# RIVER ORWELL MOORING LICENCE

Application for a Swinging Mooring - please complete sections 1, 2 and 3.

Section 5. – Boat Insurance details will be required if a mooring is agreed & licenced.

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| Licence Holder Details Name: Address: Telephone or Mobile Number: Email Address: |
| Boat DetailsBoat Name Hull Colour: Type/Class Draft: Length: 16.6m |
| Preferred Mooring AreaPlease indicate desired geographic area or nearest marina in order of preference. 1st 2nd 3rd |
| *This section for ABP Staff to complete.*Mooring Details *Mooring Number:**Satellite Position: Lat:* *Long:**Mooring Colour & Identification Mark:* |
| Insurance DetailsPlease supply a Copy of Insurance CertificateTo be provided once mooring details agreed. |

Return together with a copy of your Insurance Certificate to:

‘onsipswich@abports.co.uk’ or by post to Associated British Ports, Old Custom House, Key Street, Ipswich IP4 1BL.

Payment to be made to: Associated British Ports, P O Box 1, Port House, Northern Gateway, Hull HU9 5PQ.