

FOR-HIRE VESSEL CARRIER APPLICATION

	NEW APPLICATION - \$25	☐ RENE\	NEWAL/UPDATED APPLICATION - \$25		
BUSINESS TYPE					
	INDIVIDUAL NAME (First, Middle, Last)				
	CORPORATION LIMITED LIABILITY COMPANY LIMITED PARTNERSHIP NAME (Show Exact Name)				
	GENERAL PARTNERSHIP (List all partners - use additional sheet if necessary) NAME (First, Middle, Last)				
	NAME (First, Middle, Last)				
	NAME (First, Middle, Last)				
OPERATOR'S USCG CAPTAIN'S LICENSE INFORMATION					
TYPE OF CREDENTIAL			REFERENCE NO.		
GENERAL INFORMATION					
DOING BUSINESS AS (DBA)					
PHYSICAL ADDRESS (No P.O. Boxes) (Number and Street, City, State, Zip Code)					
MAILING ADDRESS (If different than physical address)					
CONTACT PHONE NO. (Including Area Code) CONTACT E-MAIL		CONTACT E-MAIL AD	DDRESS		
I/We certify (or declare) under penalty of perjury that I/we have read this application and that the foregoing is true, correct, and complete. I further certify that I am authroized to sign on the operation's behalf.					
AUTHO	DRIZED SIGNATURE		PRINTED NAME	DATE	
To avoid delays processing this application, please send <u>all</u> of the following to the address below:					
 □ All required application forms, completed and signed (include DPR 857A, DPR 857B, DPR 857C, Annual Renewal Letter indicating changes, and attach an ACORD page for each vessel) □ \$25.00 Check / money order payable to "DEPARTMENT OF PARKS AND RECREATION" 					
	Send to: Department of Parks and Recreation Division of Boating and Waterways (DBW) Attn: For-Hire Insurance Verification Certificate Program P.O. Box 942896 Sacramento, CA 94296-0001				