Vessel Turn-In Program (VTIP)

Vessel Release of Interest and Ownership

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 City of Vallejo / Vallejo Municipal Marina 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 City of Vallejo / Vallejo Municipal Marina.

4)   I/we hereby agree to forever release and discharge the State of California and the City of Vallejo / Vallejo Municipal Marina, 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 City of Vallejo / Vallejo Municipal Marina assume no liability or responsibility therefor.

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

Vessel CF #	
Make	
Type	
Length	
Color	
Vessel Location	

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 owner signature   Date

_____   _____
Vessel owner signature   Date

_____   _____
Witness signature   Date

CITY OF VALLEJO / VALLEJO MUNICIPAL MARINA USE ONLY

Proof of Ownership Documentation Provided:

_____Certificate of Ownership (DMV pink slip) or
Notice of Transfer and Release of Liability (DMV form Reg #138)
_____Picture of Vessel, including CF #
_____Copy of Registered Owner(s) Driver's License(s)

_____   _____
Authorized City of Vallejo Representative Signature   Date

_____   _____
Printed Name   Title