

2009 HAUL OUT APPLICATION

CITY OF KINGSTON

Portsmouth Olympic Harbour
 Recreation & Leisure Services Department
 Marina Operations

Date received	Contract Number	Tag No.

FOR OFFICE USE ONLY

Location Portsmouth Olympic Harbour

Owner's Name _____ Date _____
(Please print)

Address _____ City _____ Prov/State _____ Zip/Postal Code _____

Phone (h) _____ Phone (w) _____ Fax _____ Cell _____

E-mail address _____ Name of Boat _____

Registration Number _____ Horse Power _____

Type of Boat Power Sail Make _____ Year _____

Length ft. _____ Beam ft. _____ Draft ft. _____ Cradle ID _____

Drain holes are Aft () Forward () Use of Craft Private Commercial Weight _____

Cradle on Site: No Yes Estimated mast height: _____

Please circle desired day and time for Haul Out:

Saturday, September 19th am pm Friday, October 16th am pm

Friday, October 23rd am pm Saturday, October 31st am pm

Special Requirements: _____

Mast to be unstepped at time of haul out w/mobile crane? Yes No (yes-charge)

Pressure washing underside of boat @ \$2.50 p/ft. (LOA) (Service offered by outside Agency) Yes No

Insurance Company _____ Phone No. _____

Address _____ City _____ Prov/State _____ Postal Code _____

Policy No. _____

Note:

Return application including your \$150.00 deposit to the address indicated below by September 11th, 2009. Payment due in full prior to your haul out date. Please make cheque payable to the City of Kingston.

Information collected in this application will be handled in accordance with the Municipal Freedom of Information and Protection of Privacy Act and will be used to accommodate Haul Out services.