

<b>DATE RECEIVED:</b>	<b>FOR OFFICE USE ONLY</b>
	SLIP NO. _____
	FEE PAID _____
	RECEIPT NO. _____

**VILLAGE OF WESTHAMPTON BEACH**  
**165 MILL ROAD**  
**WESTHAMPTON BEACH, NEW YORK 11978**  
**(631) 702-1555**

**APPLICATION FOR SEASONAL BOAT SLIP WAIT LIST**

NAME OF OWNER \_\_\_\_\_

NAME OF BOAT \_\_\_\_\_ REGISTRATION NO. \_\_\_\_\_

LENGTH \_\_\_\_\_ BEAM \_\_\_\_\_

<b>WHB Village Property Address:</b>	<b>Mailing Address:</b>
_____	_____
_____	_____
_____	_____

Home Tel No. \_\_\_\_\_ Cell No. \_\_\_\_\_  
 Work No. \_\_\_\_\_

**\*IT IS YOUR RESPONSIBILITY TO ADVISE THIS OFFICE IMMEDIATELY IF YOUR TELEPHONE NUMBER CHANGES. IF A BOATSLIP BECOMES AVAILABLE AND WE ARE UNABLE TO REACH YOU WITHIN 3 DAYS, THE BOATSLIP WILL BE ALLOCATED TO THE NEXT PERSON ON THE WAITLIST.**

**I WILL** / **WILL NOT** REQUIRE ELECTRIC HOOKUP (circle one)  
 (additional rates will apply for electrical use)

Please note that the above information must be complete and a copy of your current boat registration must be attached to this application. Incomplete applications will be returned.

**IMPORTANT NOTE:** By submitting this application, the boat owner agrees he/she is familiar with the Rules and Regulations and agrees to abide by same.