

Town of Eastham

Harbormasters Office
555 Old Orchard Road
Eastham, MA. 02642



Office Use Only:
Date: _____
Sticker: _____
Tags: _____/_____

508 240-5972
FAX 240-6687
natres@eastham-ma.gov

Eastham Mooring Permit Agreement

Pursuant to the Eastham Mooring Regulations adopted
by the Eastham Board of Selectmen on September 6th 2011

To obtain an Eastham Mooring Permit, complete the below agreement and **sign it**. Then submit together with a **valid copy of the vessel registration** and a **check** made payable to **“Town of Eastham”** in the amount required under vessel length table which can be found in the Mooring Regulations. Submission of this form and payment does not guarantee issuance of a mooring permit.

- 1) LAST NAME: _____ FIRST: _____ MI: _____
- 2) LOCAL ADDRESS: _____
TOWN: _____ STATE: _____ ZIP CODE: _____
- 3) PERMANENT ADDRESS/MAILING ADDRESS: _____
(IF DIFFERENT)
TOWN: _____ STATE: _____ ZIP CODE: _____
- 4) PHONE NUMBERS: HOME: _____ WORK: _____
CELL: _____ OTHER: _____
- 5) EMAIL: _____
- 6) TYPE: ___ SAIL / ___ KAYAK / ___ OUTBOARD / ___ INBOARD / ___ I/O / ___ FLOAT
- 7) MAKE: _____ MODEL: _____ LENGTH: _____ COLOR _____
- 8) BOAT REGISTRATION NUMBER: _____ EXPIRATION DATE: _____
- 9) OTHER VESSEL INFO (i.e.- HULL I.D./ SERIAL #/ MFR #): _____
- 10) MOORING LOCATION (Nearest Access): _____
- 11) MUSHROOM INFORMATION (Weight/ Buoy Color): _____
- 12) ENGINE (Make/ Horsepower/ Year): _____

Waiver of Responsibility

In consideration of this application being accepted I waive and release any and all rights and claims for personal damages against the Harbormaster and the Town of Eastham. I hereby absolve the Harbormaster and his officers from all responsibilities of liability to myself and others or damage to any vessel, equipment, or property. I certify that the information supplied above is the best of my knowledge and belief.

Signature

Date (MM/DD/YYYY)