safety
2. State Registration Fee

## Proof of Ownership: Types allowed

1. Bill of Sale
2. Certificate of Title
3. Transfer of Ownership

### REGISTRATION & TITLE FEES:

Make check payable to: Bureau of Tourism

#### 2 YEAR REGISTRATION FEES:

|                                       |    |
|---------------------------------------|----|
| Boats less than 16-feet:              | \$ |
| Boats 16-feet, but less than 20-feet: | \$ |
| Boats 20-feet and larger :            | \$ |
| Unpowered Boats (no motor ):          | \$ |
| Commercial Passenger :                | \$ |
| Duplicate Registration Certificate:   |    |

|           |    |
|-----------|----|
| Title Fee | \$ |
|-----------|----|

|                 |    |
|-----------------|----|
| Lien Filing Fee | \$ |
|-----------------|----|

Mail or Deliver the completed application to:  
**Bureau of Tourism**  
**DIVISION OF COMPLIANCE**  
**PO BOX 100**  
**1st Floor East Wing, BMR Buildnig**  
**Koror, PW 96940**