

Department of Infrastructure Rheyyn Bun-troggalys



Application to register or change the registration details of a pleasure craft

Please complete in BLOCK CAPITALS and in black ink.									
<u>Please note</u> : No chan full. Photo ID (e.g. Pas of sale are required for	sport or I	Driving Licence), p	proof of address (e.g. utility bill/state	ement) and pro	of of purchase/bill			
Send completed form		Harbours Division Department of In		Custom	er No. SA				
		Sea Terminal Buil		Registra	ation No.				
		Douglas IM1 2RF		SSR No.	(if applicable)				
Details of Vessel (ple	ease indic	cate which details	are being entered	d)					
New craft details		Chan	ge to existing c	raft details	Ot	her			
Vessel name									
Overall length		m	Overall breadth	m	Dr	raught m			
Category: (tick box)	Sailing	yacht N	Motor Launch	Motor Sailor		Dinghy			
	:	Jet Ski	RIB	Multi Hu		Other			
Class type (if any)									
Hull colour		Cabin	colour		Horsepower				
Construction: (tick box)		GRP	Wood	Ste	el	Aluminium			
	F	Rubber	Other						
Vessel location: (tick b	oox)	In Harbour	Harbour:						
	Other e	.g. Boat Park	Location:						
			Launched I	by Slipway (if not k	ept in harbour)): Yes / No			
Details of NEW owner	er								
Mr/Mrs/Miss/Ms etc.		Surname	e						
First name (s)									
Address									
	Postcode								
Telephone numbers	Home		Work		Mobile				
Email address									
				pose of registering your re craft. Our Privacy No					

store and handle your personal data, as well as your rights. If you would like to find out more please visit our website at https:// www.gov.im/about-the-government/departments/infrastructure/data-protection/ or contact our Data Protection Officer on 686785 for a paper copy.

Putting the Customer First

Continued overleaf

Details of Joint	t owne	er									
Mr/Mrs/Miss/Ms/	etc.		Surname								
First name (s)											
Address											
						Postcode					
Telephone numb	ers	Home		Work		Mobil	e				
Email address											
Details of chan	Details of change of address										
Mr/Mrs/Miss/Ms/	etc.		Surname								
First name (s)											
Address											
		Postcode									
Telephone numb	ers	Home		Work		Mobil	e				
Email address											
Details of prev	ious o	wner									
Mr/Mrs/Miss/Ms/	etc.		Surname								
First name (s)											
Address											
						Postcode					
Telephone numbers Home		Home		Work	Mobile						
Email address											
Declaration											
I hereby certify that the information I have given on this form is true to the best of my knowledge and belief. I confirm that I will inform the Harbours Division of any change to the details I have provided on this form.											
Signature			, 3		•	Date	/ /				
					New / Existing / Previous / Joint Owner						
Print name						Other (please state)					
			have given on this for of any change to t				e and belief. I confirm				
Signature						Date	/ /				
Print name				Joint Owner							
For Harbours Division use											
Date received		Photo ID	Proof of Address	Manx Resident		Proof of purchase	Outstanding Fees				
Decimal		t / Driving Licence	Utility / Statement/ Letter	Y / N		Y / N	Y / N				
Received by	ceived by Date processed		Registration/amendment fees charged Y/N	Date RPC13 issued		Valid Insurance Certificate attached/sighted Y / N					
	l		Y/N		I \	r / IN					