

## How to Upload Slip Holder Documents by Smart Phone/Computer:

- See example of good documents attached for the 2020 Boating Season with important details highlighted in **Yellow**. Addresses on each must match the address we have on file at the Club.
- Registration must expire in 2021
- Insurance must expire after 5/01/2020 and indicate accident liability of > \$300,000

- 1) Select link at the bottom of the e-mail we send you to log in to your account. This link is unique to you and is like putting in your user name and password.
- 2) Select "Profile"
- 3) Select "Vessel (s)" in top right corner
- 4) Scroll down to "Insurance Upload" section and select the little "+" icon with the circle around it. This will bring up a menu allowing you to take a photo or video of your document, or upload one from your photo library or another directory on your phone. \*\*
- 5) Select "Take Photo". The phone turns on the camera and then you take a picture of the document making sure you get the whole document and that it is well-focused. Either select "Retake" or "Use Photo" depending if it's usable or not.
- 6) If you select "Use Photo" it will upload to that section. Please note you can upload a second photo to the same section if your Insurance spans 2 pages for required Name, Expiration Date, and Declarations.
- 7) Repeat the above steps for "Registration Upload"
- 8) **\*Important\*** Touch the green "Save" check mark in the lower right corner when uploads are done. Otherwise the upload will not attach to your profile.

\*\* The instructions are very similar when uploading documents from your computer. When you select the "+" button on your computer, a directory menu pops up like any other upload you do, and you select the document to upload. Upload the documents you need. They might look funny after the upload, but be assured it will appear after you hit the "Save" button in the lower right corner. After you save, go back to "Vessel (s)", and check that they are uploaded and legible.



STATE OF CONNECTICUT  
DEPARTMENT OF MOTOR VEHICLES  
On the web at [ct.gov/dmv](http://ct.gov/dmv)



# VESSEL REGISTRATION

**THIS CERTIFICATE TO BE KEPT ABOARD THE VESSEL WHILE IN USE**

|                               |                        |  |              |             |
|-------------------------------|------------------------|--|--------------|-------------|
| VESSEL NUMBER<br>CT3332BB     | EXP DATE<br>04/30/2021 | HULL IDENTIFICATION NUMBER<br>MRKR0085C606 | YEAR<br>2006 | H.P.<br>225 |
| MAKE<br>MAKO                  | MODEL<br>234           | HULL MATERIAL<br>PLASTIC                   |              |             |
| PROPULSION TYPE<br>PROPELLER  | FUEL<br>GASOLINE       | FEET<br>23                                 | INCH<br>4    |             |
| VESSEL TYPE<br>OPEN MOTORBOAT | COLOR<br>BLUE WHIT     | ENGINE DRIVE<br>OUT BOARD                  |              |             |
| USAGE<br>PLEASURE             | MSD<br>PORTABLE TOILET | DOB<br>04/03/1963                          |              |             |

STATE OF PRINCIPAL USE: CT  
RENEWAL CERTIFICATE OF NUMBER

SIGN HERE X *Thomas R. Lochtefeld*  
WRITTEN SIGNATURE(S) OF REGISTRANT(S)

Please sign this certificate in the space indicated for signature(s) of registrant(s) to attest to the information contained therein.

Operator shall render assistance to anyone in danger on the water as long as neither operator's vessel nor any individual aboard is endangered.

**LOCHTEFELD, THOMAS A**  
**2 HEDGE ROW**  
**DARIEN, CT 06820-5601**

**04/30/2021**                      **\$87.50**

Attach one of the decals to each side of the bow, 2 inches to the right of the last letter of the assigned boat number and in line with it. If documented (no assigned boat number), apply decal on each side of bow forward of midsection. In the event your vessel is sold or traded, the decals are to be removed or destroyed in such a manner that they are not usable.

**IF YOU CHANGE YOUR ADDRESS**, the DMV must be notified of the change within 15 days. You must provide both your new and old address when notifying the DMV of an address change. You must also print your new address on this certificate in the designated area on the reverse of this form, but do not return this certificate.

**LOCHTEFELD, THOMAS A**  
**2 HEDGE ROW**  
**DARIEN, CT 06820-5601**



**IF YOU SELL OR TRANSFER THIS VESSEL, OR IF THE VESSEL IS LOST, STOLEN OR ABANDONED**

- ➔ Complete the area on the reverse of this certificate and cancel your registration by returning the upper part of this certificate to any DMV branch office.
- ➔ Complete and detach BILL OF SALE below and present to new owner.

