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| NEW YORK STATE OF OPPORTUNITY. | Department of Motor Vehicles |

of BOAT REGISTRATION/TITLE APPLICATION



| | FOR OFFICE USE ONLY | |
|-----|---------------------|--|
| Vo. | | |
| | | |

Batch File N (This form is also available on DMV's web site - dmv.ny.gov) ☐ Original ☐ Renewal ☐ Activity ☐ Duplicate OFFICE Reg Sticker SPECIAL CONDITIONS: NF ov USE PA SV XR Sales Tax Status Value Jurisdiction Out of State Audit ONLY Information (\$) TO BE COMPLETED ONLY BY A REGISTERED NEW YORK STATE BOAT DEALER NY IF A TEMPORARY REGISTRATION WAS ISSUED: If you assigned a registration number to this boat, place the registration number sticker over this box. If the boat DEALER already has a valid New York registration number, enter the information below. Registration Number: ONLY Date Temp. Reg. Issued: Dealer Name: Dealer Facility Number: INSTRUCTIONS -> COMPLETE 1245 and 7. WHEN 3 AND 6 APPLY, COMPLETE THOSE SECTIONS. Print clearly in blue or black ink MARK THE BOX OF THE TYPE OF SERVICE YOU NEED. (For more information, refer to form MV-82.1B "Registering/Titling a Boat in New York State".) Get a FIRST REGISTRATION for a boat ☐ REPLACE the registration [mark one or both ☐ DOCUMENT ☐ STICKER] RENEW a registration CHANGE the current registration (refer to 6 Get a TITLE ONLY for a 1987 or newer ☐ CHANGE the title (refer to 6) motorized boat that is 14 or more feet long NAME OF PRIMARY REGISTRANT (Last, First, Middle) NYS driver license number of PRIMARY NAME OF CO-REGISTRANT (Last, First, Middle) NYS driver license number of CO-REGISTRANT MF DAY TELEPHONE NAME CHANGE? ADDRESS CHANGE? Area Code ☐ Yes Is this registration for a ☐ YES (refer to 6) ☐ NO ☐ YES ☐ NO corporation or partnership? □ No THE ADDRESS WHERE PRIMARY REGISTRANT GETS MAIL (Include Street Number and Name, Rural Delivery or box number. This address will be on the document.) Apt. No. City or Town County of Residence State Zip Code ~ THE ADDRESS WHERE PRIMARY REGISTRANT RESIDES IF DIFFERENT FROM THE MAILING ADDRESS (DO NOT GIVE A P.O. BOX.) State Zip Code NYS DRIVER LICENSE NUMBER OF OWNER A different owner is only allowed when the boat is leased. IF YOU ARE NOT THE OWNER of this boat, the owner must complete this section. Proof of ownership, proof of owner's name and date of birth and copy of the leasing agreement are required. NOTE: Do not complete this section if you apply to renew the boat registration and the owner of that boat has not changed. NAME OF CURRENT OWNER (Last, First, Middle) DATE OF BIRTH DAY TELEPHONE NUMBER OF OWNER (Optional) Day Area Code ADDRESS WHERE THE OWNER GETS MAIL (Include Street Number and Name, Rural Delivery or box number) Apt. No. State Zip Code County AUTHORIZATION: The registrant described in is authorized to register the boat described in is (Signature of owner or authorized person, and signature of co-owner) (Date) HULL IDENTIFICATION NUMBER YEAR MAKE LENGTH FUEL Feet Inches ☐ GAS ☐ DIESEL ☐ ELECTRIC TYPE OF BOAT **HULL MATERIAL** PROPULSION USE | PLEASURE | MANUFACTURER ☐ OTHER ☐ NONE ☐ STEEL □ WOOD □ OPEN ☐ OUTBOARD ☐ IN BOARD ☐ GOVERNMENT PLASTIC ☐ RENTAL INFLATABLE □ LEASED COUNTY OF PRIMARY USE □ HOUSE ☐ I/O (IN/OUTBOARD) COMMERCIAL PASSENGER: ☐ UNDER 6 ☐ 6 OR MORE ☐ FIBERGLASS □ OTHER OTHER ☐ ALUMINUM □ OTHER ☐ DEALER ☐ COMMERCIAL ☐ FISHING - COMM. HOW DID YOU GET THE BOAT? □ New Does this boat now have a If "YES", enter the ☐ Used NY REGISTRATION Number? □ No NY Registration Number ☐ Leased New ☐ Leased Used If leased, YOU MUST ATTACH a copy Is this boat now DOCUMENTED □Yes If "YES", enter the If NO, are you in the process of the Leasing Agreement ☐ Yes by you? Document Number Lien Filing Code(Assigned by DMV) NY DEALER ONLY ienholder Name and Mailing Address OFFICE Prior Old Owner Lien 3 of Name USE Number Proof Submitted ONLY Stop/Response (Name and Ownership) Signature

