

ROBERTS COVE BASIN, LLC
WATERCRAFT STORAGE REQUEST 2020-21

Please complete this and the Winterization Rates page and return to the Basin Duty Manager. The Basin Manager will review for completeness.

Watercraft Owner Name: _____

Date: _____

Contact Information:

Email: _____

Main phone number: _____ Cell Phone? _____

Winter/Billing Address _____

City, State, Zip _____

Watercraft Information:

Name or type of Watercraft: _____

Reg. (Bow) number: _____

Inboard? _____ Outboard? _____ Sail/Power: Yes No

Center Board? _____ Keel? _____ Depth from bottom of Watercraft in feet _____

Length: _____ Beam _____ Height _____ (Feet and Inches)

Approx. Date can be removed from water to be stored:

Month _____ Date _____ 2020

Please complete this so we can prioritize the order of getting Watercrafts ready in the spring)

I will expect to have my Watercraft available by Month: _____ Day: _____ 2021

I have read the Watercraft Storage agreement and agree to its terms.

I authorize Roberts Cove Basin, LLC to perform services as noted on attached form.

I authorize Roberts Cove Basin, LLC to place my Watercraft in storage.

Owner -

Signed _____

Marina Rep.

-Signed _____

ROBERTS COVE BASIN, LLC
WATERCRAFT STORAGE REQUEST 2020-21

Estimated Charges: Storage \$ _____
 Shrink-wrap: \$ _____
 Winterization: \$ _____
 Other :\$ _____ **TOTAL: \$ _____**

Payment will be invoiced as follows:
\$100 dollars will be due upon leaving the Watercraft and/or storage agreement. The MARINA will bill for the remaining amount immediately after the winterization is complete and the Watercraft has been placed in storage. 50% of the bill will be due at the time the invoice is issued and the remaining bill will be due 30 days later