



Harbor Master  
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**Town of Cape Elizabeth Mooring Registration/Permit. Year: \_\_\_\_\_**

(Please Print Clearly, all information is Required)

**Fee Paid: \_\_\_\_\_**

Waiting List Desired Locations \_\_\_\_\_

Permit Holder: \_\_\_\_\_ Mooring Number \_\_\_\_\_

Mailing Address \_\_\_\_\_ Phone (home) ( ) \_\_\_\_\_

City, State, ZIP \_\_\_\_\_ Phone (work) ( ) \_\_\_\_\_

Phone (cell) ( ) \_\_\_\_\_ Email : \_\_\_\_\_ VHF: \_\_\_\_\_

Phone to contact during boating season (If different from above) \_\_\_\_\_

Permanent Residence Address: Number, Street, City, State, ZIP

Summer Cape Elizabeth Address (If different): Number, Street, City, State, ZIP

Cape Elizabeth summer address is: ( ) Owned, ( ) Rented

Emergency Contact & Number (in case you can not be reached) \_\_\_\_\_

Assigned Mooring Block Location Lat. \_\_\_\_\_ Long. \_\_\_\_\_

Note: Location may need to be adjusted at installation to clear previous moorings. Final location to be reported. If mooring causes contact with vessels on previous moorings, it must be moved at your expense.

Primary use of mooring is: ( ) Recreational , ( ) Commercial / Charter ( ) Govt.

Please provide Photo of Mooring tackle. Emailed jpeg files are preferred.

Mooring Buoy Type: ( ) Poly Ball, ( ) Styrofoam Block, ( ) Plastic Barrel, ( ) Spar Buoy  
( ) Hard Plastic Ball , ( ) Wood, Other \_\_\_\_\_ Note: Metal Kegs NOT Acceptable!

Note: Mooring Buoys must be white with blue stripe and marked with number.

Buoy marked with Name? ( ) Yes , ( ) No (Not required but recommended)

Anchor Type:( ) Mushroom,( ) Granite Block,( ) Concrete Block,( ) Habitat Mooring, ( ) Helical

Weight \_\_\_\_\_ Scale used ( ) Other, describe \_\_\_\_\_ Painter length: \_\_\_\_\_

Size of Lower chain \_\_\_\_ length \_\_\_\_ Size of upper chain at buoy \_\_\_\_\_ length \_\_\_\_\_

Total chain length \_\_\_\_\_ Shackles size. ( ) S.S, ( ) Galv, Other ( )

(Must be Safety wired with suitable non corrosive tie of adequate breaking strength.)

Elastic Mooring System: Brand, Age & Tonnage Rating \_\_\_\_\_

Mean Low Tide Water Depth \_\_\_\_\_ Mooring installed date \_\_\_\_\_

Vessel Name \_\_\_\_\_ State or Federal Number \_\_\_\_\_

Length \_\_\_\_\_ Draft \_\_\_\_\_ Height of Bow \_\_\_\_ Color of Hull \_\_\_\_\_ Type: \_\_\_\_\_

Type: ( ) Inboard Power, ( ) Outboard Power, ( ) I/O, ( ) Rowboat , ( ) Retractable keel sailboat

( ) Fixed Keel Sailboat, ( ) Auxiliary Sail, inboard ,( ) Auxiliary Sail, outboard,

( ) Other, floating dock etc. \_\_\_\_\_ ARMY Corp Permit # \_\_\_\_\_

Fuel: ( ) Gas, ( ) Diesel , ( ) Electric , ( ) None Dingy: \_\_\_\_\_

If lobster boat, lobster license number and buoy color \_\_\_\_\_

Inspected & Certified by (Print) : \_\_\_\_\_ Date of Inspection: \_\_\_\_\_

(Please send copy of yearly inspection to Harbormaster due by June 15, each year.

Mooring Owners Signature \_\_\_\_\_ Date \_\_\_\_\_

Harbormaster Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**Note: plan to use mooring for more than one vessel? List additional vessels on back.**