| FOR ALL CHANGES | other than a name change, explain what the ch | nange is and the reason for the change. | |
|--|--|--|--|
| | | 6 | |
| | | | |
| REGISTRANT CER | TIFICATION: I certify that the registration information in the second se | madia and district the second | |
| below also authorizes | use of my credit card. | or any rees in connection with this applica | ation, I understand that my signa |
| Print Name He | re X(Print Name in Full - if | \$ | |
| | (Print Name in Full - if | registering for a corporation, print your full name a | nd title) |
| Sign Her | re X | | |
| Additional Signat | ure. | (Sign Name in Full) | |
| SIGN HER | (Sign Name in Full -Additional signatu | | |
| MPORTANT: Makin | (Sign Name in Full -Additional signature g a false statement in any registration application | re required for a partnership or if registering this bo | oat in more than one name.) |
| ocumentation required ommissioner of the De | o regulations established by the Commissioner. In until the Commissioner is satisfied that the a d to establish ownership of the boat is submitted. | opplicant is entitled to a certificate of title or | transferable registration, and un |
| pairs performed, impro | evenents made or work done to the boat reference | missioners employees deputies as essets - | ssumes any liability or responsibilit |
| spano periorifica, impre | wernerits made or work done to the boat reference | imissioner's employees, deputies or agents as id in this application. | ssumes any liability or responsibilit |
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MV-82B (1/22)

PAGE 2 OF 2



Department of Taxation and Finance

YORK Statement of Transaction – Sale or Gift of Motor Vehicle, Trailer, All-Terrain Vehicle (ATV), Vessel (Boat), or Snowmobile

Instructions

The new owner's social security number, taxpayer identification number (TIN), or federal employer identification number (EIN) is

Use this form when sales tax was not collected at the time of purchase or when the vehicle was received as a gift. If the donor/seller is not required to complete Section 6, the new owner must have a copy of the bill of sale signed by the seller.

The seller or donor must complete Section 6 if:

- the motor vehicle is a gift or is sold below fair market value to a person other than a spouse, parent, child, stepparent, or stepchild
- the trailer, ATV, boat, boat/trailer combination, or snowmobile is a gift, or is sold below fair market value

If for any reason you must obtain a registration or title before you can establish the amount of tax due based on the less than fair market value purchase price, you may obtain tax clearance by paying the tax due based on the fair market value as established by the Tax Department. If this results in an overpayment, you may apply to the Tax Department for a refund or credit of the amount overpaid.

- If you are claiming an exemption other than a gift, use Form DTF-803 instead.
 If you are claiming credit for taxes paid to another state, use Form DTF-804 instead.
- If you are registering more than one motor vehicle for the same taxing jurisdiction, use Form DTF-805 instead.

