OUTRIGGER HARBOUR YACHT CLUB

c/o Watson Association Management 430 NW Lake Whitney Place Port St. Lucie, FL 34986 Phone 772.871.0004 Fax 772-871.0005 AshleyB@WatsonRealtyCorp.com

VESSEL UPDATE FORM

Slip number				
SHARE OWNER NAME:				
TENANT NAME:				
ADDRESS:				
SHARE OWNER PHONE:		EMAIL:		
TENANT PHONE:		EMAIL:		
VESSEL INFORMATION				
Length:	_			
Year: Make:		Model:		
Color:	State:	Tag#:		
VIN:				
<u>Disc</u>	:laimer (Please ii	nitial next to each one)		
•The resident agrees to notify	the Association	n if there is a change of resid	lency.	
•The resident or vessel owne that the Association bears no the owners' risk and expense	o responsibility	•		
•The resident acknowledges t	that the vessel(s) docked is registered and in	sured.	
Share Owner Signature:	re Owner Signature:		Date:	
Please include a current:				

- Copy of Insurance
- Copy of Vessel Registration
- Picture of Vessel