

HOLIDAY POINT MARINA, LLC

PO BOX 595
EDGEWATER, MD 21037
OFFICE: 410.956.2208 FAX: 410.798.7647
WWW.HOLIDAYPOINTMARINA

Spring Checklist 2022

DATE: _____ E-MAIL: _____
OWNER'S NAME: _____ PHONE: WORK _____
ADDRESS: _____ HOME or CELL _____
CITY: _____ STATE: _____ ZIP: _____
MFG OF BOAT: _____ LOA: _____ BEAM: _____ DRAFT: _____ REG# _____
SLIP#: _____ TRANSIENT _____ : BOAT NAME: _____
KEY LOCATION: OFFICE: _____ LOCATION ON BOAT: _____ COMBO _____

CHECK DESCRIPTION OF WORK TO BE COMPLETED ON YOUR BOAT BY HPM

- _____ LAUNCH WINTER STORED BOAT
- _____ HAUL BOAT CLEAN BOTTOM AND RUNNING GEAR (FOR BOATS IN THE WATER)
- _____ REMOVE AND RECYCLE SHRINK WRAP: _____ INSTALL CANVAS (if necessary): _____
- _____ PREPARE & REPAINT BOTTOM OF BOAT *** COLOR _____ ** BRAND NAME _____
- _____ REPLACE ZINCS AND SPRAY RUNNING GEAR WITH BARNACLE BARRIER
- _____ CLEAN & WAX HULLSIDES OF BOAT (topside wax subject to available labor)
- _____ INSTALL WINTER STORED BATTERIES # _____ STORED
- _____ DEWINTERIZE ENGINE(S)
- _____ CHANGE FUEL FILTERS(S)
- _____ CHANGE ENGINE OIL & FILTER(S)
- _____ DEWINTERIZE FRESHWATER SYSTEM _____ HOT WATER HEATER _____ HEAD _____ GENSET _____
- _____ TUNE ENGINE(S): BRAND NAME: _____ CYL: _____ HP: _____
- _____ FIBERGLASS REPAIR AND CARPENTRY WORK: (PROVIDE DETAILS)
- _____ REFINISH TEAK SURFACES (PROVIDE DETAILS)
- _____ REMOVE NAME AND/OR HAVE NEW NAME APPLIED
- _____ USE THE BACK SIDE OF SHEET FOR SPECIAL INSTRUCTIONS OR ADDITIONAL WORK

I HEREBY AUTHORIZE THE ABOVE REPAIR WORK TO BE DONE TO INCLUDE NECESSARY MATERIALS SUPPLIED BY THE MARINA

OWNER'S SIGNATURE: _____ REQUESTED COMPLETION/LAUNCH DATE: _____

Customer Name: _____

Dry Location: _____ W/O #: _____