



Transient Moorage Registration

Date: _____ / _____ / _____ Account #: _____ ID #: _____

Last Name: _____ First Name: _____ M.I.: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone #s Home: _____ Work: _____ Cell: _____

Emergency Contact Name & Phone #: _____

Email Address: _____ E-mailed Statements? Yes_ No_

Driver's License #: _____ State: _____ Date of Birth: _____ / _____ / _____

Boat Name: _____ Vessel Registration: _____

Vessel Length (Including overhangs*): _____ Beam (Width): _____

***Overhangs to include Swim Step, Outboard Engines, Davit & Dinghy, Bow sprit & Anchor.**

Vessel Insurance Provider: _____ Policy #: _____ Exp: _____ / _____ / _____

- I understand that the Uninsured Vessel Surcharge will be owed if I do not provide vessel insurance information at the time of payment and I wish to pay the monthly, semi-annual, or annual rate.
- I understand that THE BASE MOORAGE RATE IS THE DAILY RATE. Monthly, semi-annual, annual, and skiff rates are discounts for prepayment, and as such, are due before the moorage period starts.
- I certify that the information I provided is true, complete and accurate.
- I hereby request moorage privileges in the City & Borough of Juneau (CBJ) harbors for the described vessel.
- I agree to comply with all applicable provisions of the CBJ ordinances and regulations related to use of the harbors.
- I agree to pay moorage and other applicable harbor fees on time and understand that unpaid fees will become a lien against the vessel described.
- I hereby authorize the CBJ to move the vessel described in the event of an emergency, if I do not pay fees on time, or if I violate applicable harbor ordinances and regulations.
- I agree that I may be denied mooring privileges if I have failed to pay moorage fees on a vessel under my name with CBJ Municipal Harbors.
- I hold CBJ harmless against the loss or damage of the vessel described above or related gear, equipment, lines, articles or other personal property, resulting from the use of CBJ facilities or the mentioned movement of the vessel.

Signature _____ Date _____

Signature and date required. Please return via email to harbormaster@juneau.gov.