

## **Massachusetts Department of Conservation and Recreation**



## **2024** Application for Charles River Basin Mooring

APPLICANT INI	<b>FORMATION</b>	l						
NAME (LAST, F	IRST, INITIAI	L:)	EMAIL					
ADDRESS	NO.	STREET		CITY/TOWN	STATE ZIP			
HOME TELEPHONE			CELL/BUSINESS TELEPHONE			DATE OF BIRTH		
BOAT INFORM	IATION		<u> </u>					
BOAT TYPE			MAKE		BOAT NAME			
YEAR		REGISTRATION # AND	EXPIRATION	LENGTH		WEIGHT		
BOAT INSURANCE CO.			POLICY NUMBER:	k: POL		Y DATES	from	to
EMERGENCY C	ONTACT						<u>-</u>	·
NAME		TELEPHONE#		RELATIONSHIP				
Type of Electro	То	rk Rangers and local auth o assist us in the attempt	•	•		and model		•
Type of Electronic Bevice					T			
liability rests on th	he individual bo		ned due to use, inclement	nt weather, and other factor	ors beyond D	OCR's contro		The ultimate responsibility and will not be liable for property
Signature & Da	ate:							