

## BOAT REGISTRATION FORM

FIRST NAME	<input type="text"/>	SURNAME	<input type="text"/>
HOME ADDRESS (inc post code)	<input type="text"/>	LOCAL ADDRESS (inc post code) (if different)	<input type="text"/>
Tel No.	<input type="text"/>	Mobile No.	<input type="text"/>
EMAIL	<input type="text"/>		
EMERGENCY CONTACT	<input type="text"/>	Tel No.	<input type="text"/>
BOAT NAME (All boats must be clearly marked)	<input type="text"/>		
MAKE	<input type="text"/>	VESSEL TYPE	<input type="text"/>
CONSTRUCTION	<input type="text"/>	COLOUR	<input type="text"/>
LENGTH (metres)	<input type="text"/>	BEAM (metres)	<input type="text"/>
DRAFT (metres)	<input type="text"/>	KEEL	<input type="text"/>
ENGINE MAKE	<input type="text"/>	Horse Power	<input type="text"/>
ENGINE TYPE	<input type="text"/>	USAGE	<input type="text"/>
INSURANCE COMPANY (Third Party Liability: min £3,000,000)	<input type="text"/>		
DETAIL WHERE BOAT KEPT: MOORING/PONTOON/BOATYARD/HOME (i.e deep water mooring, Winters Pontoon, Yeowards Foreshore etc.)	<input type="text"/>		
LOCAL AGENT?	<input type="text"/>	Tel No.	<input type="text"/>
SIGNATURE (Type full name if submitting electronically)	<input type="text"/>		

This information will be held by South Hams DC.  
It will be used to update Harbour records and will be held securely at all times.

### **WE NO LONGER ACCEPT PAYMENT BY CHEQUE**

PLEASE DEBIT MY CREDIT/DEBIT CARD NUMBER	<input type="text"/>		
CARD TYPE (visa/MC)	<input type="text"/>	EXP DATE	<input type="text"/>
SECURITY CODE	<input type="text"/>	SIGNED	<input type="text"/>

PLEASE EITHER RETURN ELECTRONICALLY BY PRESSING "SUBMIT BY EMAIL" OR "PRINT FORM" AND RETURN  
TO: **Harbour Office, Whitestrand, Salcombe, Devon, TQ8 8BU**