

Town of Charlestown

Post Office Box 154 241 Market Street Charlestown, Maryland 21914 (p) 410-287-6173 | (f) 410-287-6620

APPLICATION FOR TOWN PIER WAITLIST

Applicant	Name:							
Applicant'	s Property	Address:						
City:	City:			State:		Zip:		
Mailing Ac	ddress, if d	ifferent:						
City:	City:			State:		Zip:		
Daytime P	hone:	,	Evening Phone			•••		
Boat Owne	er's Name,	if different:						
Boat Owne	er's Addres	SS:						
City:			State:		Zip:			
phone one (1)	time follow te of the lette	ed by one (1) l er, I will forfei	urn to receive a letter if phone it my position o anges.	contact is u	nsuccess ist. I am a	ful. If I do no	ot respond w y responsibi	vithin 10 days
			For Office	ce Use Onl	 ly			
Phone Call:	Yes / No	Date:		Time:_			Ву:	
Letter Mailed:	Yes / No	Date of Po	stmark:					
Slip Rented:	Yes / No	Slip #:						