



HARBOR DEVELOPMENT
COMMISSION

52 Fisherman's Wharf TEL (508) 961-
3000New Bedford, MA 02740 FAX (508) 979-1517
WWW.PORTOFNEWBEDFORD.ORG

MARINE INDUSTRIAL MOORING PERMIT APPLICATION

Calendar Year 2012

All applications shall be submitted at the Harbor Development Commission office.

Applications must be complete. A separate application is required for each additional mooring and mooring field.

- | | | |
|--|--|--|
| <input type="checkbox"/> Field 1: Popes Island | <input type="checkbox"/> Field 5: Back Bay Harbor / Marine Industrial Area | <input type="checkbox"/> Field 9: Fredrick St. |
| <input type="checkbox"/> Field 2: Gifford Street Boat Ramp | <input type="checkbox"/> Field 6: W. Rodney French Blvd. | <input type="checkbox"/> Field 10: Clarks Cove |
| <input type="checkbox"/> Field 3: Back Bay | <input type="checkbox"/> Field 7: Butler Flats | <input type="checkbox"/> Field 11: Butler Flats |
| <input type="checkbox"/> Field 4: Aquidneck St. | <input type="checkbox"/> Field 8: E. Rodney French Blvd. | <input type="checkbox"/> Field 12: E. Palmers Island |

Type of mooring: Marine/Industrial Additional Mooring

APPLICANT'S INFORMATION:

Full Name: _____ Email: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Home Phone: _____ Work Phone: _____ Cell: _____

EMERGENCY CONTACT INFORMATION:

(This individual should live outside of the mooring permit holder's household)

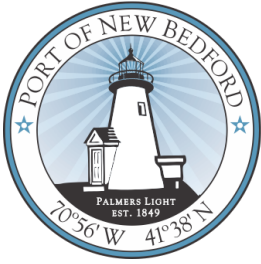
Full Name: _____ Email: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Home Phone: _____ Work Phone: _____ Cell: _____

VESSEL INFORMATION:

Vessel/Craft/ Name: _____ Documentation Number: _____
 Registration Number: _____ Hull Identification Number: _____
 Length: _____ Draft: _____ Make: _____ Model: _____
 Color: _____ Type: Power Sail Other _____ : _____
 Insurance Company: _____
 Policy Number: _____ Expiration Date: _____
 If no dedicated vessel will be on the mooring, please describe use: _____

Does the vessel have a Marine Sanitation Device? Yes No

Description of Sanitation Device: _____



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OFFICIAL INFORMATION

(To be completed by the Harbor Development Commission)

Date Application Received: _____ Official Name: _____

Status of Application: Approved- Date: _____ Denied- Date: _____

Reason for Denial: _____

Mooring Number: _____ (Number to be placed on Mooring Buoy)

Latitude: _____ Longitude: _____ Water Depth: _____

Mooring Weight (lbs.): _____ Type of Weight: _____

Previous Owner: (if used) _____

1st Chain Size: _____ 2nd Chain Size: _____ Pennant Size: _____

1st Chain Length: _____ 2nd Chain Length: _____ Pennant Length: _____

Date received: _____
Amount Paid: _____
Received By: _____

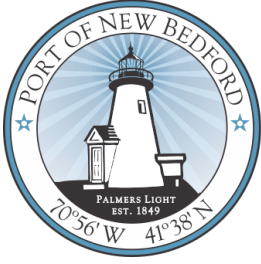
I have read and understand the HDC's Official Rules and Regulations and Official Mooring and Anchoring Regulations. I also understand that false information or Violation of the HDC Rules and Regulations could result in the loss of the mooring permit. The applicant hereby swears that all information submitted above is true to the best of his or her knowledge and that all mooring fees must be paid in full by March 31th or this will result in the loss of the mooring permit and removal of the mooring at the owner's expense.

Boat Owner acknowledges and accepts as a material part of this agreement that the HDC shall not be responsible for the care or the protection of the boat including its gear, equipment and contents or for any loss or damage to the boat, its contents or equipment including loss by theft or vandalism. Such mooring is to be used at the sole risk of the Boat Owner. Boat Owner hereby RELEASES HDC from any liability.

Boat Owner is responsible for the Boat at all times while the Boat is at the mooring and Boat Owner agrees to be responsible for all individuals at the mooring and to reimburse/indemnify the HDC for all costs associated with damage to the mooring and its appurtenances caused by the Boat, the Boat Owner or any guest of the Boat Owner; and the Boat Owner also agrees to indemnify and hold the HDC harmless from any liability, loss, or damage to third parties caused by the Boat, the Boat Owner or any guest of the Boat Owner at the mooring which may arise.

Please Print

Boat Owner/Mooring Applicant's Signature/Date



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This application is in accordance with the City of New Bedford Harbor Development Commission Official Rules and Regulations and Official Mooring and Anchoring Regulations. Visit www.portofnewbedford.org to view all HDC's Official Rules and Regulations, Mooring and Anchoring Regulations, and all ordinances regarding Harbors, Moorings and Vessels.

- All applications must be complete when submitted at the Harbor Development Commission office
- Applicants must have a vessel registered in their own name to be eligible for a mooring permit.
- (Excluding Commercial mooring permits)
- A current copy of the vessel registration must accompany the application.
- Individuals that have been placed on the mooring waiting list are required to renew their position on the waiting list every year by filing a new yearly application by June 15.
- It is the responsibility of the applicant / permit holder to notify the Harbormasters Office of any change of address.
- Once permitted, the mooring permit holder will have 30 days to place the mooring tackle in the approved location or HDC can reassign the location.
- **Reporting Boat Accidents:** All boating accidents occurring in New Bedford waters where damage exceeds \$500, or results in death, missing person(s) or requires medical treatment more that first aid, shall be reported to the Harbor Master and to:

Commonwealth of Massachusetts
Massachusetts Environmental Police
251 Causeway Street, Suite 101
Boston, MA 02114
Phone (800) 632-8075

Official Use Only: Approved Denied

Date Paid: _____

Mooring Number Issued: # _____

Amount Paid: _____

Recreational Mooring- \$150 = _____ Recreational/ Second Mooring- \$150= _____

Please Print

New Bedford Harbormaster Signature/Date

This application is in accordance with the City of New Bedford Rules and Regulations.

MOORING INSPECTION

Mooring Installer / Inspector: _____ Date Inspected: _____

Condition: (if not new) _____