

City of Seward
 Harbor Department
 P.O. Box 167
 Seward, AK 99664
 (907) 224-3138

**2019 PASSENGER TRANSIT FEE
 VESSEL REPORT FORM**



Account # _____

MONTH/YEAR: _____

VESSEL NAME: _____

BUSINESS NAME: _____

If this is your final return-check here

- Indicate reason below
 Business Sold
 Business Closed

REQUEST TO PRE-FILE

Zero sales from (mo/dt/yr) to (mo/dt/yr)
 _____ / _____ / _____ to _____ / _____ / _____
 (MAXIMUM 1 YEAR)

Date	# of Passengers	Date	# of Passengers	Date	# of Passengers
1	_____	11	_____	21	_____
2	_____	12	_____	22	_____
3	_____	13	_____	23	_____
4	_____	14	_____	24	_____
5	_____	15	_____	25	_____
6	_____	16	_____	26	_____
7	_____	17	_____	27	_____
8	_____	18	_____	28	_____
9	_____	19	_____	29	_____
10	_____	20	_____	30	_____
				31	_____

TOTAL NUMBER OF PASSENGERS _____

OF PASSENGERS X \$3.50 _____

INTEREST/OTHER _____

PENALTY FOR LATE REMITTANCE _____

TOTAL DUE

Date _____

Printed Name _____

Signature of
 Owner/Agent _____

I declare that this return (including any accompanying statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

Return this completed form and total fee by the last day of the following month to the Harbor Department. A 10% penalty and a \$25 missed filing fee per boat will be included for all payments made after the due date.