

## **DEPARTMENT OF PLANNING AND NATURAL RESOURCES APPLICATION FOR LONG-TERM ANCHORING VESSELS**



INSTRUCTIONS: ALL APPLICANTS	S MUST FILL IN ALL NECE	SSARY INFORMA	TION IN A LEGIBLE MANNER.	
Owner's Name (Last)		(First)		
Home Address				
Current location of vessel to be anch	nored			
Zip Code Telephone Number				
Email Address				
Name of Vessel	Color of Vessel			
Homeport	Holding Tank Capacity (gal.)			
Registration No.				
Make of the Vessel	Builder/Manufactu	urer No. (H.I.N.)		
Type of Vessel (Check One):	] Sail	Auxiliary	Power	
Physical Description: Length	Wid	th	Draft	
	lands and the Rules and land Anchoring in the Unite	ue and correct; a Regulations of the	a Type (i.e. sand, mud, etc.) Type (i.e. sand, mud, etc.)  and further, I agree to fully e department of Planning and slands.	
STAT	TUS OF THE APF	PLICATION		
			Relocation	
Fee Schedule: Monthly \$2.00 (per foot) Recr Payable by credit card, certified check, money of	eational \$3.00 (per foot) Live	-Onboard/Commerci		
Effective Date	Expiration Date	F	ee \$	
Location of Approved Anchoring:		<u> </u>		
Approved by:	Date Approved:			
Howard A. Forbes Sr. Tit	le: <u>Director</u>			

## **CONDITION OF PERMIT**

NO ANCHORAGE IN GRASSBEDS OR CORAL, CHANNELS OR FAIRWAYS. ANCHORS SHALL BE PLACED WITHIN THE ANCHORAGE AREA SO THAT NO PORTION OF THE VESSEL, IT'S TENDER(S) OR RIGGING EXTENDED INTO A CHANNEL, FAIRWAY OR OTHER VESSEL'S MOORING OR ANCHORING AREA. THIS PERMIT IS NON-TRANSFERABLE.

M & AOVHB - 03/2002 LONG-TERM ANCHORING I