



RHODE ISLAND
DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

235 Promenade Street, Providence, RI 02908-5767

TDD 401-222-4462

Room 360

APPLICATION FOR INITIAL VESSEL CERTIFICATE OF TITLE

(Please print or type requested information)

Applicant # _____ (office use only)

Tin # _____ (office use only)

Name(s) of Owner(s) _____

List name(s) to appear on title. Last name(s) first. See Item #1 on reverse side for co-owner's signature information. **(Please Print)**

Mailing Address _____
 Number & Street _____ City _____ State _____ Zip _____

Co-Owners Address (if different) _____
 Number & Street _____ City _____ State _____ Zip _____

R.I. Reg. No. _____ Name of Manufacturer _____ Model _____ Model Yr. _____

Hull Identification Number _____ (required for all manufactured vessels)

Length of Vessel _____ Ft. _____ In. *State of Origin _____ Cost of Vessel _____

If additional information is needed please provide us with one of the following:

Phone # _____ Or Email address _____

Please Indicate Number in Box

Hull Material	Propulsion	Fuel	Use of Vessel
<input type="checkbox"/> 1. Fiberglass <input type="checkbox"/> 2. Wood <input type="checkbox"/> 3. Steel <input type="checkbox"/> 4. Inflatable <input type="checkbox"/> 5. Other <input type="checkbox"/> 6. Aluminum <input type="checkbox"/> 7. Plastic <input type="checkbox"/> 8. Rubber	<input type="checkbox"/> 1. Inboard <input type="checkbox"/> 2. Outboard <input type="checkbox"/> 3. I/O <input type="checkbox"/> 4. Sail only <input type="checkbox"/> 5. Sail inboard <input type="checkbox"/> 6. Sail outboard	<input type="checkbox"/> 7. Air Thrust <input type="checkbox"/> 8. Manuel <input type="checkbox"/> 9. Propellar <input type="checkbox"/> 10. Water Jet <input type="checkbox"/> 11. Pod Dr <input type="checkbox"/> 12. Stern Dr <input type="checkbox"/> 13. Other	<input type="checkbox"/> 1. Gas <input type="checkbox"/> 2. Electric <input type="checkbox"/> 3. Diesel <input type="checkbox"/> 4. Other <input type="checkbox"/> 1. Pleasure <input type="checkbox"/> 2. Dealer <input type="checkbox"/> 3. Manufacturer <input type="checkbox"/> 4. Government <input type="checkbox"/> 5. Other <input type="checkbox"/> 6. Commercial Fishing <input type="checkbox"/> 7. Commercial Passenger <input type="checkbox"/> 8. Other Com <input type="checkbox"/> 9. Rent/Lease

*To be completed when a used vessel is being transferred from another state to Rhode Island. Annotate in this block the registration number issued by the previous state. The original copy of most current registration from a non-title state or the actual title document from a title state must be surrendered at time of application.

APPLICATION WILL NOT BE ACCEPTED UNLESS THE FOLLOWING LIEN STATEMENTS ARE COMPLETED

I (We) certify that all liens on this vessel are listed below: Note Annotate "None" if none exists.

Lien Holder's Name _____

Street Address _____

City, State, Zip _____

Date of Lien _____ \$ Amount of Lien _____

If additional liens exist, attach a listing of the liens to this application. Give all information requested under this section

*If a lien exists against this vessel, the issued title will be mailed to the lien holder to be held until lien is satisfied.

I, the undersigned, hereby make application to register the above vessel and as part of my application, declare that I am the owner and I have verified all information including the vessel hull identification number (HIN). I declare under penalty of perjury that all statements made on this application are true and complete to the best of my knowledge and belief.

Signature of Owner _____ Date of Birth _____

Signature of Co-Owner _____ Date of Birth _____

STATE OF RHODE ISLAND, County of _____

Sworn to and subscribed before me on this _____ day of _____ 20____

11-18-1. Giving false document to agent, employee, or public official.—No person shall knowingly give to any agent, employee, or servant in public or private employ, or public official any receipt, account, or other document in respect of which the principal, master, or employer, or state, city, or town of which he is an official is interested, which contains any statement which is false or erroneous, or defective in any important particular, and which, to his knowledge, is intended to mislead the principal, master, employer, or state, city, or town of which he is an official. Any person who violates any of the provisions of this section shall be deemed guilty of a misdemeanor, and shall, on conviction thereof, be impressed, with or without hard labor, for a term not exceeding one(1) year, or be fined not exceeding one thousand dollars(\$1,000).

 Notary Public My commission expires _____ (Seal)

**Notes: Checks/Money Orders payable to State of RI – DEM & mail or deliver to the address below
 Mail to: RI DEM, 235 Promenade St., Room 360, Providence, RI 02908**



APPLICATION FOR INITIAL VESSEL CERTIFICATE OF TITLE

Use: Application for Initial Vessel Certificate of Title is a generic form that is to be used by the owner(s) of any boat that is not USCG Documented and is being titled in the state of Rhode Island. This application is to be completed by the vessel owner(s) reflecting all owner(s) & lien holders and other information as requested on the face of this application. This application is to be filed with the State of RI DEM Office of Boat Registration & Licensing 235 Promenade St. Providence, RI 02908.

Accompanying Documents: Please refer to instruction sheet titled Boat Registration Requirements

Fees:

\$25.00 Title Fee - First title issued in the state of RI, boat has no bank loan

\$15.00 Filing Fee - To be added to title fee if boat has a bank loan

\$5.00 Duplicate Fee. To issue a duplicate or corrected title

\$5.00 Transfer Fee. RI titled boats only

Cautions:

1. When the ownership of a vessel is listed in more than one name, each owner must sign and notarize the application.
2. Insure that all spaces are completed in full and that all information is legible.
3. Insure that lien information on face of application is complete with name & address of lien holder, date and amount of lien. Whether or not boat has a loan, please Complete this space. If boat has no loan, please write the word .NONE. In the lien Space. Please do not leave this space blank. Applications will not be accepted unless The lien space on the face of the application is completed.
4. Insure that the application is properly signed & notarized.
5. Insure that any initial title application for a vessel previously registered and/or titled in another state is submitted with the appropriate original registration (if boat is being Transferred from a non title state) or original title if boat is being transferred from a title state. In addition, insure that the previous registration number is annotated in the block provided on the face of this application form under section State of Origin.

**FAILURE TO COMPLETE THE APPLICATION MAY RESULT IN THE DELAY
OF REGISTRATION & TITLING OF VESSEL**