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

	SSN or FIN:		
NAME	First:	MI:	Last:
ADDRESS	Street:		
	City:	State:	Zip:
PHONE	Home: ( )	Work: ( )	

BOAT INFORMATION

Registration Number: (e.g., VA 4696 AF):	
Hull ID Number: (e.g."ABC45678A788"):	

MOTOR 1

Type (check one)	Outboard ☐	Inboard ☐	Lower Unit ☐
Make:		Serial #:	
Model:		Model Year:	Horsepower:

MOTOR 2

Type (check one)	Outboard ☐	Inboard ☐	Lower Unit ☐
Make:		Serial #:	
Model:		Model Year:	Horsepower:

TRAILER

Make:	Serial #:	
Model:	Model Year:	Number of Axles:

LOCATION OF THEFT

ADDRESS		
	City /County:	State:

CHECK ONE	☐ This is the only report I have made of the theft.
	☐ I have filed a police report of this theft to the following Sheriffôs Office, Police Department, or Other Law Enforcement Agency.
	Dept. or Agency:
	Date Reported: / Report # or Officer Taking Report:

Date of Theft: _____ **Time of Theft:** _____

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 Code of Virginia.)

Signature of Owner(s) **X** _____ **DATE** _____
X _____ **DATE** _____