



BERTHING APPLICATION FORM

Official use only	
Date received	
Berth allocated	Harbour area Number..... Date.....

Application Form

1	Boat Owners Details	
a	Full name	
b	Address including postcode	
c	Contact telephone number	

2	Details of Person Requiring Berth (if different from above)	
a	Full name	
b	Address including postcode	
c	Contact telephone number	

3	Type of Mooring required	(please circle relevant)
	Pontoon/Commercial	

4	Details of Boat	
a	Class/Type of Boat	
b	Overall Length (metres)	
c	Beam and Draught (metres)	
d	Keel type (fin/bilge,centre board)	
e	Colour of hull and top sides	
f	Sail or Fishing Number	
g	Will the boat be used for commercial purposes?	YES/NO

5	I confirm that the above information is correct and that I have read and agree to abide by the Schedule of Conditions for Berthings.	
	Signature	Date

6	Return of completed application	
	Please return your completed application from to - email : Thomas.mckee@ayrshireroadsalliance.org or by post to : Harbour Master, Girvan Harbour, Knockcushan Street, Girvan, KA26 9AG . TEL: 01465 713648 MOB: 07768993239	

NOTES FOR GUIDANCE OF COMPLETION OF APPLICATION FORM

1	Boat Owners Details
	Please give owners full name and address, including postcode, and daytime telephone number and e-mail address
2	Details of Person Requiring Berth
	Please give persons full name and address, including postcode, and daytime telephone number and e-mail address
3	Berth required required
	Please circle relevant Commercial / Pontoon required
4	Details of Boat
	a Please specify class/type of boat
	b Please specify overall length of boat
	c Please specify beam and draught of boat
	d Please specify keel type of boat
	e Please specify colour of hull and top sides of boat
	f Please specify Sail or Fishing number
	g Please specify if boat will be used for commercial purposes
5	Signature
	Please sign and date the application form
6	Submission of completed form
	Your completed application form should be returned to the address given.