



Department of Natural Resources

24 Perry Avenue - Room 102
Buzzards Bay, MA 02532-3441

508-759-0600

www.townofbourne.com



DATE STAMP

Form & Proof of Ownership Received

☐ **BOAT CHANGE APPLICATION**

NON-REFUNDABLE ADMINISTRATIVE FEE : \$15.00 CHECKS PAYABLE TO: "TOWN OF BOURNE"

Must Provide "Proof of Boat Ownership" for Harbor Master Approval

☐ **TRANSFER TO SURVIVING SPOUSE**

☐ **CHANGE OF ADDRESS**

☐ **OTHER:** _____

Mooring Area _____ MOORING # _____
(CURRENT)

APPLICANT INFO

CURRENT:

Name (Last, First, M.I.) _____

Mailing Street _____

Mailing Town, State, Zip _____

Local Residence Address _____

Mooring Class (**CIRCLE ONE**)

Commercial

Recreational

Email Address (Confidential) _____

Winter Phone (_____) _____ Summer Phone (_____) _____ Cell Phone (_____) _____

NEW OWNER: (complete all that apply: SURVIVING SPOUSE INFO)

Name (Last, First, M.I.) _____

Mailing Street _____

Mailing Town, State, Zip _____

Local Residence Address _____

Mooring Class (**CIRCLE ONE**)

Commercial

Recreational

Email Address (Confidential) _____

Winter Phone (_____) _____ Summer Phone (_____) _____ Cell Phone (_____) _____

**DNR Original
Cove Master Work Sheet
Assessors Dept
Cove Tracking**

APPLICANT COPY- Please keep a copy for your records

Form: BCA-20100122-1

BOAT INFO CURRENTLY ON FILE:

Manufacturer _____ Make/Model _____

LENGTH _____

PROPOSED BOAT INFO:

Registration # MS _____ U.S.C.G. Documentation # _____

Name (If Any) _____ Year _____ Color _____

Hull ID # _____ Width _____ Draft _____

Manufacturer _____ Make/Model _____

Motor Brand _____ HP _____

LENGTH _____☐☐**ANCHOR UPGRADE REQUIRED:**

YES

NO

Anchor Type (Cement, Mushroom, Helix, etc.) _____ Anchor Weight _____

Serviced/Maintained By (Name & Phone #) _____

*Upon signing this application I agree to abide by all Town by-laws, rules and regulations regarding moorings and waterways.*_____
SIGNATURE OF APPLICANT***Applicant – Do Not Write Below This Line***DATE of
APPROVAL**NEW Mooring #**

Cove Master _____

Name

Latitude _____ Longitude _____ Control (BILL) # _____ Sticker # _____

Entered Into Computer _____

MONTH

DAY

YEAR

CLERK

INITIALS _____ Harbor Master

Christopher Southwood – Acting Director