



PORT OF GUAM
ATURIDAT / PUEYTON GUAHAN
Jose D. Leon Guerrero Commercial Port
1026 Cabras Highway, Suite 201, Piti, Guam 96915
Telephone: 671-477-5931/35 Facsimile: 671-477-2689/4445
Website: www.portguam.com



Lourdes A. Leon Guerrero
Governor of Guam
Joshua F. Tenorio
Lieutenant Governor

SLIP/MOORING APPLICATION LEASE YEAR 2024

New Applicant Renewal

1. Requestor/Company Name:				
2. Email Address:				
3. Postal Address:				
4. Physical Address:				
5. Contact Numbers:				
Primary#		Auxiliary#		Facsimile#
6. Vessel Name	7. Registration Number	8. Length	Width	Draft
9. Location:			10. Usage:	
<input type="checkbox"/> Agat Marina <input type="checkbox"/> Agana Marina <input type="checkbox"/> Harbor of Refuge			<input type="checkbox"/> Commercial <input type="checkbox"/> Recreational <input type="checkbox"/> Live Aboard	
11. Port Authority of Guam (PAG) grants all Slip/Mooring Lease Agreements up to One (1) Year. Applicants are required to demonstrate that vessel is safe and seaworthy and is capable of motoring to and from outer channel markers outside prospective Marina channel before Slip/Mooring Lease Agreement is executed. The documents indicated below are required for submission with this application for review by PAG.				
<input type="checkbox"/> Current Guam Business License <input type="checkbox"/> Current Guam Drivers License/Valid Identification				
<input type="checkbox"/> Copy of Boat Registration <input type="checkbox"/> Certified of Financial Responsibility (Proof of Insurance)				
<input type="checkbox"/> Other _____ <input type="checkbox"/> Commercial (Ownership Documents, eg; Articles of Incorporation, etc)				
<input type="checkbox"/> HOR - Registration Fee - \$100.00 per Vessel per YEAR (Refer to Marina Rules and Regulations)				
I, the undersigned, certify that the information provided is true and accurate to the best of my knowledge.				
_____			_____	
(Applicant Signature)			Date	
For Official PAG Use Only				
Motor mobility Demonstrated: <input type="checkbox"/> Yes <input type="checkbox"/> No		Condition of Vessel:		Certified for Slip/Mooring
Date: _____ Initial: _____		<input type="checkbox"/> Excellent <input type="checkbox"/> Good		Availability: <input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Fair <input type="checkbox"/> Poor		Slip Assignment: _____
Prepared By:	Concurred By:		<input type="checkbox"/> Approved	
_____	_____		<input type="checkbox"/> Disapproved	
Commercial Date	Frankie C. Rosalin Date		_____	
Representative	Marina Manager		RORY J. RESPICIO Date	
(Print Name): _____			General Manager	