

TOWN OF HENDERSON MOORING APPLICATION

(See Rules and Regulations for fee schedule)

PERSONAL

Name _____ Date _____ Mooring# _____
Mailing Address _____ Phone Home _____
_____ Phone Work _____
_____ Cell Phone # _____
E-Mail Address (required) _____

VESSEL

Vessel Name _____ Make _____
Length _____ Type _____
Weight _____ Year _____
Hp _____ Color _____
Draft _____ Width _____
Auxiliary Power _____ Model _____
Registration# _____

MOORING

Ground Tackle:
Anchor Type _____ Weight _____
Water Depth at site _____ Year installed _____
Chain: size _____ Length _____
Swivel sizes _____ Shackle Sizes _____
Buoy: Diameter _____ Color _____
No. _____ Number of Painter _____ Size _____
Last Day Underwater Inspected _____ Next inspection due _____
Inspecting Divers Name _____

EMERGENCY

Name of a Local Person to Be Notified In Case Of Emergency:

Name _____ Work Phone _____
Home Phone _____ Cell Phone _____
Local 911 Address _____

MISCELLANEOUS

Who Will Install Mooring _____ Phone # _____
Mooring Release Signed _____
Your Insurance Company _____ Policy # _____

CERTIFICATION:

I hereby certify that the above information is current, correct and that I am the owner of both the vessel and ground tackle described above. I have received a copy of the Special Anchorage Area Law, Rules, Regulations and diver inspection form. I understand that any violation of the Special Anchorage Area Law or any of the Rules and Regulations attached to the law shall be grounds for revoking my mooring permit.

I further understand and consent that the Town Board may from time to time amend Local Law 73 of the Town of Henderson and agree to any and all such amendments.

Applicant signature

Date