NEW JERSEY STATE POLICE

Vessel Race Test Permit

STATION	DATE ISSUED / /	OPR FILE NUMBER

OWNER/OPERATOR	DATE OF BIRTH / /

ADDRESS	TELEPHONE NUMBER

ASSOCIATION NAME/NAME OF EVENT

VESSEL INFORMATION

Reg. No.	Make	Year	H.I.N.	Type	Length	Hull Color	Power	Hull Material

OPERATOR HAS PERMISSION TO RACE TEST ABOVE VESSEL ON *(Body of Water):*

BETWEEN *(Points of Location):*

FOR THE PERIOD FROM *(Time):*

☐ A.M. ☐ P.M. TO ☐ A.M. ☐ P.M.

ON: *Month - Day - Year*

REMARKS

Trooper's Signature

Badge Number

S.P. 796 (Rev. 12/03)

NOTE: THIS PERMIT MUST BE IN OPERATOR'S POSSESSION DURING TEST

White: File Copy
Yellow: Operator's Copy