

Town of Rockport
ROCKPORT HARBOR DEPARTMENT
MOORING APPLICATION

Name: (please print) _____
Last First M.

Address: _____ Tele # _____
_____ DOB _____

Email address: _____

Type of vessel:

Power: _____ Doc # or MS # _____

Sail: _____ Class: _____

Length: _____ Beam: _____ Draft: _____

Inboard: _____ Outboard: _____ Hull material: _____ Color: _____

Use of the boat: Commercial: _____ Pleasure: _____

Other type of use/business: _____

Lobster License #: _____ Buoy Colors: _____

Type of lobster license: Commercial _____ Non-Commercial _____

Where was boat located on January 1st _____

Location desired for a mooring:

Rockport Harbor: North Basin _____
South Basin _____
Outer Harbor/north or south _____

Granite Pier _____
Pigeon Cove _____
White Wharf _____

Owners Signature: _____ Date: _____

This application is valid only for the vessel described herein and only for the name appearing. Any changes must be reported to the Harbormaster. A new mooring application must be filled out and returned to the Harbormaster when a different vessel is purchased. Failure to do so may result in cancellation of the permit. **Moorings are not transferable.** **Mooring application fee \$20.00**

Return to: Rockport Harbor Department, 34 Broadway, Rockport, Ma 01966