

O.G.S. Marina Profile

(Please Type or Print Clearly)

Marina Name _____

Marina Address _____

Marina Phone No. (_____) _____ Fax No. (_____) _____

Name & Address of Owner/Applicant : _____

Phone (____) _____

Waterbody _____
County _____

City/Town/Village _____
Tax Map No: _____

In-Water Structure Breakdown

Total Linear Feet of Dock Space: _____

Total Number of Moorings _____

Total Number of Rentable Slips _____

Service / Transient Slips _____

Slip Breakdown by length:
(Example: 5 slips @ 20', 10 slips @ 25')

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Moorings Breakdown:
(Example: 2 moorings for 25' boats)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Seasonal Slip Rental \$ _____ per foot/season
Transient Slip Rental \$ _____ per foot/day

Moorings Rental \$ _____ per foot/season

Amenities: Please check if available :

Pump Outs Water Electricity Gasoline Diesel
 Sales Service Storage Telephone Other (specify)

I hereby affirm that information provided on this form and all attachments submitted herewith is true to the best of my knowledge and belief.

Signature of Applicant _____

Date: ____/____/____