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

MARINA WAITLIST SLIP APPLICATION

Date:_____

LOCATION REQUESTED:_____**PACKET LANDING MARINA (COMMERCIAL)**_____

BOAT NAME: _____

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

BEAM WIDTH:_____ POWER/SAIL:_____

YEAR/MAKE/MODEL OF BOAT:_____

REGISTRATION/DOCUMENTATION#:_____

NAME:_____
Last First M.I.

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: _____

The Slip Waitlist Application Fee is $30.00 for the first year and $15.00 each year after to maintain the position on the list. Payment shall be by personal check, bank check or money order. No cash or credit cards will be accepted. PLEASE CONTACT THE DIVISION OF NATURAL RESOURCES AT (508) 760-4800 IF YOU REQUIRE FURTHER INFORMATION.

A **SEPARATE FORM** MUST BE SUBMITTED FOR EACH REQUEST.

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

DATE RECEIVED:_____ RECEIVED BY:_____

AMOUNT PAID: $_____ METHOD OF PAYMENT:_____

EFFECTIVE DATE:_____ PLACEMENT #: _____

REMOVAL DATE: _____ DATE ISSUED: _____

REASON:_____ ISSUED BY: _____
Harbormaster/Director/Field Supervisor