



Boat Basin Supervisor: Peter Fox

Commission Chair: Greg Gavlik

CITY OF RYE MUNICIPAL BOAT BASIN  
650 MILTON ROAD, RYE, N.Y. 10580  
914-967-2011

Summer \_\_\_\_\_  
Winter \_\_\_\_\_  
Trailer \_\_\_\_\_  
Wait List \_\_\_\_\_

APPLICATION FOR BOAT BASIN PERMIT

\*All Fields are Required\*

\*Resident  Non-Resident  Application Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
\*2 proofs of residency required

Registered OWNER:

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**BOAT DATA:** (Application will **NOT** be accepted without copy of registration and proof of insurance)

Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Type of Boat (Check One): Power w/ Inboard Engine  Outdrive  Outboard   
Sail/no engine  Sail/Outboard  Inboard

Boat Manufacturer/Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

NY Registration #: \_\_\_\_\_ Hull ID #: \_\_\_\_\_

Name on Boat: \_\_\_\_\_ Hull Color: \_\_\_\_\_ Top Side Color: \_\_\_\_\_

Engine Manufacturer: \_\_\_\_\_ Engine H.P.: \_\_\_\_\_ Single / Twin

Length Overall: \_\_\_\_\_ ft. \_\_\_\_\_ ins. (INCLUDE BOW PULPIT AND SWIM PLATFORM)

Beam/width: \_\_\_\_\_ ft. \_\_\_\_\_ ins. Draft: \_\_\_\_\_ ft. \_\_\_\_\_ ins. Fly Bridge: Yes  No

I have received, read and understand the rules and regulations of the City of Rye Municipal Boat Basin as set forth by the Rye Boat Basin Commission and all laws and restriction is the City of Rye Harbor Ordinance and agree to abide by said rules and regulations.

Submission of false information or statements can result in forfeiture of any or all Permits without refund of fees paid.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

For Office Use Only	
Payment Type: <input type="checkbox"/> Credit Card <input type="checkbox"/> Check	Check # _____ Amount: _____