

FIDALGO MARINA OWNERS ASSOCIATION, INC.
3101 V. Place, Anacortes, WA 98221 (360) 299-0873



2024 FIDALGO MARINA SLIP RENTAL AGREEMENT

SUBLEASED SLIP# _____ UNIT OWNER _____

OCCUPANT _____

PHYSICAL ADDRESS _____ CITY _____ STATE _____ ZIP _____ Email/Phone Number _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____ Email/Phone Number _____

VESSEL INFORMATION:

YEAR _____ MANUFACTURER _____ HULL ID/OFFICIAL # _____

LENGTH _____ FUEL _____ NAME _____ HAILING PORT _____

INSURANCE COMPANY _____

CERTIFICATE OF LIABILITY INSURANCE REQUIREMENTS:

- A. Provide \$1 MILLION DOLLARS Proof of Watercraft Liability and Pollution Insurance.
- B. Name FIDALGO MARINA OWNERS ASSOCIATION as Additional Insured.

REQUIREMENTS FOR OCCUPANCY:

- A. Provide Certificate of Insurance _____ Date Insurance Information Received
- B. Duration of Stay: _____
- C. Rental Amount: _____
- D. Provide this completed rental agreement _____ Date Rental Agreement Received

PROVIDE CERTIFICATE OF INSURANCE AND THIS RENTAL AGREEMENT TO THE MARINA MANAGER

OCCUPANT ACKNOWLEDGMENT:

I/We agree to abide by the RULES and REGULATIONS OF FIDALGO MARINA OWNERS ASSOCIATION, INC. see FidalgoMarin.org/About

Occupant Initials acknowledging having read and understand the Association Rules and Regulations.

I/We understand and will follow the FIDALGO MARINA POLICIES FOR RENTERS.

Signature: _____ Date: _____

Signature: _____ Date: _____

Please return this completed form with your certificate of insurance to the Marina Manager in person or Manager@FidalgoMarina.org, or email Info@FidalgoMarina.org or send it to Fidalgo Marina Owners Association at the above address. Thank you.