

Daniel Lurie, Mayor



Kat Anderson, Commission President  
Philip A. Ginsburg, General Manager

# Berth Transfer Request Form

## San Francisco Marina Small Craft Harbor

1 Marina Green Dr + San Francisco, CA 94123 + tel: (415) 831-6322

Date: \_\_\_\_\_ Berth Number \_\_\_\_\_ Berth Size \_\_\_\_\_

Current Berth Holder Name and Address as Written on Berthing Agreement

\_\_\_\_\_  
\_\_\_\_\_

Requesting Party Name (If Different From Above) \_\_\_\_\_

Contact Phone #'s \_\_\_\_\_ / \_\_\_\_\_

Original Date of Agreement \_\_\_\_\_

Original Vessel Manufacturer and Year \_\_\_\_\_

Current Vessel Manufacturer and Year (If Different From Above) \_\_\_\_\_

Current Vessel Reg # or USCG Documentation # \_\_\_\_\_

Reason for Berth Transfer Request:

\_\_\_\_\_  
\_\_\_\_\_

Name and Address of New Berth Holder:

\_\_\_\_\_  
\_\_\_\_\_

Signature of current berthholder \_\_\_\_\_ signature of new berthholder \_\_\_\_\_

Contact Phone #'s \_\_\_\_\_ / \_\_\_\_\_

Transfer Fee \_\_\_\_\_

For Marina Office Only

Rvd Date: _____ / Process Date: _____	<input type="checkbox"/> Letter of Intent Received / On File
Marina Staff:	<input type="checkbox"/> Confirmation of Vessel Measurement
<input type="checkbox"/> Berthing Account Reviewed	<input type="checkbox"/> Confirmation of Berth Assignment
<input type="checkbox"/> Vessel Inspection for Seaworthiness	Notes: _____
Berthing Administrator Initials: _____	Approval Harbor Master

