



NEW YORK SAFE BOATING PROGRAM
MARINE SERVICES BUREAU
RENEWAL OF COMMERCIAL ORGANIZATION CERTIFICATE



This is your annual renewal notice to continue as a commercial organization in the New York Safe Boating program. Please make all corrections and additions on this form.

Company ID: _____

Company Name: _____

Address: _____

Phone: _____

Fax: _____

Contact Name & Title: _____

Owner's Name: _____

Contact Email (req'd): _____

Company Website: _____

Affiliated Instructors

By signing below, I acknowledge that the information on this form is correct and that I am requesting the renewal of the above mentioned commercial organization. I have made any necessary corrections on this form for missing or incorrect information.

Owner's Signature _____ Date _____

Fax: 518-408-1030
E-mail: boating@nysparks.gov

**Please make any changes to this form.
You must return this form no later than December 31, 2014 to:
NYS Parks, Marine Services Bureau, Albany, NY 12238**