

State of California - Natural Resources Agency DEPARTMENT OF PARKS AND RECREATION

STATEMENT OF BOAT HANDLING ABILITY AND MORAL CHARACTER

BACKGROUND INFORMATION				
FOR-HIRE APPLICANT NAME (Last, First)				
TYPE(S) OF MOTORBOATS OPERATED (e.g. length, ski/pontoon, etc.)				
WATERS OPERATED ON				
LENGTH OF TIME APPLICANT OPERATED MOTORBOATS LISTED ON WATERS LISTED (YEARS/MONTHS) I HAVE KNOWN APPLICANT SINCE (List Year)				
APPLICANT EXPERIENCE INFORMATION				
OWNER OF VESSEL	VESSEL INFORMATION	FROM - TO	TOTAL	WATERS
(Name, Address, and Phone No.)	Length, Type, and Designated Use	(MM/YY - MM/YY)	HOURS	NAVIGATED
CERTIFICATION				
My signature below indicates my certification that the information provided is accurate to the best of my knowledge and I have found the applicant to be of good character. It is my opinion that this applicant can be safely entrusted with the duties and responsibilities required of a person licensed to operate for-hire vessels carrying passengers.				
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Signature	Printed Name			Date Signed
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Title/Occupation		Phone Number (w/Area Code)		
Address (Street, City, Zip Code)				