

Brentwood Marina Tenant Information

Primary Contact:	Ph:
Secondary Contact:	Ph:
Mailing Address:	
City, State and Zip:	
Email:	
Company Name:	Ph:
Address:	
City, State and Zip:	
Email:	

Please provide information for all property located at Brentwood Marina
(use blank spaces to list addtl. property)

Type of Property	Length	License or CF#	Color	Year	Make / Model	Insured? Y / N	Slip or Unit #
Boat							
Boat							
Boat							
Houseboat							
Jet Ski							
Jet Ski							
Car							
Car							
Car							
RV							
Trailer							
Trailer							
Trailer							
Truck							
Truck							
Other							
Other							
Other							

Insurance Carrier Information

Carrier:	Policy Number:
Agent Name:	Date Expires:
Brentwood Marina Named on Policy?	Carrier Ph:
Carrier:	Policy Number:
Agent Name:	Date Expires:
Brentwood Marina Named on Policy?	Carrier Ph:

Please provide a copy of all Insurance policies and Declaration pages to Brentwood Marina for our files.

Customer Signature: _____ **Date:** _____

Marina Signature: _____ **Date:** _____

*Please complete and return form as soon as possible so that we can update all of our records.
Thank You!*