FIFTH SCHEDULE (Regulation 15)

APPLICATION FOR BOAT REGISTRATION AND IMPORT PERMIT

TO:	The Director Department of Water & Sanitation Private Bag 0029 Gaborone
I	(Print Full Names in Full)
Of (Ac	ldress)
	reby declare that I am the owner of the following boat and aquatic apparatus which I wish to er and import permanently/temporarily in Botswana.
Boat:	-
Type:	*Yacht/Dinghy/Rowing/Sailing/House/Canoe/Kayak/Raft/Barge/Inflatable/Sailboard/
	Catamaran/Punt/Amphibious/Air/Pontoon/Ferry/Other (specify)
Metho	d of Propulsion: *Wind-driven (sail)/hand-driven (Oars, paddles, punting pole)/Inboard Engine/Outboard engine/Towed/Other: (specify)
Dimen	sions: Length (from stem to stem)meters
	Width (greatest, beam)meters
	Height (greatest, depth of hull)meters
Shape	of hull: Conventional, double (Catamaran), other: (specify)
Mater	ials from which hull constructed: *Steel/ Fiberglass/ Aluminum/ Wooden/ Other (specify)
•••••	
Color	of hull exterior
Count	ry of origin: Manufacturer's name and address (if home-built, state maker's name and address)
Date o	f Manufacture
Comm	nercial description: Model, code or type
Aquat	ic Apparatus: (specify)
	e case of engineers, give manufactures name, model, engine no., hp. rating, etc. In the case of nets, y dimensions, mesh size. In the case of a trailer, specify registration number of the trailer)
If tem	porary import is required, state number of days

from(date)	towhen the boat or aquatic apparatus will (date)
be required in Botswar	1a:*
If a temporary import operated Botswana:*	permit is required, state purpose for which the boat or aquatic apparatus is to be
Recreation/Sport or co	mmercial fishing/Private or commercial transport or personnel or goods/Scientific/
Tourism/Commercial	demonstration/In transit to another country (specify)
Other (specify)	
State whether the boat	or aquatic apparatus are in new or used condition
If in used condition, sta	ate in which waters the boat and aquatic apparatus have operated during the past
six months	
	owledge and belief, has the boat or aquatic apparatus been operated in or any ted with any aquatic weeds prescribed in the Schedule to the Aquatic Weeds es/No.
If yes, give particulars	
means of transport and in which and when it is	st of zones and places of the inspection and treatment in the map appended, specify d route by which it is proposed to import the boat and aquatic apparatus, the zones is proposed to operate them and the places where and when they can be submitted timent bearing in mind that inspection/treatment can be carried out during normal
office hours	
correct in all respects	he particulars set forth above are, to the best of my knowledge and belief true and
•••••	(Signature)
Dated* *Delete whichever is in	thisday of1919applicable*
NOTE: - Fees will be r	equested if the application is approved. No money should be enclosed at this stage.
For use by Director of Import permit approve	Water & Sanitation only: ed/not approved.
Registration fee receive	ed on
Amount	Receipt No
Import permit No	
Boat Reference Mark.	
Interzonal Movement	Permit/s issued