

DEPARTMENT OF GAME AND INLAND FISHERIES - CLIENT SERVICES P.O. BOX 9930, HENRICO, VA 23228-9930

TELEPHONE: (866) 721-6911 WEBSITE: WWW.DGIF.VIRGINIA.GOV

REPORT OF A STOLEN BOAT / MOTOR / TRAILER

BOAT OWNER: Use this form to report the theft of a Boat, Boat Motor, or Boat Trailer.

You are required by law to report the theft of a watercraft to this Department within 15 days.

If you have not reported the theft to another law enforcement agency in your jurisdiction, a law enforcement officer of the Department may contact you. This officer will complete a police report and insure that your theft is reported to the Virginia Criminal Information Network.

OWNER INFORMATION			
NAME	First:	MI: Last:	
ADDRESS	Street:		
	City:	State: Zip:	
PHONE	Home: ()	Work: ()	
		, , ,	
BOAT INFORMATION	Registration Number: (e.g., VA	4 4696 AF):	
	Hull ID Number: (e.g.,"ABC45678A788"):		
	1101 12 1 milet. (e.g. 1150 120		
MOTOR 1	Type (check one) Outboard	rd	
1.20 2 911 1	Make:	Serial #:	
	Model:	Model Year: Horsepower:	
MOTOR 2	Type (check one) Outboard	d	
	Make:	Serial #:	
	Model:	Model Year: Horsepower:	
		, , ,	
TRAILER	Make:	Serial #:	
	Model:	Model Year: Number of Axles:	
		· · · · · · · · · · · · · · · · · · ·	
LOCATION OF THEFT			
ADDRESS			
	City /County:	State:	
CHECK	This is the only report I have made of the theft. I have filed a police report of this theft to the following Sheriff's Office, Police Department,		
ONE		or Other Law Enforcement Agency.	
		iit Agency.	
	Dept. or Agency: Date Reported:	Report # or Officer Taking Report:	
	Date Reported.	report # of Officer Taking Report.	
Date of Theft:		Time of Theft:	
Duce of Their.		Time of Their.	
I certify under penalty of perjury that I am the owner of the watercraft, motor(s) and or trailer described and further certify that the			
description thereof and all other matters stated herein are true and correct.			
(As required by § 29.1-702.1 <u>Code</u>	e of Virginia.)		
6: 4 60 ()	.	DATE	
Signature of Owner(s)	X .	DATE	
<u></u>	X	DATE	