

Outrigger Harbour Yacht Club Checklist

Please use this checklist to help ensure your application is complete and ready to be submitted.

- o Membership Application Page
- Agreement Page
- Vehicle Information Page
- o Copy of Insurance Policy
- Vessel Registration
- Photo of Vessel
- o Email Consent form
- Copy of executed Sales/Lease Contract
- o Registration Fee of \$125.00 payable to Watson Association Management

Please make sure when submitting your application all documents, and fees are included.

***** If an application is submitted that is <u>NOT</u> complete, it will <u>NOT</u> be accepted and/or processed. Please ensure that you have all the required <u>information</u>, <u>forms</u> and <u>signatures</u> to avoid any delay(s) in the approval of your application.

*Please submit and/or send all complete applications and fees to Watson Association Management, LLC office located at 1648 SE Port St Lucie Blvd., Port St. Lucie, FL 34952

OUTRIGGER HARBOUR YACHT CLUB SLIP MEMBERSHIP APPLICATION

| Share Owner (MEMBER) Name: | |
|--|--|
| Address: | |
| Phone #: | Alternate Phone #: |
| Slip will be used for: o Personal use – vessel will be doc o Offer Slip for Rent | ked |
| <u>∨</u> ○ To be determined | ESSEL INFORMATION |
| Information provided | |
| Length: Year: | Make: |
| Color: State: | Tag#: |
| VIN#: | Other: |
| <u>Disclai</u> | mer (Initial next to each one) |
| | vledges that they are storing their vessel at their own risk and s no responsibility and all risks whether liability, theft or ers risk and expense. |
| The member acknowledg | es that the vessel(s) docked is registered and insured. |
| must still complete Memb becomes occupied by a v | not intend on placing a vessel in the boat slip at this time, you pership Form and pay the \$125.00 registration fee Once slip ressel, proof of insurance, registration, and vessel photograph agement within 30 days of such occupancy. |
| Signature: | Date: |
| Signature: | Date: |



AGREEMENT

I/We hereby agree that THE ENTIRE VESSEL INCLUDING ANY BOW SPRIT OR SWIM PLATFORM, WHEN MOORED, IS COMPLETELY WITHIN THE FOOTPRINT OF THE SLIP AS REPRESENTED IN THE SURVEY DOCUMENTS. NO ALLOWANCE FOR WATER DEPTH WILL BE ALLOWED. If the Vessel extends beyond the footprint of the slip, I/We hereby agree to immediately remove the Vessel.

Each Marina Member must be prepared for mandatory vessel removal in the event of a hurricane warning.

Mandatory Vessel Coverage. Each Marina Member shall maintain liability insurance on his Vessel occupying his Marina Slip in the minimum amount of \$1,000,000.00, the policy of which shall name the Association as an additional insured. Alternatively, each Marina Members shall maintain liability insurance on his Vessel occupying his Marina Slip in the minimum amount of \$300,000.00 and an umbrella policy to insure the Vessel occupying his Marina Slip in the minimum amount of \$700,000.00, both policies of which shall name the Association as an additional insured. Proof of adequate insurance coverage shall be provided by each Marina Member to the Association once per year as determined by the Board of Directors.

| LESSEE/PURCHASER: | | Date: |
|-------------------|-----------------|-------|
| | Signature(s) | |
| LESSEE/PURCHASER: | | Date: |
| | Printed Name(s) | |
| LESSEE/PURCHASER: | | Date: |
| | Signature(s) | |
| LESSEE/PURCHASER: | | Date: |
| | Printed Name(s) | |

APPLICATION FOR VEHICLE PERMIT

| Name: | | | Phone: _ | | |
|---|------------------|---------|-----------|----------|-------------------------|
| Name: | | | _Phone: _ | | |
| Street Address: | | | | | |
| City: | | _State: | | _Zip: | |
| DESCRIPTION OF VEHICLE(S): | | | | | |
| VEHICLE #1: | | | | | |
| Make: | Model: _ | | | | Year: |
| Color: | Gross Weight: | | _VIN: | | |
| Vehicle Tag: | State: | | | | |
| Registered to: | | | | | |
| Street Address: | | | | | |
| City: | | _State: | | _Zip: | |
| VEHICLE #2: | | | | | |
| Make: | Model: _ | | | | _Year: |
| Color: | Gross Weight: | | _VIN: | | |
| Vehicle Tag: | | _State: | | | |
| Registered to: | | | | | |
| Street Address: | | | | | |
| City: | | _State: | | _ Zip: | |
| | | | | | |
| DI EASE NOTE | | | | | |
| PLEASE NOTE: | | | | | |
| □ ALL INFORMATION ON THIS FORM □ ANY CHANGES IN USE OR APPEAR THE BOARD OF DIRECTORS WITH A | RANCE OF THE ABO | | CRIBED V | EHICLE (| S) MUST BE SUBMITTED TO |
| Signature: | | | | _Date: _ | |
| Signature: | | | | _Date: _ | |



EMAIL CONSENT FORM

New Florida statutes state it is against the law to send mass emails to owners without their written consent. By completing, signing, and returning this form, you are authorizing the Board of Directors of the Outrigger Harbour Yacht Club and Watson Association Management to send you information of the Association meetings, reports on actions taken by the Board at those meetings, violations, updates and/or special information. Your email address will not be used for any other purpose than those listed in the previous sentence.

We want to keep you better informed about the developments and issues regarding your investment as an owner in the Outrigger Harbour Yacht Club.

| * * * * * * * * | ****************** | | | | |
|-----------------|--|--|--|--|--|
| <u>Yes</u> □ | I authorize OUTRIGGER HARBOUR YACHT CLUB and Watson Associatio Management to email me appropriate meeting notices, agendas, reports, violatiletters and other information. Email Address: | | | | |
| | Eman Address. | | | | |
| | Phone Number(s): | | | | |
| | | | | | |
| | Slip Number: | | | | |
| | Signature(s): | | | | |
| | Printed Name(s): | | | | |
| <u>No</u> □ | I do not want to receive emails from OUTRIGGER HARBOUR YACHT CLUB | | | | |
| _ | and Watson Association Management. | | | | |