

# Application for Mooring Wait List Town of Provincetown



Check one:  New  Renewal

Date of Original Request: \_\_\_\_\_

Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_  
*P.O. Box # or Street Town State Zip*

Local Address: \_\_\_\_\_  
*(if different) Street Town State Zip*

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Vessel Name: \_\_\_\_\_ Type: Power  Sail  Commercial

Use: Pleasure  Commercial  Color: \_\_\_\_\_ Length: \_\_\_\_\_ Hull Year: \_\_\_\_\_

Minimum Depth Required: \_\_\_\_\_

Registration or Documentation #: \_\_\_\_\_

*I hereby certify that the above information is true and complete. I understand that any false statements made herein shall be grounds for revocation of any mooring permits application.*

Signature of Applicant/Owner \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE RETURN FORM TO HARBORMASTER'S OFFICE WITH \$10  
PAYMENT**

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*To be filled in by Provincetown Harbormaster:*

Received by: \_\_\_\_\_

Date: \_\_\_\_\_

Payment by: Check (#) \_\_\_\_\_ Cash  Date Paid \_\_\_\_\_

Amount: \_\_\_\_\_