
COWICHAN WOODEN BOAT SOCIETY

BOAT DONATION FORM

Donor Information

Name: _____

Address: _____

Phone: _____ Email: _____

Vessel Information

Vessel Name: _____ Location: _____

Registered Vessel #: _____ or Licence #: _____

Year Built: _____ Make: _____ Model: _____

Hull Materials & Condition: _____

Motor: _____ Sail: _____ Rowing: _____ Paddle: _____

Length: _____ Width: _____ Depth: _____ Mast Height: _____

Engine Make: _____ HP: _____

Estimated Value: Replacement: _____ Market: _____ Insurance: _____

Date of last survey: _____ Surveyor: _____

Brief History/ Historical Significance of Vessel:

Additional Comments:

*Please attach photos and a copy of the last marine survey.

Completed forms can be dropped off, emailed or mailed to:

cwbs@classicboats.org

Box 22, 1761 Cowichan Bay Road

Cowichan Bay, BC, V0R 1N0

