



## Department of Natural Resources

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

508-759-0600

[www.townofbourne.com](http://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** (No Fee Required)
- ☐ **CHANGE OF ADDRESS** (No Fee Required)

Mooring Area: \_\_\_\_\_ MOORING # \_\_\_\_\_ (CURRENT)

### **APPLICANT INFO**

#### **CURRENT:**

Name (Last, First, M.I.): \_\_\_\_\_

Mailing Street: \_\_\_\_\_

Mailing Town, State, Zip: \_\_\_\_\_

Local Residence Address: \_\_\_\_\_

Mooring Class (Check One) **C**ommercial **R**ecreational

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 (Check One) **C**ommercial **R**ecreational

Email Address (Confidential): \_\_\_\_\_

Winter Phone: (\_\_\_\_) \_\_\_\_\_ Summer Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

**OVER – Side Two**

BOAT INFO CURRENTLY ON FILE:

Registration # \_\_\_\_\_ U.S.C.G. Documentation # \_\_\_\_\_

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, DNR – Director