## Town of Wolfeboro Libby Museum Dock ONLY BARGE LOADING/UNLOADING REQUEST FORM

Applications are approved by the Wolfeboro Board of Selectmen at a regular public meeting.	
Barge Owner:	Date:
Mailing Address:	Phone:
City, State, ZIP:	email:
Barge homeport:	
Estimated number of landings per year :	
Copy of Liability Insurance naming the Town of Wol	lfeboro included:

The applicant, acting on behalf of this owner/operator/ vessel hereby accepts responsibility and agrees to reimburse the Town of Wolfeboro for damage caused to the Town Docks caused by this vessel. The applicant certifies that they have read the Dock Ordinance (§32-2) available on the town website.

**Applicant Signature** 

Date

## Below is for town use only

Proof of liability insurance received:\_\_\_\_\_

\$3,000 annual fee due upon application: