

Holiday Harbor Cabrillo Marina

241 Watchorn Walk, Berth 34, San Pedro, California 90731

Office: (310) 833-4468, Fax (310) 833-2860

www.Holidayharborcm.com



Application for Private Wharfage

All Vessels must be inspected prior to admittance for general condition, appearance and safety standards required by Holiday Harbor. In addition, a current photograph of the vessel is required for our records.

Vessel Owner Name: _____

Vessel Co-Owner Name: _____

Address: _____

Address: _____

Mailing Address: _____

Mailing Address: _____

Send Invoices to: _____

Send Invoices to: _____

Owner Email: _____

Co- Owner Email: _____

Owner's Employer: _____

Co-Owner's Employer: _____

Owner's Driver License No.: _____

Co-Owner's Driver License No.: _____

Owner's Social Security #: _____

Co- Owner's Social Security #: _____

Phone: _____ Cell: _____

Phone: _____ Cell: _____

Emergency #: _____

Emergency #: _____

Vessel Name: _____ CF or USCG Documentation No.: _____

Length Overall: _____ Beam: _____ Draft: _____

Make: _____ Hull No./Color: _____ / _____ Year: _____

Check one: Power, Single Screw Power, Twin Screw Sail

Dinghy Information: _____ (Length) _____ (Beam) _____ (Color) CF No.: _____

Type (Circle One): Rigid / Inflatable

Previous Mooring Location* _____

Identify Holders of Mortgage & Other Liens against Vessel:

Name _____

Address _____

Vessel Insured By: _____ (Ins. Co. Name) Policy No.: _____

Insurance Agent: _____ Contact Phone: _____

Current Monthly Wharfage Fee \$ _____

Vehicle Information: Vehicle #1: _____ (Make, Year, Color, License Plate No.)

Vehicle #2: _____ (Make, Year, Color, License Plate No.)

Vehicle #3: _____ (Make, Year, Color, License Plate No.)

*Vessel Owner, By Signing Below, Authorizes Marina to Contract Owner/Operator of Previous Mooring Location and Contact Previous Marina to Discuss the Vessel, the Owner, and Reason for Departure.

Dated: _____, 20____

Vessel Owner's Signature

Dated: _____, 20____

Vessel Co-Owner's Signature