

 <p>Town of Saint Andrews</p>	<p>ST. ANDREWS MARKET WHARF</p> <p>Wharf Access Permit Application 2019</p> <p>Pleasure Boat</p>	<p>Office Use Only</p> <p>Permit #</p> <p>19 -</p>
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Resident: _____ Non-Resident: _____

APPLICANT: _____ Email: _____

TELEPHONE: HOME (____) _____ MOBILE #: (____) _____

ADDRESS: _____

VESSEL: L.O.A: _____ BEAM: _____ DRAFT: _____

PORT OF REGISTRY: _____

REGISTRY LICENCE NUMBER: _____

NAME OF VESSEL: _____

TYPE OF VESSEL: _____

REGISTERED OWNER of VESSEL: _____

REGISTERED OWNER'S ADDRESS: _____

REGISTERED OWNER - TEL#: (____) _____ Mobile #: (____) _____

HOME: (____) _____ BUSINESS: (____) _____

CONDITIONS OF PERMIT:

The completed application and applicable fees are to be submitted to Saint Andrews Market Wharf, Saint Andrews Municipal Office, 212 Water Street, Saint Andrews, N.B. E5B 1B4. Applicant must immediately advise in writing, the Wharfinger, Saint Andrews Market Wharf, of any changes to the application information during the period for which a permit has been issued.

Operator agrees to honour the “No Wave” zone within 300ft of the wharf and breakwater.

I have read and understood this application form and agree to comply with the terms and conditions as set forth herein and Saint Andrews Market Wharf Policy and to follow directions from the Wharfinger and his/her staff.

APPLICANT SIGNATURE: _____ DATE: _ DD / MM / YYYY