## Delta Marina Yacht Harbor

## **MOORAGE APPLICATION**

100 Marina Drive, Rio Vista, CA 94571 707-374-2315 fax 707-374-6471 email: monica@deltamarina.com / or natalie@deltamarina.com

APPLICANT INFORMATION (MUST BE REGISTERED OWNER OF BOAT)  COPY OF REGISTRATION WILL BE REQUIRED IF & AT TIME MOORAGE CONTRACT IS EXECUTED					
Name:		Email:			
Date of birth:		DL#			
Current address:					
City:	State:		ZIP Code:		
Home Phone:	Cell Phone:				
EMPLOYMENT INFORMATION					
Current employer:					
Employer address:				Phone:	
City:	State:			ZIP Code:	
BOAT DESCRIPTION					
Manufacture:		Year:		NT PHOTO REQUI	RED IF BOAT IS OVER
Model/Type:	Length:	Beam/width: Color:			
Operational Motor: Yes No		Operational Holding Tank: (if applicable)			
Currently Moored at:		How long:			
Previously Moored at:		How long:			
Trailer Manufacture:	License Plate:		Serial Number:		
HYDRO HOIST SLIP – IF APPLICABLE					
Weight:					
POTENTIAL OTHER BOAT USERS					
Name:	Relation:			Phone:	
Name:	Relation:		Phone:		
Name:	Relation:			Phone:	
\$500,000 LIABILITY POLICY W	VILL BE REQUIRED IF & A	T TIME MOOR	AGE CONTR	ACT IS EXECUTED	
Name of Carrier:		Phone:			
BY PROVIDING THE ABOVE INFORMATION, I GIVE MY PERMISSION FOR, DELTA MARINA YACHT HARBOR, TO CONTACT ALL THE PARTIES AND TO VERIFY ALL THIS INFORMATION. I UNDERSTAND THAT THIS IN ONLY AN APPLICATION AND NOT A CONTRACT.					

Date

Signature of applicant