

Customer Name: ____

HOLIDAY POINT MARINA, LLC 3774 Beach Drive Blvd. P. O. BOX 595 **EDGEWATER, MD 21037** (410) 956-2208 www.holidaypointmarina.com

WINTER CHECKLIST 2024

Owner's Name:	Toda	Today's Date:		
Address:	City:	State:	Zip:	
Phone #:	Email:			
Boat Name or Registration #:				
Boat Make / Model:	Length	n:Beam:	Draft:	
HPM Slip #:Transient:	Engine Info:			
Key Location or Lock Combination:				
*All winterization services will be bill	n services to be performed by Hed at prevailing labor rates plus materials	. Mechanical work rate i		
· · · · · · · · · · · · · · · · · · ·	# of tanks *No char		sted	
, ,	Inboard			
Change engine oil an				
	Diesel Gas			
Winterize generator	Change gener	ator oil and filter		
Change I/O lube or sa	ail drive lube# of ou	utdrives		
Winterize freshwater	system			
Winterize Head(s)	#			
Winterize air condition	n system(s)#			
Remove sails (furled)	jibs must be removed)			
Shrink wrap	with door			
Other work to be com	pleted. Please detail below:			
authorize HOLIDAY POINT MARINA LLC, to Holiday Point Marina.	perform the above services and unde	erstand that all material	ls will be supplied	
Owner's Signature:	Request	ted Haul Date:		