



Smiling Cove Marina Office

CNMI Division Of Fish and Wildlife
P.O. Box 10007, Lower Base Road
Saipan, MP 96950
Tel: (670) 323-6070



Berth Application Form

Request for: Yearly Berth Temporary Berth Typhoon Permit

Applicant Information

Submission Date:

Applicant:		e-mail:	
Work Phone:	Home Phone:	Cell Phone:	
Address:		Box Number:	
Town/City:		Postal code:	
Authorized Rep. (if any):		Phone No:	

Vessel Information

Name of Vessel:		Documents/Certificate No:	
Primary Propulsion:	Motor Power ____	Sail ____	
Hailing Port:		Length (LOA) ____	Beam: ____ Draft: ____
Marine Radio Call ID/Channel:		Sail No:	
Type of Boater: Recreational ____ Government ____ Commercial ____ (Boat Insurance Required)			

Trailer Information

Condition of Trailer:	Good ____	Fair ____	Poor ____	None ____	N/A ____
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Auto Identification (for Marina Parking Area Purpose)

Make:	Model:	Year:
License Plate No:	Color:	

Purpose: (for Temporary Berth Applicant Only)

Date Beginning:	Date Ending:
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Signature of Applicant / Date:
Signature of Authorized Representative / Date:

FOR OFFICIAL MARINA USE ONLY:

Approved ____ Denied ____	Reason for Denial: _____
By: _____ VICENTE A. CAMACHO MARINA MANAGER/BOATING ACCESS COORDINATOR	Berth/Slip Assigned: _____
	Note: _____
	Date: _____

Attachment Required: (Note: Incomplete Attachment will delay application process)

1. Boat Registration or US Coast Guard Documentaiton
2. Copy of applicant identification

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