

EPOA – DOCK (SLIP) INFORMATION

This sheet must be completed to upgrade our records & for insurance liability reasons.

Set # ___ Dock (slip) # ___ Owner (print) _____

Lot # ___ Owner Signature _____

Escape Address _____

Telephone # _____

Home Address (if not the Escape) Street _____

City _____

State _____ Zip Code _____

Phone # _____

Emergency Phone # _____ Cell # _____

ONLY COMPLETE THE FOLLOWING IF THE DOCK SLIP IS RENTED.

NOTE: PROPERTY OWNER RENTING THEIR SLIP MUST COMPLETE THIS FORM;

OFFICE STAFF WILL NOT ACCEPT RENTAL INFORMATION UNLESS THIS FORM HAS BEEN COMPLETED & SIGNED BY PROPERTY OWNER.

Renter's Name _____ Lot # _____

Escape Address _____

Renter's Home Address Street _____

City _____ State _____ Zip _____

Phone # _____

Emergency Phone # _____ Cell # _____

BOAT INFO

Make _____ Model _____ Length _____

State Registration # _____ Insurance (attach current copy) _____

I authorize EPOA personnel to tie up boat if it should break loose. Yes ___ No ___

Sign here _____ Date _____