

Village of Lake Tarpon, INC.

SPACE NUMBER

Storage Compound Application

Date: _____ Phone: _____

Applicant Name: _____

Village Address: _____

Alternate Address: _____

_____ Alternate Phone: _____

Boat Identification:

Description: _____

License: _____

Serial Number: _____

Tag: _____

Insurance Company: _____

Policy #: _____ Exp. Date: _____

Trailer Identification:

Description: _____

Length w/Tongue: _____

Serial Number: _____

Tag: _____

Insurance Company: _____

Policy #: _____ Exp. Date: _____

Canoe/Kayak Identification:

Description: _____

Notes/Comments: _____

----- OFFICE USE ONLY -----

Date Assigned: _____ Space Number: _____

Payment of \$ _____ Received By _____