

2577 West Sequim Bay Rd. Sequim WA 98382 Phone 360-417-3440 Fax 360-417-3442

www.portofpa.com

WAITING LIST APPLICATION

| Name: Last: First | | | | | |
|---|--|---------------------------------------|----------------------|----------------|--|
| Mailing Address: | | | | | |
| City: | Sta | State: | | Zip: | |
| Phone: Home: | Cell: | E-Mail: | | | |
| Make and Model of Bo | at: | LOA | Beam | Draft | |
| Registration or Docum | entation Number: | Boat I | Name: | | |
| | an accurate (Extreme Overalosts, engines at full extension | | - | - | |
| berth is accepted. If the 2. An annual, non-refund | r placement on the berth wa berth is rejected, the deposit lable waiting list registration | is forfeited. If fee will be charged | | | |
| · | r year) assessed on January | • | | | |
| within ten (10) days, or | ered and refused, or an app an applicant fails to renew e applicant will have no furt | the annual waiting | list registration, t | - | |
| the application and provi | sible for notifying the Port is ding an alternate contact pe ached at the address and pho | rson for use by the Po | ort if the applican | | |
| Applicant acknowledges procedures listed above. | that he or she has read, und | erstands and agrees t | o comply with the | e waiting list | |
| Applicant Signature: _ Date: | | | | | |
| | OFFICE | USE ONLY | | | |
| Account Number | Date Received | | Receipt Number | | |
| | Accepted | [] | | | |
| Date Offered | Refused Unable to Contact | | Berth Number | | |
| | | | Effective Date | | |