2026 CHARTER VESSEL LICENSE APPLICATION INSTRUCTIONS

Return to: OSMB -Charter Desk For questions, call or email: PO Box 14145 (503) 378-2633

Salem OR 97309 outfitter.guide@boat.oregon.gov boat.oregon.gov



Note: Charter licenses are issued <u>only</u> to USCG inspected vessels carrying <u>7+ passengers</u> for hire. "6-pack" or UPV vessel operators must use the Outfitter Guide Application. An "optional" charter registration is available to uninspected passenger vessels, provided they are currently listed under a registered Outfitter Guide and meet all the Oregon Charter Vessel requirements in ORS 830.430-465 and ORS 250-015. Please allow at least 10 business days for processing. Remember, if your charter license has expired, you may not advertise or solicit charter activities until your Charter Vessel License renewal has been reissued.

Applicant Requirements:

- ✓ A completed Application
- ✓ Certificate of Insurance
- ✓ \$5000 **Surety Bond** (if taking deposits in advance over \$100/person)
- ✓ US Coast Guard Certificate of Inspection
- ✓ US Coast Guard Operator License for all operators in federally navigable waters

Non-Refundable Fee					
Oregon Registered Boat	\$50/ 1 yr, \$100/ 2 yrs	California Resident	\$1388/ 1 yr, \$2776 2 yrs		
USCG Documented Boat	\$100/ 1 yr, \$200/ 2 yrs	Alaska Resident	\$100/ 1 yr, \$200/ 2 yrs		
Washington Resident	\$865/ 1 yr, \$1690/ 2 yrs	Elsewhere	\$100/ 1 yr, \$200/ 2 yrs		

✓ Make checks payable to the Oregon State Marine Board (OSMB).

Please Note:

Liability Insurance

Proof of liability insurance covering occurrences by the charter vessel operator and business and their employees which result in bodily injury or property damage must be current and on file at the Marine Board. The Certificate of Insurance must cover not less than \$500,000 combined single limit per occurrence general liability insurance. The certificate must match the name and/or business name on the application, list the Marine Board as the certificate holder, list the descriptions of operations (activities) covered, and the vessel certificate of number or USCG official number.

US Coast Guard Certificate of Inspection

A copy of the current annual United States Coast Guard Certificate of Inspection (COI) is required for vessels carrying 7 or more passengers in federally navigable waterways. Charter boats operating on sole-state water require a "Certificate of Inspection" by a certified marine surveyor consistent with USCG standards for a passenger vessel. A current certificate must be on file at our office at all times. A full list of navigable waters may be found at http://www.uscg.mil/d13/docs/CG Navigable Waterways.pdf

United States Coast Guard (USCG) Operators License

A valid USCG Operators License must be carried by any operator of the vessel and be endorsed for the area of operation. A copy of the USCG Operators License must be submitted with the application.

Surety Bond

A Surety Bond or Letter of Credit issued by a financial institution in the amount of \$5,000 naming the Oregon State Marine Board must be submitted for any charter vessel owner or operator who accepts deposits of more than \$100 per person. A deposit is any advance payment.

Equipment -See OAR's 250-015-0010 through 250-015-0035

The adopted Code of Federal Regulations provides technical detail and specifications for safety equipment on certain passenger carrying vessels. US Coast Guard inspected Charter Boats will carry equipment as defined on the USCG Certificate of Inspection.

An Optional or Charter Boats operating on sole-state waters will carry equipment as defined in OAR 250 Division 015.

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	■ 1 Year	☐ 2 Years
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2026 CHARTER LICENSE APPLICATION

Optional Charter?

