## **VESSEL BILL OF SALE**

ALL SECTIONS MUST BE COMPLETED



Model

435 Commercial St NE #400 PO Box 14145 Salem OR 97309 Ph: 503-378-8587 Fax: 503-378-4597

- If Oregon titled boat submit original Certificate of Title for a boat.
- If Oregon title is lost, use Lost Boat Title Application.
- If out of state boat, submit out of state title or registration with Application for Boat Title.
- If there was a lienholder, submit an original Lien Release.
- Submit this form with an Application for Boat Title and Registration.

## **VESSEL DESCRIPTION**

State assigned Certificate of Number	Model Year	Manufacturer	Hull Ident	ification Number	
SELLER INFORMATION  By signature below, I as seller certify the above boat information is true and correct. Seller releases all rights, title and interest in the above described vessel to the buyer listed below. Seller also certifies by signature below, vessel is free of any and all liens.					
Owner Printed Name	Owner S	Owner Signature		Date	
Co- Owner Printed Name Co-Ov		er Signature		Date	
Co- Owner Printed Name	Co-Owne	Co-Owner Signature		Date	
	BUYE	R INFORMATION			
New Owner Last Name		First Name	Mic	Middle Initial	
New Co-Owner Last Name		First Name	Mic	Middle Initial	
Address		City	State	Zip	
New Lienholder					
Address		City *Note to buyer:	State	Zip	
If you do not transfer ves late title transfer fee. Sub	sel title within 30 day	s from the date of purcha		bject to a \$25.00	