**BILL OF SALE (for use if you sell this vessel)**

|                               |                        |  |              |             |
|-------------------------------|------------------------|--|--------------|-------------|
| VESSEL NUMBER<br>CT3332BB     | EXP DATE<br>04/30/2021 | HULL IDENTIFICATION NUMBER<br>MRKR0085C606 | YEAR<br>2006 | H.P.<br>225 |
| MAKE<br>MAKO                  | MODEL<br>234           | HULL MATERIAL<br>PLASTIC                   |              |             |
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| USAGE<br>PLEASURE             | MSD<br>PORTABLE TOILET | DOB<br>04/03/1963                          |              |             |

|  |   |
|--|---|
| SELLING PRICE<br>\$  | THE OWNER (SELLER) OF THIS VESSEL DESCRIBED AT LEFT HEREBY TRANSFERS TO THE PURCHASER THE DESCRIBED VESSEL IN CONSIDERATION OF THE AMOUNT (SELLING PRICE) AT LEFT, RECEIPT HEREBY ACKNOWLEDGED. |
| NAME OF BUYER  |   |
| ADDRESS OF BUYER   |   |
| I DECLARE UNDER PENALTY OF FALSE STATEMENT THAT THE INFORMATION FURNISHED IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE |   |
| SIGNATURE OF SELLER(S)   | DATE  |

**LOCHTEFELD, THOMAS A**  
**2 HEDGE ROW**  
**DARIEN, CT 06820-5601**

P84492 REV 01/18/> >  
**TO NEW OWNER:** TO OBTAIN A REGISTRATION IN YOUR NAME, PRESENT THIS BILL OF SALE TO DMV



# TRAVELERS BOAT POLICY

The Travelers Home and Marine Insurance Company  
 One of The Travelers Property Casualty Companies  
 One Tower Square, Hartford, CT 06183

## Named Insured

**THOMAS LOCHTEFELD**  
**2 HEDGE ROW**  
**DARIEN, CT 06820-5601**

## Your Agent's Name and Address

TRAVELERS  
 P.O. BOX 59059  
 KNOXVILLE TN, 37950-9059

**Your Policy Number:** 979590451 830 1  
**Transaction Premium:** \$402.00  
**Total Policy Premium:** \$402.00

**For Policy Service Call:** 1-800-842-5075  
**For Claim Service Call:** 1-800-772-4482  
**For Billing Questions Call:** 1-800-550-7716

**Policy Period**  
 From: 05-19-19 To: **05-19-20 12:01 A.M.**  
 Standard Time at the Residence Premises

**Transaction Type** Renewal  
**Transaction Number** 19

## Boat Description

| # | Year | Length | Manufacturer | Model              | HP   | Hull ID      |
|---|------|--------|--------------|--------------------|------|--------------|
| 1 | 2006 | 23' 6" | MAKO         | 2340 CENTER CONSOL | 0225 | MRKR0085C606 |

## Outboard Motor Description

| # | Year | Horsepower | Manufacturer | Model       | ID Number |
|---|------|------------|--------------|-------------|-----------|
| 1 | 2005 | 0225       | MERCURY      | XXL OPTIMAX | 1B254569  |

| Coverages                                | Amount of Insurance/<br>Limit of Liability | Deductible | Premium   |
|--|--|------------|-----------|
| <b>Section Three</b>                     |  |            |           |
| Boat and Auxiliary<br>Equipment Coverage | \$ 27,500                                  | \$ 1,035   | \$ 347.00 |
| Outboard Motor                           | \$ 7,000                                   |            |           |
| <b>Section Four</b>                      |  |            |           |
| Personal Property                        | \$ 1,000                                   | \$ 250     | Included  |
| <b>Section Five</b>                      |  |            |           |
| Commercial Towing<br>and Assistance      | \$ 500                                     | None       | Included  |
| <b>Section Six</b>                       |  |            |           |
| Watercraft Liability                     | \$ 300,000                                 | None       | \$ 55.00  |
| Accidental Fuel Spill<br>Coverage        | Per Policy Language                        | None       | Included  |
| <b>Section Seven</b>                     |  |            |           |
| Medical Payments                         | \$ 2,000                                   | None       | Included  |
| <b>Section Eight</b>                     |  |            |           |
| Uninsured Boater                         | \$ 300,000                                 | None       | Included  |