

APPLICATION FOR A PERMIT TO DROP A NON-COMMERCIAL MOORING

To process an application for permission to drop a mooring in Old Lyme waters, a completed application, a current 3rd party inspection report and payment of the \$25.00 application fee is needed. A check made payable to the Old Lyme Harbor Commission and mailed to: Old Lyme Town Hall, 52 Lyme Street, Old Lyme, CT. 06371. Mooring must have tackle at least in accord with the minimum required by town ordinance, be inspected and reported on each Presidential Election Year. All moorings must be hauled out of the water by December 10 of the year prior to the Presidential Election. **Mooring Tackle & Vessel are the responsibility of the owner.** Scope must not allow infringement on other mooring, dock etc. with the vessel attached. Permits are NOT transferable or assignable. There is no guarantee that a permit will be granted as such grant is dependent on space and time. Calves Island Mooring holders are also requested to have their name on their dinghy.

Moorings are to be occupied only by a vessel owned by the permit holder.

Mooring Buoys are to be clearly marked with the Permit Holders last name and mushroom weight. The HMC recommends using an oil base paint on mooring ball to identify the owner last name and mushroom weight. Be advised that if your mooring can not be identified because the letters washed off, it may be considered an illegal mooring and may be pulled at the owner's expense.

Applicants Name _____	Mooring Information Required on Buoy
Applicants Address _____	Owners Last Name _____
_____	Mushroom Weight _____

Contact and Vessel Information

Home Phone #: _____	Cell Phone #: _____	Email Address: _____
Vessel Name _____	Hailing Port: _____	
Sail or Power _____	Overall Length (LOA) _____ (Ft)	Minimum Draft _____ (Ft)
Color: _____	State Registration # _____	

Mooring Information (Example 20 Feet of 3/8 Inch Chain)

Mushroom Weight _____ (Lbs)	Bottom Chain Length _____ (Ft)	Bottom Chain Diameter _____ (inch)
Top chain Length _____ (Ft)	Top Chain Diameter _____ (inch)	
Date of Last Inspection _____	Inspection Valid until _____	

I agree to abide by the Old Lyme Harbor Management Ordinance and warrant that the above information is correct

Signature of Applicant _____ Date _____

***** PLEASE DO NOT WRITE IN THIS SPACE—FOR HARBORMATER’S USE ONLY *****

Date Received: _____	Payment Received: _____	Check # _____	Date _____
Tackle Adequate for vessel (Yes / No) _____	Mooring Number Assigned _____		
Harbormaster Approval _____	Season _____		