



Dry Storage Rental Application

Name: _____ Date: _____

Phone Number: _____

Email: _____

Boat Make & Model: _____

Length: _____ Beam: _____

Length of rental requested: Semi-Annual Annual

Move-in Date Requested: _____

Please attach to this application a recent picture of your vessel, along with proof of insurance & proof of ownership. (I.e. current boat title/registration) is required for approval. *All vessels stored at the marina must be in sea-worthy condition.*

(Marina to fill out bottom portion)

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- Received recent picture of vessel
 - Received proof of insurance received
 - Received proof of ownership

Tenant is: Approved Denied

Slip: _____

Comments: