



**Kentucky Transportation Cabinet
Division of Motor Vehicle Licensing
Motor Boat Transaction Record/Application for Registration and/or Title**

TC 96-184
Rev: 6/2019
Page 1 of 2

KRS 186A.990 states: Any person who knowingly enters or attests to the entry of false or erroneous information upon this form will be subject to the penalties of forgery in the second degree. KRS 236.990 states: 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).

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

PLEASE NOTE: THE ORIGINAL OF THIS FORM MUST BE COMPLETED IN BLUE OR BLACK INK.

Section 1: VESSEL IDENTIFICATION SECTION (See Reference Page for field values)

Previous Title Number	State	KY #	Hull Identification (HIN)	Year	Make	Model
Primary Operation (Boat Use)	Vessel Type	HULL Material	Engine Drive	Propulsion	County of Dockage	
Fuel	Length (feet, inches)	Beam (feet, inches)	Capacity or Weight Capacity	# of Toilets	Toilet Type	

Section 2: VESSEL ENGINE/MOTOR

Motor 1 Make	Year	Horse Power	Motor Serial #	Year Purchased	Purchase Amount
Motor 2 Make	Year	Horse Power	Motor Serial #	Year Purchased	Purchase Amount

Section 3: VESSEL BRAND DISCLOSURE Rebuilt Salvage Hull Damage Water Damage Un-rebuildable

Section 4: VESSEL LIEN INFORMATION

I have I have not applied for a loan in connection with the motorboat described herein and if not I will I will not apply for a loan within 30 days of this application.
I warrant that the motorboat described above is not subject to an un-terminated lien and that no loan in connection with this motorboat has nor will be applied for by seller within 30 days of this application.

First Lienholder	Lien County	Second Lienholder	Lien County:
Address		Address	
City	State	Zip	Phone #
City	State	Zip	Phone #

Section 5: VESSEL TRANSFEROR/SELLER SECTION

Name of Transferor/Seller _____ Dealer Number _____

Name of Second Transferor/Seller _____

Mailing Address _____

Home Address (if different from above) _____

City _____ County _____ State _____ Zip _____

Email address _____ Phone # (with area code) _____

Vessel Sale Price _____

Transferor/Seller's Signature _____

Transferor/Seller Signature _____

Subscribed and attested before me on this date _____, My commission expires _____.

Attesting Official/Notary Signature/Title _____

VESSEL TRANSFEREE/OWNER/BUYER SECTION

Name of Transferee/Owner/Buyer _____ DL/SSN/FED ID# _____

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

Name of Second Transferee/Owner/Buyer _____ DL/SSN/FED ID# _____

Mailing Address _____

Home Address (if different from above) _____

City _____ County _____ State _____ Zip _____

Citizenship of Primary Applicant _____ Sex _____ Date of Birth _____

Email address _____ Phone # (with area code) _____

Transferee/Owner/Buyer Signature _____

Transferee/Owner/Buyer Signature _____

Subscribed and attested before me on this date _____, My commission expires _____.

Attesting Official/Notary Signature/Title _____

Section 6: County Clerks Use Only

Type of Application	Date of Issuance	Title #	Clerk Signatures/County	Date
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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.

Clerk Signature: _____ **County:** _____ **Date:** _____
DO NOT ACCEPT TITLE OR APPLICATION SHOWING ANY ERASURES, ALTERATION, OR MUTILATIONS.



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Page 2 of 2

REFERENCE PAGE

Primary Operation	<input type="checkbox"/> Pleasure	<input type="checkbox"/> Rent or Lease	<input type="checkbox"/> Charter Fishing
	<input type="checkbox"/> Commercial Fishing	<input type="checkbox"/> Commercial Passenger	<input type="checkbox"/> Other Commercial Use
	<input type="checkbox"/> Government Agency	<input type="checkbox"/> Dealer or Manufacturer Demonstration	
Vessel Information	<input type="checkbox"/> Make and Model	<input type="checkbox"/> Model Year	<input type="checkbox"/> Overall Length
	<input type="checkbox"/> HULL identification Number (HIN)		
Vessel Type	<input type="checkbox"/> Air Boat	<input type="checkbox"/> Auxiliary Sail	<input type="checkbox"/> Cabin Motorboat
	<input type="checkbox"/> Houseboat	<input type="checkbox"/> Inflatable Boat w/ motor	<input type="checkbox"/> Open Motorboat
	<input type="checkbox"/> Personal Watercraft	<input type="checkbox"/> Pontoon Boat	<input type="checkbox"/> Other-Commercial
	<input type="checkbox"/> Other-Hovercraft	<input type="checkbox"/> Other-Hydrofoil	<input type="checkbox"/> Other-Hydroplane
	<input type="checkbox"/> Other		
HULL Material	<input type="checkbox"/> Aluminum	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Steel
	<input type="checkbox"/> Wood	<input type="checkbox"/> Plastic	<input type="checkbox"/> Rubber/Vinyl/canvas
	<input type="checkbox"/> Other		
Propulsion	<input type="checkbox"/> Propeller	<input type="checkbox"/> Water Jet	<input type="checkbox"/> Air Thrust
	<input type="checkbox"/> Manual	<input type="checkbox"/> Sail	<input type="checkbox"/> Other
Engine Drive	<input type="checkbox"/> Inboard	<input type="checkbox"/> Outboard	<input type="checkbox"/> Pod Drive
	<input type="checkbox"/> Stern Drive	<input type="checkbox"/> Other	
Fuel	<input type="checkbox"/> Diesel	<input type="checkbox"/> Fuel	<input type="checkbox"/> Electric
	<input type="checkbox"/> Other		
Toilet Type	<input type="checkbox"/> Type 1 – Chemical	<input type="checkbox"/> Type 2 – Holding Tank	<input type="checkbox"/> Type 3 - Incinerator

Title Number _____