

City of Thorne Bay

Seasonal Boat Stall - Notification of Removal

Name _____

Address _____

City, St, Zip _____

Phone _____

Boat Stall _____ Date requesting termination of service _____

I hereby acknowledge I have read, understand and agree to abide by the boat harbor rules and regulations set forth in the ordinances of the City of Thorne Bay, and established by the Boat Harbor Committee and the Harbormaster.

Signature _____

WRITTEN NOTICE OF TERMINATION OF STALL RENTAL IS REQUIRED.