Town of Marshfield Massachusetts

HARBORMASTER DEPARTMENT



Mooring Servicers Application 2020

Business Name:	Date:	
DD A.		
Mailing Address:		
Authorized Representatives:	TT	
Business Tele:	Home Tele:	
Cell Phone:	E-Mail:	
Describe mooring service ves	E-Mail:ssel platform(s):	
hereby agree to save the Town harmless from any c	arshfield is exonerated from all liability growing out of this certificate, and further, that I ooring Rules & Regulations established by the Harbormaster.	
Application Date:		
	Signature of Applicant	
	Certificate Requirements copies of the insurance certificates listed below	
☐ General Liability or P&I \$1,00 * (Town of Marshfield must be named a		piration Date
Please enclose a check in the appropriate	Certificate Fees amount payable to the Town of Marshfield along with t	his application
□ New Application Fee \$25.00 □ Renewal Application Fee \$10.00		
Recommendation: Approve	ed Declined	
Harbormaster Michael DiMeo	Date:	
Michael Dilvico	Renewal Period: A	pril 1 ^{st.} Annually

RETURN APPLICATION AND APPROPRIATE FEES/PAPERWORK TO: MARSHFIELD HARBORMASTER 1639 OCEAN ST. MARSHFIELD, MA. 02050 Office: 781.834.6655 X 175 Fax: 781.834.5591