☐ Yes ☐ No

Business Information: Business Corporations and Assumed Business Names must be currently registered with Oregon SOS Business Registry.						
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Corporation/Partnership/Other Business Name: (INC, LLC, LLP, etc.)						
Assumed Business Name(s): (ABN or dba)						
Mailing Address:			City	State	ZIP	
Physical Address:			City	State	ZIP	
Phone:		E-mail:				
Alternate		Webpage				
Phone: Applicant Information: (Enter address if different address)	erent from above)	Address:				
Applicant Legal Name: First:		MI:	Last:		Suffix:	
Mailing			City	State	ZIP	
Address: Physical			City	State	ZIP	
Address: Phone:		E-mail:				
Alternate Phone:		Webpage Address:				
Date of Birth: (mm/dd/yyyy)	Driver's License#:		State Issued:	USCG License Document No:		
Liability Insurance Information: (A copy o	f the certificate mi	ust be faxed	, mailed or emailed)			
Insurance Agent & Company:		Policy Nu	mber:	Expiration Date: (mm/dd/yyyy)		
Activity Covered:						
Insurance Provider Address/City/State/Zip				Insurance Provider Phone:		
Surety Bond: \$5000 Surety Bond is required	if vou or vour ag	ent accept a	anv mo n ev over \$10	00/pp in advance of service	 ce.	
Do you or your agent accept deposits o						
Service(s) Provided:	Sightseeing	Other (I	ist)			
Area of Operation: Mark all that apply. This	is for information	al use only	and is not a restricti	on.		
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□ Coos-Coquille	İ	LCR	Districts	Counties		
□ Deschutes□ John Day		North Coast	2)	UMATILLA	to have	
□ Klamath		GILLAMOOK	WASII. RIVER	Umatilla	Wallowa	
□ La Grande		Pacific Ocean	oast Range	SI JERMAN GILLIAM MORROW UN	ON WALLOWA	
□ Lower Columbia River		F- 2 "	Cascade Unit WASCO		- Janes	
☐ Mid-Coast		1 500	UK MARION E	John Day	a Grande BAKER	
☐ Mid-Columbia☐ Mid-Willamette		Mid-Coast	Mid Willamette LINN JEFFERSON	WI EELER	{	
□ North Coast		BAN	The state of the s	GRANT	The same	
□ NWWD – Coast Range		Jan 6	Upper Willamette	Deschutes	§	
□ NWWD - Cascade Unit		DOUGLAS	DESCRIUTES		[]	
□ Pacific Ocean		h &	Lung (annum of		
□ South Coast□ Southeast		Coos- Coquille	Jmpqua	Southeast		
□ Umatilla		CURRY	7	ly ly		
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□ Upper Rogue		South Coast Upper	Rogue KLAMATII	LAKE &		
□ Upper Willamette□ Wallowa	L	JOSEPHINE	~~~	}		
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					ally assist passengers of the charter	
boat with ar	gling, sightseeing or other r	recreational activities.	(Attach an addition	onal copy of this page if ne	ecessary.)	
Full Legal Na	me:	Date of Birth:	Address:		USCGL Doc#:	
Full Legal Na	me:	Date of Birth:	Address:		USCGL Doc#:	
Full Legal Na	me:	Date of Birth:	Address:		USCGL Doc# if:	
Full Legal Na	me:	Date of Birth:	Address:		USCGL Doc# if:	
Full Legal Na	me:	Date of Birth:	Address:		USCGL Doc# if:	
Vessel Inf	ormation:					
Vessel Name) :	Vessel Length:	Hull N	laterial:	State Registration No or USCG No:	
Number of P (excluding c		Hailing Port:		Distance from Port:	Less than 20 miles from po More than 20 miles from po Inland Lakes or Rivers	
Owner/Op	erator/Employee Disclo	Sure: Your response	es can have lega	ıl consequences – pleas		
Yes No	Any criminal offense or	violation of ORS 47 e adopted pursuant	7, fire preventi to this chapte	on laws and/or ORS or ORS chapter 477	boat been convicted of: 496, 497, 498, 501, 506, 508, 5 7, 496, 497, 498, 501, 506, 508, d welfare of the public?	
	Any criminal offense or				,	
	Had a US Coast Guard	operator license rev	voked, suspen	ded or denied?		
	Been denied the right to apply for a charter license, permit or certificate by another state or by an agency of the United States?					е
	agency of the United St	ates?			elled by another state or by an	
	is are marked "Yes", ex court date. Use an additi				gency or court, and outcome or cable documentation.	
I, the undersigned, do hereby make application for license to operate a charter vessel in Oregon. I certify that all information provided on this application is true and correct to the best of my knowledge, and further, that I will maintain in full force and effect, the required insurance when engaged in carrying passengers for hire. If I accept deposits in excess of \$100 per person, I will maintain a \$5,000 bond. I certify that the vessel complies with all applicable provisions of Oregon Revised Statutes 830.430 through 830.460 and Oregon Administrative Rules, Division 250-15 as applicable.						
APPLICAN	IT NAME: (Printed)				· · · · · · · · · · · · · · · · · · ·	
APPLICANT SIGNATURE:					DATE:	
			OSMB use only-			
Insurance ex		Surety Bond:	Y N	Fees rcvd: \$	#	
USCG License Certificate of	Inspection exp:	Business Name Date Issued:	e Reg: Y N	Decal Number issued: 1 yr / 2 yrs Ex	xp: Initials:	