

TOWN OF WELLFLEET

OFFICE OF
HARBORMASTER – WHARFINGER
300 Main Street
TOWN PIER – WELLFLEET, MA 02667
www.wellfleet-ma.gov

508-349-0320

2024

Check #		

SLIP WAITING LIST

PLEASE ENTER ANY CORRECTIONS OR NEW OR MISSING INFORMATION ON THE FORM BELOW AND SEND IT IN ALONG WITH YOUR CHECK MADE PAYABLE TO THE $\underline{\textbf{Town of Wellfleet}}$ FOR

*** \$20.00 ***

DUE: APRIL 15, 2024 MAIL TO:

HARBORMASTER
TOWN OF WELLFLEET
300 MAIN STREET
WELLFLEET, MA 02667

YEAR-ROUN	ID ADDRESS:					
Name:						
Address:	Town/State/Zip:					
Email Addres	ss:					
SUMMER or	EMERGENCY ADDE	RESS:				
Name:						
Address:	Town/State/Zip:					
Tel.:	Tel. 2:	Emergency	Гel.:			
Power/Sail:	Engine(s) (OB/IB/IO)/Horsepower: Fuel Capacity (Gals):					
Length:	Beam:	Draft:	Color:			
Boat Name:	Registration/Documentation #:					
Manufacturer	Year of Manufacture:					
Type of Marir	ne Sanitation Device a	and Capacity (G	als.):			
Use(Pleasure	e/Commercial):					
	<u>Date of</u>	Entry:				
	Signature		Date	<u> </u>		