



Town Commissioners of Charlestown
 Post Office Box 154
 Charlestown, Cecil County, Maryland 21914
 410-287-6173
 fax: 410-287-6620

TOWN PIER WAITLIST APPLICATION

Applicant Name:		
Mailing Address:		
City:	State:	Zip:
Daytime Phone: ()	Evening Phone: ()	
Applicant's Property Address, (if mailing address is PO Box):		
Boat Owner's Name:		
Boat Owner Mailing Address:		
City:	State:	Zip:

I have been advised that when it is my turn to receive a Town boat slip, the Town will attempt to contact me via phone one (1) time followed by one (1) letter if phone contact is unsuccessful. If I do not respond within 10 days of the post date of the letter, I will forfeit my position on the waitlist. I am aware it is my responsibility to inform the Town if my contact information changes.

_____ Date

_____ Applicant's Signature

(FOR TOWN USE ONLY)

Phone Call Placed: Y / N Date: _____ Time: _____ By: _____

Letter Mailed: Y / N Post Dated: _____

Slip Rented: Y / N Slip #: _____