



Last Name: \_\_\_\_\_

## Vessel Registration Declaration Form

**Vessel Operator:** Complete and submit this form to Inspector at Vessel Inspection station. This form is required along with a visual or physical vessel inspection before you may launch any vessel. Failure to comply with inspection may result in revocation of your boating permit and you may be subject to citation and or eviction from Santa Clara County Parks & Rec facilities.

<b>Vessel Make:</b> _____	<b>Model:</b> _____	<b>CF# or Veh#</b> _____
<b><u>Vessel Operator Information</u></b>		
<b>Name:</b> _____		
<b>Address:</b> _____		
<b>City:</b> _____	<b>State:</b> _____	<b>Zip Code:</b> _____ <b>County:</b> _____

Location vessel has launched in the last 30 days:

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

Has this vessel/operator moored in any of the following bodies of water: Lake Mead, Lake Havasu, Lake Mojave, Lake Skinner, any water way south of the Tehachapi Mountains, any waterway outside of California, or any waterway on the current ban list?

NO  YES  If yes, where & when? \_\_\_\_\_

I attest to the truthfulness of the information that I have submitted on this form and I voluntarily consent to an inspection of the boat and trailer currently in my possession by the SCCPR, or designated agents, for the sole purposed of detecting invasive aquatic species. I certify that the vessel is safe to board and that there are no know hazards that may injure inspection staff.

\_\_\_\_\_ Date: \_\_\_\_\_

*Signature of owner/operator*

<b>Staff use only:</b>	Initial Here:	County Staff _____	Contractor _____
<i>Type of registration verified:</i>			
DMV Registration	<input type="checkbox"/>	Vehicle ID	<input type="checkbox"/>
		CA-DL	<input type="checkbox"/>
Facility: CAL COY LEX STCRK			
Date: _____ Time: _____			
Revised: 1/2022			