

Dana Point Marina Company Information Form

Owner's Name _____

Home Address _____

City State Zip

Mailing Address _____

City State Zip

Employer _____ Email _____

Employer's Address _____

City State Zip

Phone: Home () _____ Business () _____ Cell () _____

Date of Birth _____ SSN _____ Drivers License _____

Name of Legal Spouse (photo ID required) _____

EMERGENCY CONTACT: _____ PHONE () _____

Insurance Information: Company _____ Policy # _____

Insurance Agent _____ PHONE () _____

Vessel Information: Year _____ Make _____ Length _____ Beam _____

Power Sail Hull ID _____ CF# _____

Expiration Year _____ Vessel Name _____

Documentation # _____ Expiration (MM/YY) _____

THE FOLLOWING DOCUMENTS ARE REQUIRED:

1. Photo ID
2. **Current insurance with Dana Point Marina Company and the County of Orange** named as additionally insured, 34555 Casitas Place, Dana Point, CA, 92629, with **\$300,000** single limit liability.
3. Current registration or current documentation.

By signing this application, I understand and agree that the maximum overall length of any and all vessels to occupy this space, including all extensions, shall not exceed _____

Owner's Signature _____

Date _____