



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

APPLICATION FOR CHANGE OF MOTOR

MAIL THIS FORM WITH THE ORIGINAL CERTIFICATE OF TITLE AND THE NON-REFUNDABLE FEE OF \$2.00. MAKE CHECK PAYABLE TO: **TREASURER OF VIRGINIA**

Name of Titled Owner(s)

1. SSN or FIN: _____

Name: _____
First MI Last

Address: _____

City State Zip

2. SSN or FIN: _____

Name: _____
First MI Last

Address: _____

City State Zip

3. Boat Description

_____ Boat Registration/Title Number _____ Make of Boat _____ Year Built

_____ FT IN _____
Length Hull Identification Number

4. **Is the motor listed on the title to be removed from the title:** YES _____ NO _____

5. **Description of Motor(s) to be recorded on Certificate of Title:** (For Motors in Excess of 25 Horsepower Only)

New Motor #1:

New Motor #2:

Make: _____

Make: _____

Serial Number: _____

Serial Number: _____

Horsepower: _____

Horsepower: _____

5. **Propulsion of Motor(s):** (Check One)

6. **Fuel:** (Check One)

_____ Outboard _____ Inboard
_____ Inboard/Outboard _____ Jet
_____ Sail/Inboard _____ Sail/Outboard

_____ Gasoline
_____ Diesel

7. **Signature of All Titled Owners:**

X _____

X _____