



Dunbeg, by Oban, Argyll PA37 1PX

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TEL: 01631 566555

Berthing Application Form 2019/2020

Owner's Name:

Address:

.....

Postcode:

Telephone: (landline) (mobile)

E-mail:

Name of boat: **Make & model:**

LOA (to nearest tenth of metre e.g. 10.2 metres)..... **Beam** (metres).....

Draft (metres).....

- Annual pontoon berth
- Annual 6 months pontoon berthing / 6 months storage ashore
- 6 summer months pontoon berthing
- 6 summer months yard storage ashore
- Other (please specify)

Estimated date of arrival:

N.B. Payment is to be made in one instalment on or before 1st April.

Insurance Policy issued by:

(Please provide a copy of your insurance certificate with your completed application form for our records)

***I agree to the Terms of Business of Dunstaffnage Marina Ltd and confirm the above vessel is covered by a normal all risks Insurance Policy.**

Signature: **Date:**

For Office Use:

Berth number:

Invoice number:

ISO DOCUMENT REFERENCE: 9.1