

ANCHORAGE 47
DEPARTMENT OF BEACHES AND HARBORS
13837 Fiji Way, Marina del Rey, California 90292
Phone: 310-301-9152 Fax: 310-821-1621
Email: DMarinaManager@bh.lacounty.gov

SLIP CANCELLATION

Slip Number _____

I hereby request cancellation of my slip and permit effective _____(mm/dd/yyyy).

I agree to pay my last month rent. After all my keys and keycards have been returned and my slip has been checked for damage, my security deposit will be returned less damage or loss.

***** I M P O R T A N T *****

NOTICE OF CANCELLATION MUST BE RECEIVED IN WRITING THIRTY (30) DAYS IN ADVANCE OF THE EFFECTIVE DATE.

SECURITY DEPOSIT: Cancellation of a permit will require the payment of the last month's Monthly Rent and, if applicable, Liveaboard Charge. The security deposit will be returned to the permittee, less any damages noted during the exit inspection of the dock box, finger, etc. and less any deposit for items not returned, such as keys and keycards.

I understand that I must carry insurance on the vessel while it remains in the slip.

Print Name _____

Address to mail deposit refund _____

City _____ State _____ Postal Code _____

Phone _____

Email: _____

Reason for Cancellation: _____

Signature _____ Date _____

Office Use:
Date Received: _____