



SEA LOVE BOAT WORKS, INC.
 4877 FRONT STREET
 PONCE INLET, FL 32127
 Phone: (386)761-5434 - Fax: (386)760-4210
 sealoveboatworks@gmail.com

OWNER/AGENT AUTHORIZATION FORM

Vessel OWNER (print full, legal name): _____

Vessel OWNER home Street Address: _____

Vessel OWNER home CITY: _____, STATE: _____

Home Phone #: (____) ____ - ____ Cell Phone #: (____) ____ - ____ Work Phone #: (____) ____ - ____

Vessel OWNER Driver's License #: _____ OWNER D.L. State: _____

- **Front and Back Copy of Owner Driver's License Required**

Vessel NAME: _____ Vessel Year: _____

Vessel Make: _____ Vessel Model: _____

Vessel HULL #: _____

Vessel Registration #: _____ State of Vessel Registration: _____

- **Copy of Vessel Registration Required**

I, (print full name) _____ (OWNER of above listed VESSEL), hereby designate and authorize the Agent/CAPTAIN (listed below) to act on my behalf, and on behalf of my VESSEL. I, OWNER, am responsible for all charges incurred while my VESSEL is on property or marina of SEA LOVE BOAT WORKS INC. I, OWNER, authorize Agent/CAPTAIN (listed below) to make payments on my behalf for all charges incurred while my VESSEL is on property or marina of SEA LOVE BOAT WORKS INC.

Printed Name of Agent/CAPTAIN: _____

Captain's License #: _____ Date: _____

Driver's License #: _____ Driver's License State: _____

- **Front and Back Copy of Agent/CAPTAIN's Driver's License Required**

I, _____ OWNER of above listed VESSELL, hereby certify, under penalty of (full legal signature of OWNER)

Perjury, that the above-stated facts are true and correct to the best of my knowledge

STATE OF _____ COUNTY OF _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20____, by _____ (Name of Person Acknowledging), who is personally known to me, or who produced identification, type of identification produced: _____

(Seal)

Signature of Notary Public

Print, Type or Stamp Name of Notary