

APPLICATION FOR DUPLICATE CERTIFICATE OF BOAT REGISTRATION

VESSEL DETAILS

REGISTRATION NO

MAKE

LENGTH

COLOUR

HULL CONSTRUCTION:

GRP / TIMBER / ALUMINIUM / INFLATABLE / OTHER

Please circle

DETAILS OF OWNER

FULL NAME(S)

STREET ADDRESS

POSTAL ADDRESS

DATE OF BIRTH

HOME

MOBILE

EMAIL

CURRENT IDENTIFICATION ATTACHED

YES

please circle

I solemnly and sincerely declare this information to be true and correct

SIGNED BY REGISTERED OWNER(S)

Before me,

NAME

SIGNATURE

(An authorised officer of Service Tasmania or MAST)

**This form is to be lodged at Service Tasmania with evidence of identity,
together with payment of the applicable fee**

The personal information that we collect from you will only be used for the purpose for which it is provided and access to it will be given only to those whose function it is to deal with it or who are otherwise entitled by law to receive it. Failure to provide this information may result in your application not being able to be processed or the service not being able to be provided. Personal information may be accessed by you on request to MAST

Level 1, Port Tower Building, 18 Hunter Street, Hobart, Tasmania 7000

GPO Box 607, Hobart, Tasmania 7001

Telephone: (03) 6235 8888 Facsimile: (03) 6233 5662

www.mast.tas.gov.au