

**PORT OF ANACORTES
CAP SANTE BOAT HAVEN**
P. O. Box 297
Anacortes, WA 98221
(360) 293-0694 FAX: (360) 299-0998

REQUEST TO MOVE APPLICATION

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Numbers: (_____) _____ Home; (_____) _____ Work; (_____) _____ Cell

Present Slip No.: _____ Present Slip Length: _____ Desired Slip Length: _____

Reason for moving: _____

Other specific requests such as port or starboard tie, bow facing east, west, etc.: _____

REQUEST TO MOVE PROCEDURES

1. A request to move list for each berth length will be compiled, regularly updated, and posted in the Harbor Office. Regular moorage assignments will be made from these lists based on seniority dates.
2. **A NON-REFUNDABLE, ONE-TIME, REGISTRATION FEE OF \$40.00** will be charged (see Marina Rules & Regulations). This fee will be reviewed on a yearly basis. This fee is an administrative fee. The registration fee does not apply to moorage and it is non-refundable.
3. Request to move assignments will be made based upon, first, the *Request to Move* date and, second, the applicant's moorage contract date.
4. If any applicant on the request to move wait list fails to accept the new berth assignment or cannot be contacted within seven (7) days of the date the new slip assignment is offered, the listing will be canceled.
5. It shall be the responsibility of the applicant to make arrangements to move the vessel to the newly assigned slip in a timely manner.
6. It shall be the responsibility of the applicant to provide an alternate contact party in the event applicant cannot be reached.

Applicant acknowledges having read, understands and agrees to comply with the above noted procedures.

Signature

Date Received: _____ Payment: CK# _____ Cash M/C Visa On Account Seniority Date: _____