

APPLICATION FOR INSPECTION

Passenger-for-Hire Watercraft

State Form 2706 (R6 / 6-22) Approved by State Board of Accounts, 2022

INSTRUCTIONS: 1. BE SURE TO READ REGULATIONS.

- 2. Please print or type information.
- 3. Mail completed application with inspection fee to address in upper right corner.

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Check one: ☐ New Watercraft ☐ New Applicant ☐ Renewal ☐	Date of Application (month, day, year)		
Name of Watercraft Owner			
Address (number and street)			
City, State and ZIP Code	County		
Telephone Number () E-m	ail Address		
Name of Business	Business Telephone Number ()		
Registration Number of Watercraft	Name on Watercraft (if applicable)		
Home Port/Location of Watercraft (street address and/or City)			
Horsepower (total) Propulsion (Check One):	☐ Inboard ☐ Outboard ☐ Inboard / Outb	oard 🗌 Sail	☐ Paddle
Hull Identification Number	Hull Material		
Year Built Beam	Radio Call Sign		
Watercraft Hull ManufacturerEngi	ne Serial Number(s)		
Name of Insurance Company	Total Amount of Coverage		
Insurance Policy Number	_ Policy Expiration Date (month, day, year) _		
Watercraft Use ☐ Fishing Charter ☐ Sailing Charter ☐ Ferry Chart	eer 🔲 Scuba Charter 🔲 Sightseeing Chart	ter 🗌 Other	
Water in which watercraft is to be operated (check all that apply): \[\] Na	Coast Guard Motorboat – more than vigable (Lake Michigan, Ohio River, or Waba	ash River)	Inland
Inspection Desired: Dockside Drydock Date of last Drydock	k Inspection (month, day, year):		
	C 14-15-6-3 and IC 14-10-2-1)	D. J. 21.	D . 11
Watercraft All watercraft except for sailboats carrying six (6) or less passengers for	hire on navigable waters	Dockside \$69.00	Drydock \$103.50
All watercraft except for sailboats carrying six (6) or less passengers for		\$50.00	\$50.00
All watercraft except for sailboats carrying more than six (6) passengers	s for hire on inland waters.	\$103.50	\$138.00
All watercraft propelled primarily by sail that carry passengers for hire		\$69.00	\$103.50
	TOTAL PAID		
Please mail completed application form with cash, c To pay by credit card, call the DNR Di	heck, or money order made payable to the vision of Fish and Wildlife at 317-233-6527		<u></u>
Under the penalties of perjury (IC 35-44.1-2-1), I certify that the informa	tion supplied by me is true and correct to the	best of my kno	wledge.
Signature of Applicant:	Date Signed (month, day, year):		
FOR OFFI	CE USE ONLY		
Date Application Received (month, day, year)			
Payment Type: Cash Check Money Order Credit Card	Check/Money Order Number (if applicable))	
Approved by	Date Approved (month, day, year)		

INDIANA DEPT. OF NATURAL RESOURCES
Division of Fish and Wildlife

402 W. Washington St., W273 Indianapolis, IN 46204-2781 Telephone number: (317) 233-6527 Fax number: (317) 232-8150

www.in.gov/dnr/fishwild/