



**MARINA OFFICE**  
 106 NORTH LAKE STREET  
 TELEPHONE (262) 284-6606  
 (MONITOR CHANNEL 16 IN SEASON)

**Port Washington Marina**/ Port Washington, Wisconsin 53074

**Dennis Cherny**

**APPLICATION FOR PERMANENT SLIP IN THE PORT WASHINGTON MARINA**

THE PORT WASHINGTON MARINA REQUIRES A \$100 NON-REFUNDABLE DEPOSIT FOR EACH SLIP SIZE WAITING LIST YOU WISH TO BE PLACED ON. YOUR DEPOSIT WILL BE APPLIED TO YOUR FIRST YEAR'S SLIP RENTAL.

PLEASE COMPLETE THIS FORM AND RETURN THE WHITE COPY AND YOUR DEPOSIT TO THE ABOVE ADDRESS. MAKE CHECK PAYABLE TO THE CITY OF PORT WASHINGTON.

**PLEASE NOTE:** WHEN SELECTING SLIP SIZE, THE OVERALL \* LENGTH OF YOUR BOAT MUST BE LESS THAN THE SLIP LENGTH TO PROPERLY SECURE YOUR BOAT IN THE SLIP. NO PART OF THE BOAT MAY OVERHANG THE MAIN PIER OR EXTEND INTO THE FAIRWAY.

IF YOU HAVE ANY QUESTIONS PLEASE CALL.

(PLEASE PRINT)

OWNER \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE # \_\_\_\_\_ EMERGENCY PHONE # \_\_\_\_\_

SIZE SLIP REQUESTED (please circle)    30'    36'    40'    45'    50'

\*BOAT LENGTH OVERALL \_\_\_\_\_ MAKE OF BOAT \_\_\_\_\_

\*(Measure outermost projection of bow to the outermost projection of stern, this includes bow pulpits, swim platforms, dinghy davits and down riggers.)

BEAM \_\_\_\_\_ POWER \_\_\_\_\_ SAIL \_\_\_\_\_

<p>FOR OFFICE USE ONLY</p> <p>DATE RECEIVED: ____/____/____</p> <p>AMOUNT RECEIVED: _____</p> <p>CHECK #: _____</p> <p>RECEIVED BY: _____</p>
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\_\_\_\_\_  
 (SIGNED)

\_\_\_\_\_  
 (DATE OF SUBMISSION)