STATEMENT OF BOAT HANDLING ABILITY AND MORAL CHARACTER

DATE:							
TO:	Division of Boating and Waterways One Capitol Mall, Suite 500 Sacramento, CA 95814						
ATTENTION:	For	-Hire Vessel Operato	or Licensing				
I have personally known				since			
		nal knowledge, I			operated	1	
motorboats onas listed below:				(commercial, pleasure, etc., waters foryearsmonths,			
OWNER OF VESSEL Name & Addre		VESSEL INFORMATION Length Propulsion Type	SERVED AS		M - TO - MO./YR.	WATERS OPERATED ON	
applicant c	an t	m/her to be of go be safely entruste nsed to operate v	ed with the duti	es and r	esponsib	ilities required	
Signature:_				<u></u>			
Title or occu	ıpat	ion:					
Addraga							