| Section 1 | - Vehi | cle inform | nation | | | | | | | | |
|----------------------------------|------------------|----------------------|--|---|-------------|------------|--------------|-------------------|----------------------------|---------------------|------------|
| Type of vehicle Motor veh | (mark one box) | Trailer | | combination | ATV | | | | | | |
| Year | Make | | | Model | AIV | | Snow | mobile Vehicle | Boat or hull identifica | tion number | |
| Boats and boat/ | trailer combina | alions only - ento | r trailer information be | | | | | | 15 | | |
| Year | Make | ations only — ente | trailer information be | | | | | | | 741 | |
| | | | | Model | | | | Vehicle | dentification nu | mber | |
| Delivery location | (complete only | for an ATV or snown | nobile) | | | | | | | | |
| City | | 0.0.0 | County | | | | | | | | |
| Storage/use loca | ation (complete | only for an ATV or s | nowmobile) | | | | | | | | |
| City | | | County | | Dov | ou have | a residence | a in this say | inty? (If Yes, | | |
| Section 2 | - New | Namor inf | | | see | Tax rate r | note in Sec | tion 5) | inty? (if Yes, | Yes | |
| Last name, first n | I ACAA (| wiler into | ormation | | | | | | | | |
| mer nome, mach | arrie, middle i | nitial or business | name | | | | | | Social securi | ty number/TIN/EI | |
| Number and stree | at addresse | | | | | | | | Occiai secuii | ty number/TIN/El | IN |
| and street | et address | | 200 Van 190 Va | City, state, and ZIP co | de | - | - | | County | | |
| usiness address | (4 | 3.00 | | | | | | | County | | |
| 40011035 4001655 | (ii commercial v | rehicle) (number and | i street) | | | | City star | te, and ZIP | 0040 | | |
| | | | | | | | | o, uno Em | code | | |
| ection 3 - ast name, first na | - Previo | tial or business n | information | 1 | | | | | | | |
| | | | | | | | | | EIN (if applica | able) | |
| umber and street | address | | | City state and 710 | | | | | 1 | | |
| | | | * 1 | City, state, and ZIP coo | ie | | | W. | County | | |
| ection 4 - | Trance | n4in i f | | | | | | | | | |
| | | iction info | rmation | | | | | | | | |
| Date of transac | ction Re | elationship of new | owner to previous ov | VDer (mark one how) | | | | | | | |
| mm dd yy | | None | | | | | <u> </u> | | | | |
| | ction is a (m | | Spouse F | arent L Child | ☐ Ste | epparent | | Stepchild | Other / | describe): | |
| Gift of a mo | tor vehicle t | ark one) | Me and a second | and Administration | | | | | | uescribe) | |
| Purchase o | f a motor ve | biolo et beleves | er than spouse, par | ent, child, stepparent | t, or stepc | hild. (do | nor must c | omplete Se | ction 6) | | |
| Gift of a trai | iler ATV has | t as as below i | air market value by | ent, child, stepparent a person other than lete Section 6) | spouse, p | parent, c | hild, step | parent or | stenchild (and | | |
| Purchase of | fatmiles AT | it, or snowmob | ile (donor must comp | lete Section 6) | | | | , | oteperma. (Ser | iei musi complete s | Section 6) |
| Gift or purch | na haller, Ar | v, boat, boat/tr | aller combination, o | ete Section 6) or snowmobile at belo di stennarent or stor | ow fair ma | rket val | ue (seller i | must como | oto Castia - Cl | | |
| None of the | obered a mo | tor vehicle to s | pouse, parent, chile | d, stepparent, or step | child | | (00,,01) | nost compi | ete Section 6) | | |
| | auove | | .8 | e 58 | | | | | | | |
| r office use o | only | | | | | | | | | | |
| | nitials | Office | Fairmed | | | ti. | | | | | |
| | | 1 | Fair market value | Audit Ta | ex Rate | Tax | paid | Term no. | | | |
| | | | 1 | | c | % | | | 1 | | |

