



State of Ohio  
 Department of Natural Resources  
 DIVISION OF WATERCRAFT  
 2045 Morse Road, Building A • Columbus, Ohio 43229  
 1-877-4BOATER (in Ohio only) • 614-265-6480 • Fax 614-784-5987  
 ohiodnr.com/watercraft

**CERTIFIED WATERCRAFT ALTERNATIVE REGISTRATION APPLICATION**  
**For hand-powered vessels only.**  
 Print or type only

**Section 1 - Information**

NEW     RENEWAL     CHANGE     TRANSFER     TRANSFER/TIME REMAINING ( \_\_\_\_\_ )  
EXPIRATION YEAR

For RENEWAL only:  All information on the attached registration is accurate.  
 All the information on the attached registration is accurate EXCEPT for the updates listed below.

1. Ohio Watercraft No. OH \_\_\_\_\_  
(IF PREVIOUSLY NUMBERED)
2. Owner Name \_\_\_\_\_  
LAST FIRST MIDDLE INITIAL  
 Co-Owner Name \_\_\_\_\_  
LAST FIRST MIDDLE INITIAL
3. Home Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_  
 Daytime Phone ( \_\_\_\_\_ ) \_\_\_\_\_
4. Make of Boat \_\_\_\_\_  
Boat Manufacturer's Hull Identification No. \_\_\_\_\_ Year \_\_\_\_\_
5. Name of Water Principally Used \_\_\_\_\_ Length: \_\_\_\_\_ Feet \_\_\_\_\_ Inches
6. Type of Boat:  Row     Canoe/Kayak     Other
7. Propulsion:  Hand Powered    **THIS TYPE OF REGISTRATION IS ONLY AVAILABLE TO HAND-POWERED VESSELS.**
8. Type of Use:  Pleasure     Fishing     Racing     Rental
9. Hull Material:  Wood     Steel     Aluminum     Plastic     Fiberglass     Other     Inflatable
10. Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_
11. Driver's License or Other I.D. \_\_\_\_\_ / \_\_\_\_\_ (Use Tax I.D. for Businesses)     No Title Required  
STATE ISSUED NUMBER
12. I certify the above information is true and accurate: \_\_\_\_\_  
SIGNATURE OF OWNER  
 \_\_\_\_\_  
DATE SIGNATURE OF CO-OWNER

**Section 2 - Watercraft Affidavit of Ownership for Non-titled Boats**

Date of Sale \_\_\_\_\_ How was the above vessel acquired? \_\_\_\_\_

Previous Owner Name(s) \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

I certify the above information is true and accurate: \_\_\_\_\_ Sworn to before me and subscribed in my presence

\_\_\_\_\_ this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
SIGNATURE OF OWNER MONTH YEAR

\_\_\_\_\_ NOTARY PUBLIC  
SIGNATURE OF CO-OWNER

State of Ohio, County of \_\_\_\_\_ My commission expires \_\_\_\_\_

**Section 3 - Agent Certification**

I certify that I have seen legal proof of ownership and/or documentation herein described in the form of \_\_\_\_\_  
TYPE OF PROOF SEEN

\_\_\_\_\_ DATE \_\_\_\_\_ SIGNATURE OF REGISTRATION AGENT/CLERK \_\_\_\_\_ AGENT NO. \_\_\_\_\_

