

**SLIP / MOORING RENEWAL APPLICATION FOR THE GUILFORD TOWN MARINA**  
 A CHECK PAYABLE TO: "THE TOWN OF GUILFORD" IS RQUIRED WITH THIS APPLICATION

NAME: LAST, FIRST, MI \_\_\_\_\_ HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

ADDRESS: NUMBER, STREET, P.O. BOX \_\_\_\_\_ TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

RESIDENT ( ) TAXPAYER ( ) NONRESIDENT ( ) EMAIL \_\_\_\_\_

SAFE BOATERS CERTIFICATE NUMBER \_\_\_\_\_ COMMERCIAL STATE TAX EXEMPT NUMBER (If applicable) \_\_\_\_\_

LIABILITY INSURANCE COMPANY \_\_\_\_\_ POLICY NUMBER \_\_\_\_\_ AMOUNT \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_  
 (\$300,000 MINIMUM)

**BOAT INFORMATION:** POWER ( ) SAIL ( ) **VESSEL NAME** \_\_\_\_\_

YEAR \_\_\_\_\_ MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ CT REGISTRATION NUMBER \_\_\_\_\_

EXACT LENGTH \_\_\_\_\_ (INCLUDING ALL EXTENSIONS, E.G. PLATFORMS, PULPITS, DRIVES, PROPS, ETC.)

BEAM \_\_\_\_\_ DRAFT \_\_\_\_\_

ENGINE HP \_\_\_\_\_ INBOARD ( ) OUTBOARD ( ) I/O ( ) SEADRIIVE ( ) NUMBER OF BATTERIES \_\_\_\_\_

FUEL: GAS ( ) DIESEL ( ) FUEL CAPACITY (gallons) \_\_\_\_\_

SANITATION DEVICE: NONE ( ) PORTABLE ( ) HOLDING TANK: TYPE I ( ) TYPE II ( ) TYPE III ( )

WASTE HOLDING TANK CAPACITY (gallons) \_\_\_\_\_

SHORE POWER TO BE USED ( ) WHEELCHAIR ACCESS REQUIRED ( )

I (we) hereby certify that this boat is owned by me (us), that the information given by me (us) in this application is complete and accurate and that any misrepresentation by me (us) is cause for forfeiture of mooring privileges and priorities and/or additional fees. I (we) hereby grant permission to the Marina Staff to board my (our) boat for measurement, security or other purposes in compliance with the Marina Rules and Regulations. I (we) hereby agree that the Town of Guilford and the Marina Commission shall in no way be held responsible by me (us) or my (our) agents for any claims for compensation for personal injury, bodily injury, property damage and death to me (us), my (our) craft or its equipment due to storm, cold, ice, fire, sinking, neglect, vandalism, collision or any other cause, even if caused by the negligence of the Town of Guilford, the Guilford Marina Commission, its employees, agents, board members or assigns. I (we) agree to hold the Town of Guilford and the Guilford Marina Commission, its employees, agents, board members and assigns harmless and to defend and indemnify them from and against any and all claims which may be asserted against either or both of them because of any personal injury, bodily injury, property damage and death, or loss or damage to or by my (our) vessel.

***I (we) have read the Marina Rules and Regulations regarding the use of Town boating and parking facilities and the Guilford Town Marina Severe Weather Plan and I (we) shall comply with and be bound by them, including but not limited to, renewing registration and insurance as required to maintain compliance with the rules. (NOTE: A signature is required for each person listed on the vessel's Connecticut State Registration.)***

SIGNATURE(S) \_\_\_\_\_

DATE \_\_\_\_\_

\_\_\_\_\_

DATE \_\_\_\_\_

**FOR COMMISSION USE ONLY:**

DATE/TIME RECEIVED \_\_\_\_\_

INITIALS \_\_\_\_\_

INSURANCE PROOF ( ) REGISTRATION PROOF ( )

INITIALS \_\_\_\_\_

REC'D SLIP PAYMENT \$ \_\_\_\_\_ TAX \$ \_\_\_\_\_ SHORE POWER \$ \_\_\_\_\_ TOTAL \$ \_\_\_\_\_