| Section 5 - Purchase information | | | | | | |
|--|--|-------------------------------------|---|---|--------------------------------------|--|
| 1 Purchase price | | | Val | | \neg | |
| a. Amount of cash payment | | 1a | 0 | ue | - | |
| b. balance of payments assumed | | 41 | C . | | - | |
| value of property given, traded, or swapped, or services performe | d instead of each navenest | 0- | 0 | | | |
| o. I dichase blice lintal of lines to the and to | | | | | 1d | \$ |
| Boats and boat/trailer combinations: For purchases or us purchase price. Do not enter more than \$230,000 on line 1d. | | 5, tax | conly applies | to the | first : | \$230,000 of the |
| Was this transaction the purchase or gift of a motor vehicle | 6 | | | | | |
| from your spouse parent child stopperent as a standard to | (| | | | | |
| from your spouse, parent, child, stepparent, or stepchild? 3 Tax rate* (enter as a decimal) | Yes (enter 0 on line 4; | no ta | ax is due) | No (co | ntinu | e to line 3) |
| | | | | | | |
| 4 Sales tax due (multiply line 1d by line 3) 5 Is the amount on line 1d lower than fair market value? | •••••• | ••••• | | , | 4 3 | 5 |
| Yes (seller/donor must complete Seation of | No (sign certification b | | _ | | | |
| or more counties in the state, use the rate in effect in the place where the lf the new owner is a business, use the tax rate of the place of business, the place where the motor vehicle, trailer, or boat will be principally used or delivery, or where the vehicle is stored or used if new owner has a resider | n use the tax rate of the new or motor vehicle, trailer, boat, or it f the business has locations in or garaged. For an ATV or snow noe in storage/use locality. | wner's boat/ti two o vmobi | s place of resid railer combinati r more counties le, use the high | ence. If the control of the control | he pu e prind tate, u f whe | cipally used or garaged. use the rate in effect in re the new owner took |
| Purchaser certification — I certify that the above stathe knowledge that willfully issuing a false or fraudulent staten | atements are true and com | plete | e; and I make | these s | state | ments with |
| the knowledge that willfully issuing a false or fraudulent staten section 1817(b), and Penal Law section 210.45, punishable by | nent with the intent to evac | ie ta | x is a misden | neanori | unde | r Tax Law |
| section 1817(b), and Penal Law section 210.45, punishable by Signature | / a fine up to \$10,000 for a | in inc | dividual and S | \$20,000 | for a | a corporation. |
| | * | | Dat | | | |
| If this form is submitted by company at | | | | | | |
| If this form is submitted by someone other than the new owner | /lessee, provide the follow | ing: | | | | |
| Tallie Control of the | Social security number, | TIN. o | federal EIN | | | |
| Address | | | | | | |
| | | | | | | |
| Section 6 — Affidavit of sale or gift of a motor The seller or donor must complete if: the motor vehicle is a gift to a person other than a spouse, pare the motor vehicle is sold below fair market value to a persor the trailer, ATV, boat, or snowmobile is a gift the trailer, ATV, boat, boat/trailer combination, or snowmobile | nt, child, stepparent, or step other than a spouse, pare | child | child, steppar | | | |
| 6 Cash payment and it | is sold below fair market v | alue | | | | |
| 6 Cash payment received | | | | 6 | \$ | |
| lieu of, a cash payment, mark an X in the appropriate box an | urchaser/recipient did any id indicate the value of the | of the | ne following in vice or goods | n addition | on to ceive | ed. |
| a Performed any serviceb Assumed any debt | 200 | | V | | _ | Value |
| | | | Yes No | | _ | |
| c Traded/swapped a vehicle or other property | | H | Yes No | | _ | |
| | ••••• | ш | ies 🔲 No | 7c 5 | \$ | |
| Complete only if a corporation or business is the seller/donor | | •••••• | | . [7a] | Φ | |
| a Was or is the purchaser/recipient an employee, officer, or sto b Was the transaction part of any terms of employment employ | ckholder of the company/o | orno | ration? | | Г | 7,4. [7,1] |
| b Was the transaction part of any terms of employment, employ | ment contract, or terminal | tion a | areement? | •••••• | ├ | Yes No |
| If you answered Yes to any part of line 7 or line 8, provide an ex | xplanation: | | | | | Yes No |
| Seller/Donor certification — I have reviewed the informal make these statements with the knowledge that willfully issuing a false ax Law section 1817(b) and Penal Law section 210.45 punishable by a Signature | a fine up to \$10,000 for an in | certif h the | y that the stat intent to evad ual and \$20,0 | ements a le tax is a | are tr a mis | ue and complete. |
| | Name (printed or typed) | 34 | | Date | | |
| | | | | | | |



VEHICLE BILL OF SALE

dmv.ny.gov

| | | | | (Seller) | | | | | | | 2 |
|--------------|--------------------|------------|--|------------|----|---|----|-----|--------|---|---|
| in cons | ideration of | | , do hereby sell, transfer and convey to | | | | | | | | |
| <u> </u> | | | | | | | | | | | |
| the follo | owing vehicl | e: | | (Buyer) | | | | | | 3 | , |
| ESCRIPT | TION OF VE | HICLE | | | | | | | | | |
| 'ear | Make | | | Model | | | | | | | - |
| ehicle or Hu | Ill Identification | n Niumb an | | | | | | | | | |
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PAYMENT INSTRUCTIONS

You can pay for your transaction by check, money order or credit card.

- 1. Select your payment method. (DO NOT SEND CASH)
- 2. Complete the section for your payment method.
- 3. If you pay by check or money order, make the check or money order payable to "Commissioner of Motor Vehicles"
- 4. Return page 3 with your application. Make sure to include your check or money order if applicable.

NOTE: If you mail your application to the Title Bureau, you <u>must</u> pay with a check or money order. Credit cards are <u>not</u> accepted.

| NAME OF PRIMAR | RY REGISTRANT | | | |
|---------------------|-------------------------|-------------------------|---------------------------|---|
| ☐ Check | ☐ Money Ord | er Amount Er | nclosed (DO NOT SEND CASH | 1) \$ |
| Credit Card Aut | horization - Pro | vide all of the informa | tion below. | |
| Credit Card Type | | ☐ MasterCard | ☐ American Express | Discover |
| Name (as it appears | on credit card) | | | T |
| Credit Card Number | | | Expiration Date | Security Code to the transfer of the transfer |
| | | | Expiration Date | Security Code (3 or 4 digit code on back or front of your card) |
| Authorized | | | | |
| Signature X | | | | |