



TOWN OF YARMOUTH



DEPARTMENT OF COMMUNITY SERVICES

NATURAL RESOURCES DIVISION

424 ROUTE 28, 2ND FLOOR WEST YARMOUTH MASSACHUSETTS 02673-2844
Telephone (508) 760-4800 – Fax (508) 760-4805

OFF-SEASON COMMERCIAL SLIP APPLICATION

Date: _____

LOCATION REQUESTED: _____ PACKET LANDING MARINA

BOAT NAME: _____ REGISTRATION/DOCUMENTATION#: _____

OVERALL LENGTH: _____ W/PULPIT: _____ W/SWIM PLATFORM: _____

BEAM WIDTH: _____ POWER/SAIL: _____ DRAFT: _____

YEAR/MAKE/MODEL OF BOAT: _____

NOTE: A copy of your current registration/documentation must be included with application.

NAME: _____
Last First M.I. /Drivers Lic. #

LOCAL ADDRESS: _____
P.O. Box or Street City/Town State/Zip

OTHER ADDRESS: _____
P.O. Box or Street City/Town State/Zip

TELEPHONE #1:() _____ #2:() _____

CELL PHONE #:() _____ EMAIL _____

Off-Season slip fee is \$150.00 per month from Nov. 1st to May 1st. All Off-Season slip holders must remove their boats prior to May 1st. Payment must be received in full prior to renting slip by either personal check, bank check or money order. No cash or credit cards will be accepted.

ALL slips have a 38' overall boat length limit for Packet Landing Marina.

In cases of a threat of severe storms, the Natural Resources Director or designee may require immediate removal of all vessels. Vessels may not return until approval is given by the Director or designee.

The Harbormaster /Director/or designee may have the transient vessel hauled and stored at the owners expense if payment is not received prior to docking or after such period previously paid for has expired.

*****FOR OFFICE USE ONLY*****

DATE RECEIVED: _____ RECEIVED BY: _____

AMOUNT PAID: \$ _____ METHOD OF PAYMENT: _____

EFFECTIVE DATE: _____ PLACEMENT #: _____

REMOVAL DATE: _____ REASON: _____

HARBORMASTER/FIELD SUPERVISOR