

DEPARTMENT OF HOMELAND SECURITY
 U.S. Coast Guard
ABSTRACT OF TITLE/CERTIFIED COD REQUEST

OMB Number: 1625-0027

Expiration Date: xx/xx/xxxx

A. PLEASE CHECK BOX IF REQUESTING MULTIPLE DOCUMENTS AND USE PAGE 2

B. VESSEL USE/ENDORSEMENT (CHECK ONE:) RECREATION COMMERCIAL

C. OFFICIAL # (IF AWARDED)

D. HULL IDENTIFICATION # OR OTHER UNIQUE IDENTIFIER (IF ANY)

E. VESSEL NAME

F. OWNER'S NAME

G. ABSTRACT OF TITLE (AT) CERTIFIED COPY OF CERTIFICATE OF DOCUMENTATION (COD)

H. BUSINESS/ORGANIZATION NAME (IF APPLICABLE)

I. REQUESTOR'S NAME

J. REQUESTOR'S ADDRESS

K. REQUESTOR'S FAX NUMBER

L. REQUESTOR'S TELEPHONE NUMBER

M. E-MAIL ADDRESS

N. CREDIT CARD HOLDER'S NAME

O. CREDIT CARD NUMBER (WE ACCEPT VISA, MASTERCARD, AMERICAN EXPRESS OR DISCOVER)

P. EXPIRATION DATE

Q. FEE INFORMATION:

\$25 PER AT x _____ ATS ORDERED = \$ _____

\$ 4 PER COD x _____ CODS ORDERED = \$ _____

R. TOTAL AUTHORIZED CHARGE TO CREDIT CARD \$ _____

S. REQUEST RETURN BY: USPS FAX E-MAIL

FOR COAST GUARD USE ONLY

T. NAME OF PERSON TAKING REQUEST

U. DATE

PRIVACY ACT STATEMENT

IN ACCORDANCE WITH 5 U.S.C. 552(a), THE FOLLOWING INFORMATION IS PROVIDED TO YOU WHEN SUPPLYING PERSONAL INFORMATION TO THE U.S. COAST GUARD.

1. **AUTHORITY:** SOLICITATION OF THIS INFORMATION IS AUTHORIZED BY 46 U.S.C., CHAPTERS 121 AND 125; 46 U.S.C. APP. 802 AND 883.
2. **THE PRINCIPAL PURPOSE** FOR WHICH THIS INFORMATION IS TO BE USED IS TO COLLECT USER FEES DIRECTLY ASSOCIATED WITH THE NATIONAL VESSEL DOCUMENTATION CENTER FOR WHICH APPLICATION FOR DOCUMENTATION IS MADE.
3. **DISCLOSURE** OF THE INFORMATION REQUESTED ON THIS FORM IS VOLUNTARY; HOWEVER, FAILURE TO PROVIDE THE INFORMATION REQUESTED WILL RESULT IN DENIAL OF THE APPLICATION FOR DOCUMENTATION, WHICH MAY PREVENT THE OWNER FROM OPERATING THE VESSEL(S) IN A SPECIFIED TRADE. AN AGENCY MAY NOT CONDUCT OR SPONSOR, AND A PERSON IS NOT REQUIRED TO RESPOND TO A COLLECTION OF INFORMATION UNLESS IT DISPLAYS A VALID OMB CONTROL NUMBER.

THE COAST GUARD ESTIMATES THAT THE AVERAGE BURDEN FOR THIS FORM IS 5 MINUTES. YOU MAY SUBMIT ANY COMMENTS CONCERNING THE ACCURACY OF THIS BURDEN ESTIMATE OR MAKE SUGGESTIONS FOR REDUCING THE BURDEN TO: U.S. COAST GUARD, NATIONAL VESSEL DOCUMENTATION CENTER, 792 T J JACKSON DRIVE, FALLING WATERS, WEST VIRGINIA 25419, OR OFFICE OF MANAGEMENT AND BUDGET, PAPERWORK REDUCTION PROJECT (1625-0027), WASHINGTON, DC 20503.

ATTACHMENT TO
ABSTRACT OF TITLE/CERTIFIED COD REQUEST

	OFFICIAL #	HULL IDENTIFICATION #	VESSEL NAME OR OWNER'S NAME	AT \$25.00	COD \$4.00	REC	COM
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