



## DOT - MARITIME ADMINISTRATION

DOT Maritime Administration:  
SALE OF VESSEL - X4303 - 5101

### Individual Form

*\*Required Field*

\*DOT - MARAD Operator Fund:

\*Name of Vessels:

\*Name of Purchase/Sale:

\*Contact Person's First Name:

Contact Person's Middle Initial:

\*Contact Person's Last Name:

\*Organization Phone Number:

Ext:

Federal Tax ID:

Comment (description of  
payment, etc):

\*Payment Amount:

Submit Data