

 DOSC MARINA BERTH APPLICATION FORM	APPLICATION NO.	-----	Dosc Admin to complete								
		APPLICATION DATE									
Section 1 - Member Details: To be completed by <u>all</u> members requesting a new berth or planning a change of sailing yacht in an existing berth											
Note: You must be a member of DOSC when applying for a marina berth.											
Member Name:	<input style="width: 300px;" type="text"/>	Tel No.	<input style="width: 150px;" type="text"/>								
Membership No.:	<input style="width: 300px;" type="text"/>										
Date of membership:	<input style="width: 300px;" type="text"/>	Email:	<input style="width: 150px;" type="text"/>								
Section 2 - Existing Boat Owners: Complete this section if you own the sailing boat for which you are requesting a berth. If not go to Section 3											
Note: When submitting your application please provide proof of ownership eg. bill of sale, registration or insurance documentation. Existing berth holders who have purchased a new boat and wish to have a berth allocated must also complete this section. Once completed go to Section 4											
Model:	<input style="width: 200px;" type="text"/>	Boat Name:	<input style="width: 250px;" type="text"/>								
Length:	<input style="width: 80px;" type="text"/>	Beam:	<input style="width: 80px;" type="text"/>								
		Draft:	<input style="width: 100px;" type="text"/>								
Location of Boat:	<input style="width: 300px;" type="text"/>										
DP No. (if applicable)	<input style="width: 100px;" type="text"/>										
Section 3 - Prospective Boat Owners: To be completed by those members who wish to be placed on the waiting list but have yet to purchase a sailing boat											
Note: Existing berth holders who are considering replacing their current sailing boat are also required to complete this section. If known provide details of the actual model of sailing boat you are proposing to purchase.											
Model:	<input style="width: 200px;" type="text"/>										
Length:	<input style="width: 80px;" type="text"/>	Beam:	<input style="width: 80px;" type="text"/>								
		Draft:	<input style="width: 100px;" type="text"/>								
Existing berth holder:	Yes/No										
Your application will not be accepted without a model or category being selected. If the type of sailing yacht is yet to be determined please tick one box for the size of boat you are proposing to purchase.											
Optional Categories	L = 45 - 54 FT <input type="checkbox"/>	L = 35 - 39 FT <input type="checkbox"/>	L = 26 - 29 FT <input type="checkbox"/>								
	L = 40 - 44 FT <input type="checkbox"/>	L = 30 - 34 FT <input type="checkbox"/>	L = 22 - 25 FT <input type="checkbox"/>								
		L < 21 FT <input type="checkbox"/>	L = <input type="text"/> Insert other length								
Section 4 - Submission: To be completed by <u>all</u> members requesting a new berth or change of vessel in an existing berth											
4.1 I have read and shall comply with the provisions of the Constitution and the Marina Byelaws.											
4.2 As a Section 3 applicant if I later change the model or category of boat that I selected, I understand that this information may alter my position on the berth waiting list and the availability of suitable marina berths based on the previous application.											
4.3 As a Section 3 applicant I must notify the Club when I have purchased a boat, therefore updating my status from Prospect to Boat Owner. I will also provide the Club with full details of the purchased boat and proof of ownership.											
4.4 From 1st October of each year I shall confirm my intention to remain on the waiting list. There will be a 30 day period in which to notify the Club of this matter in writing and failure to do so will result in my application being removed from the waiting list. <i>email : admin@doscuae.com</i>											
4.5 Attach copies of the following documents if applicable. <i>(Tick the box for proof of ownership):</i>											
Bill of Sale	<input type="checkbox"/>	DOSC CLUB STAMP & DATE									
Insurance	<input type="checkbox"/>										
Registration	<input type="checkbox"/>										
Section 3 Applicant	<input type="checkbox"/>										
Member Signature	_____	Date	_____								
Received by Signature	_____	Date	_____								
Section 5 - For Administrative Purposes											
REVIEW OF BERTH REQUEST BY COMMITTEE MARINA MEMBER											
Approved subject to berth availability	<input type="checkbox"/>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; text-align: center;">Copies of Form</td> <td style="width: 40%; text-align: center;">Dosc Admin to check box</td> </tr> <tr> <td>MEMBER COPY</td> <td><input type="checkbox"/></td> </tr> <tr> <td>MARINA MEMBER COPY</td> <td><input type="checkbox"/></td> </tr> <tr> <td>ORIGINAL COPY ADMIN</td> <td><input type="checkbox"/></td> </tr> </table>		Copies of Form	Dosc Admin to check box	MEMBER COPY	<input type="checkbox"/>	MARINA MEMBER COPY	<input type="checkbox"/>	ORIGINAL COPY ADMIN	<input type="checkbox"/>
Copies of Form	Dosc Admin to check box										
MEMBER COPY	<input type="checkbox"/>										
MARINA MEMBER COPY	<input type="checkbox"/>										
ORIGINAL COPY ADMIN	<input type="checkbox"/>										
Approved	<input type="checkbox"/>										
Not approved <i>(State reason)</i>	<input type="checkbox"/>										
Applicant Notified	<input type="checkbox"/>										
	Dosc Admin to check/date box										
Marina Member Signature:	_____	Date:	_____								