



RICHARDSON BAY MARINA

A Division of Steckler • Pacific Co., Inc.

Phone: (415) 332-5510

www.RichardsonBayMarina.com

100 Gate Six Road

Fax: (415) 332-5812

Sausalito, CA 94965

APPLICATION FOR NON-LIVEABOARD BOAT SLIP

Date: _____ Expected Occupancy Date: _____ Berth Number: _____

Boat Owners Name(s) _____

Home Address _____
(Including Street, City, State, and Zip Code)

Mailing Address _____
(Including Street, City, State, and Zip Code)

Phone (home) _____ Phone (cell) _____ Phone (work) _____

Email: _____

Employer: _____ City, State: _____ Position: _____ How Long? _____

Emergency Contact Name _____ Phone _____

Vessel Insurance Carrier _____ Exp. Date: _____

Vessel Name _____ Documentation/Registration # _____ Exp. Date: _____

Builder _____ Year _____ Estimated Value of Vessel: \$ _____

Length of Vessel: (LOA) _____ Beam: _____ Draft: _____ Boat Type: Sail Power

Condition of Vessel: Excellent Good Needs Work Hull Type: Wood Fiberglass Steel Aluminum

Fuel Type: Diesel Gas Engine Type: Inboard Outboard Holding Tank: Yes No

Currently Berthed At _____ Phone _____

Berthed How Long _____ Reason For Leaving _____

It is hereby understood that all persons named above, except invited guests, are the only persons authorized to use the boat designated above. Applicant represents that statements above are true and correct and hereby authorizes release of information for verification of statements made by applicant. This is an application only and must be approved by Richardson Bay Marina prior to commencement of any licensed use of the Marina's property.

Please attach a recent photograph of your vessel.

Signature of Lawful Owner _____ Date: _____

Marina Approval By: _____ Date: _____