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

## 2024 PASSENGER FEE VESSEL REPORT FORM



Account #  MONTH:  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
				1	o	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 PASSE	NGERS								
# OF PASSENGERS X \$3.50				Date						
MISSED FILING FEE (\$25 per boat)				Printed I	Name					
				Signature of						
10% Penalty (if late)				Owner/A	gent					
TOTAL DUE				has been e	nat this return (including any accompanying statemens examined by me and to the best of my knowledge and true, correct and complete return.	)				

Return this completed form and total fee by the last day of the following month to the Harbor Department. If filed after the deadline, a 10% penalty and a \$25 missed filing fee per boat must be included in the payment.