

Surrendered Vessel Turn-in Program

Vessel Release of Interest and Ownership

To Whom It May Concern:

1) I/we _____
(owner(s) name(s)) hereby release all interest in the vessel listed below. I/we do not have the funds or means to remove my/our vessel.

2) I/we authorize the Richardson Bay Regional Agency
(accepting agency) to take possession of my vessel, and to abate it.

3) I/we certify that I am/we are the sole owner(s) of the vessel, and I am/we are authorized to release interest and ownership of the vessel to the Richardson Bay Regional Agency (agency).

4) I/we hereby agree to forever release and discharge the State of California and the Richardson Bay Regional Agency, and their officers, employees, and agents from any and all liabilities, claims, demands, or causes of action that any person, firm, corporation or entity may hereafter have for any injury, damage, expense, or loss to person or property arising out of the removal and destruction of this vessel.

5) I/we hereby agree that I/we am/are responsible and legally liable for any and all outstanding debts, fees, rents, leases or taxes owed against this vessel for any reason, and that the State of California and the Richardson Bay Regional Agency (agency) assume no liability or responsibility therefor.

6) Complete the following information and sign and date the following page.

Vessel Owner Name	
Address	
City, State, Zip	
Phone	
Email Address	
CDL #	

Vessel Owner Name (if additional owner)	
Address	
City, State, Zip	
Phone	
Email Address	
CDL #	

Vessel CF #	
Make	
Type	
Length	
Color	
Vessel Location	

_____ Date _____
Vessel owner signature

_____ Date _____
Vessel owner signature

_____ Date _____
Witness signature

SAVE AGENCY USE ONLY

Agency Name: _____

Proof of ownership documentation provided (minimum one of the following):

- _____ Signed Certificate of Ownership (DMV Pink Slip)
- _____ Completed and signed Pre-Printed DMV form 138 – Title Transfer
- _____ DMV registration
- _____ DMV issued Junk slip
- _____ Power of Attorney/Executor – Death Certificate
- _____ Marina Lien Documents
- _____ Coast Guard – Documented Vessel

_____ Date _____
Authorized City or County Agency Representative Signature

Printed Name