Additional Required Information

Boat Information	Storage Information			
Boat Name:	Item:			
Make & Model:	Make and Model:			
Year:				
Registration/Documentation/ WN Number:	Year:			
Color:	Color:			
Color	Trailer/RV License No.			
Responsible Party: Address: Mobile/ Primary Phone: Secondary Phone: Text Ok? Yes / No (circle one) Additional Authorized Users (People allowed to launch the boat or use the RV):				
Authorized to Check on Boat (CANNOT launch boat or use RV):				
0	,			

	0	Insurance Company:		
	0	Named Insured:		
	0	Policy #:		
	0	Expiration Date:		
•	Emer	gency Contact		
	0	Primary: Name:	Phone:	
	0	Secondary: Name:	Phone:	
•	Email	for Statements (required):		

• Insurance Coverage (Attach proof of liability insurance)