

MARINA/BOAT SLIP REGISTRATION FOR 2020

This form is required to be filled out annually by anyone occupying a boat slip at Condo Del Sol. It must be in the office prior to parking your boat in the marina.

ALL OWNERS OF BOAT SLIPS are responsible for their tenants supplying this form AND a copy of their insurance to the office. Both owners and tenants must have proof of insurance.

Insurance requirements: Tenant agrees to have the watercraft covered by a full marine insurance package (hull coverage as well as indemnity and liability coverage). Tenant agrees to release and discharge Condo del sol Homeowners Association from any and all responsibility or liability for injury (including death), loss, or damage to persons or property in connection with CDS docking facility/marina. This release and discharge shall cover without limitation any loss or damage resulting from CDS employees, vandalism, theft, fire, hail, high/low water, wind, collision, ice, rain or any other act of God.

Slip # _____ Boat Description _____ Boat Registration # _____

CondoDelSol Owner(s) _____

Address/Phone # _____

Email Address _____

Name of Insurance company and policy #: _____

If Renting the slip:

Name/Address/Phone/Email

Dates of Rental: _____

_____ **I HAVE INCLUDED A COPY OF PROOF OF MY BOAT INSURANCE FOR 2020.**

_____ **I HAVE RECEIVED A COPY OF THE MARINA RULES.**

Please note that if a party is renting a boat slip, they must also be a guest at Condo Del Sol. Renting a boat slip to someone who is not occupying/renting at the complex is not allowed.

I will need boat trailer storage from _____ to _____

In the event of an emergency (ie my boat comes loose or there is a storm or my boat is causing damage to the docks or another boat, etc) I give permission for other people in the vicinity to do what it takes to solve the problem. I also acknowledge that they are not to be held responsible for any damage to my boat or dock incurred while trying to help in the emergency.

Signed _____ **Date** _____

Emergency contact name and number _____

(Please Print)