

COMMERCIAL SLIP WAITING LIST APPLICATION



Sandwich Marina
 12 Freezer Road
 PO Box 1393
 Sandwich, MA 02563

Shaded areas to be fill out by Harbormaster office only.

Original Application Date/Time

****\$10.00** for new applicants.
ANNUAL RENEWAL FEE: \$20.00

Name:	
Home Address Street, City, State, Zip Code	Home Phone
Email Address (Required)	Mobile Phone
Secondary Contact (other than numbers given above)	Contact Number

<i>Full Slip Categories. Check One Only</i>	
24 foot and less	<input type="checkbox"/>
25 to 30 foot	<input type="checkbox"/>
31 to 40 foot	<input type="checkbox"/>
41 to 50 foot	<input type="checkbox"/>
51 foot and over	<input type="checkbox"/>

NOTES

1. Please initial or place "X" in the box to indicating appropriate Wait List Category you desire to be included to.

****MAKE CHECKS PAYABLE TO THE TOWN OF SANDWICH OR YOU CAN PAY BY CREDIT CARD BY CALLING THE MARINA OFFICE AT (508) 833-0808**

Please Note: It is the applicant's responsibility to notify the Marina Office of any changes (i.e. mailing address, phone number, email address, etc), failure to do so may result in non receipt of the annual notice for renewal. The Marina is not liable for lost mail and it is the applicant's responsibility to contact the Marina if they have not received the annual renewal by March 1. Failure to respond/submit payment to the annual renewal will result in removal from the WAITLIST. No appeals will be granted upon removal. RETURNED CHECKS WILL BE CHARGED AN ADDITIONAL \$20.00. This application must be completed in FULL in order to be accepted by the Harbormaster.

I hereby request my name to be added to the Sandwich Marina Commercial WAITLIST as stated above. I understand that slips will be offered on the basis of the application date in which this document was received by the Marina office personnel. Slips will be assigned at the discretion of the Harbormaster and the appropriate wait date. I further agree to abide by the rules and regulations of the Sandwich Marina once awarded a slip.

Date: _____

Applicant's Signature: _____

Date: _____

Authorized Signature: _____