

Tenant Information

Slip #: _____

Note: The following information will be incorporated into your lease. Please fill in every blank. If information sought is not applicable to you, so indicate by entering "N/A" in the appropriate space.

Personal Information

Lessee Full Name: _____
Home Address: _____
(No PO boxes) _____
Home Phone # _____
Cell # _____
Employer: _____
Employer # _____

Email _____

Boat Information

Make: _____
Model: _____
Year: _____
Beam _____
Length: _____
Registration #: _____

Does your boat have a holding tank? Yes No

Does your boat have a Coast Guard approved head? Yes No

I hereby certify that all of the above information is true and correct.

Your Signature: _____ Date: _____

Please attach a copy of your boat liability insurance declaration page

PERSON TO NOTIFY IN CASE OF EMERGENCY (other than yourself)

Name: _____
Address: _____

Cell # _____
Relationship: _____

Insurance Information Required

Company: _____
Policy #: _____
Company Phone # _____

CO-OWNER(S) OF BOAT

(Each Co-Owner must complete an Exhibit A form)

Co-Owner Name: _____

Co-Owner Name: _____

Lenders

Lenders Name: _____