Waimakariri District Council
215 High Street
Private Bag 1005
Rangiora 7440, New Zealand
Phone 0800 965 468

Kaiapoi Marine Precinct Berth Licence and Live-Aboard Application Form

Please complete all areas of this application form and provide details in the spaces provided.
Completed forms can be emailed with supporting documentation to **kaiapoi@wmk.govt.nz** or get it done online at **waimakariri.govt.nz/kaiapoimarineprecinct**

Applicant details

Full name of proposed licensee (individual/company/trust/other):

_____

Contact person: _____

Postal address: _____

Email address: _____ Phone: _____

Emergency contact: _____ Phone: _____

Briefly outline the proposed licensee's (and/or personnel's) boating/marine skills and experience:

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Vessel details

Vessel name: _____

Vessel type: _____ Vessel colour: _____

Length overall (LOA): _____ Height: _____

NOTE: LOA includes hull length plus any fittings or attachments such as pulpits, platforms, bowsprits, engines, rudders and dinghies.

Beam: _____ Draught: _____

Vessel registration: _____ VHF call sign: _____

Insurance details

Insurer: _____ Policy type: _____

Amount: _____ Expiry date: _____

Onboard toilets and holding tanks (please provide details):

Tagged power lead (please provide details):

Recent marine survey, cleaning of marine pest and bio-fouling (please provide details and date completed):

Please include with your application a copy of all relevant documentation:

- ☐ Evidence of vessel ownership (e.g. registration certificate or statutory declaration)
- ☐ Evidence of insurance
- ☐ Evidence of Public Liability Insurance
- ☐ Relevant marine certification
- ☐ Electrical Warrant of Fitness
- ☐ A recent photo of the vessel
- ☐ Alcohol licence (if required)

Proposed activity

Private mooring: ☐ Yes ☐ No Commercial mooring: ☐ Yes ☐ No

If yes, provide a brief description of the proposed activity (hours of operation/anticipated daily patron numbers):

Live-aboard mooring: ☐ Yes ☐ No

If yes, please provide the number of people living aboard, their names and ages:

Will there be pets onboard? ☐ Yes ☐ No

If yes, provide details:

Please indicate which of the following on-site facilities you will be using:

☐ Fresh watertaps Frequency of use? _____

☐ Power outlets Frequency of use? _____

☐ Pump-out facilities Frequency of use? _____

Proposed berthing duration: _____ (days) Arrival date: _____ Departure date: _____

Membership

Do you hold berths elsewhere in New Zealand? ☐ Yes ☐ No

If yes, provide details:

Do you have any marine body memberships? ☐ Yes ☐ No

If yes, provide details:

Payment

Please indicate your preferred payment method:

☐ Direct debit ☐ Automatic payment ☐ In person ☐ Bill payment (online bank transfer or credit card payment)

Declaration

1. As at the Commencement Date and throughout the term the Licensee warrants that:
   - the nominated boat is seaworthy and in sound working order;
   - the Licensee is fit and able to operate the nominated boat at all times; and
   - the nominated boat will at all times be securely, properly and safely moored to the berth;
2. The Applicant understands that the Waimakariri District Council has the sole discretion to accept (or not) this application;
3. The details provided in this application are true and correct to the best of the Applicant's knowledge, information and belief;
4. The signatory(ies) have the authority to complete this Kaiapoi Marine Precinct Berth Licence and Live-Aboard Application Form on behalf of the Applicant (where applicable);
5. The signatory(ies) have read and understood the Kaiapoi Marine Precinct Marine Berth Licence Terms and Conditions, and the Kaiapoi Marine Precinct Public Guidelines, and agree to be bound by them;
6. The licence is personal and cannot be transferred or sub-licensed without Council's prior written agreement;
7. The licence does not create a lease tenancy, or proprietary right;
8. Where signing on behalf of a company or trust the individual signatories are also personally liable; and
9. The Council may from time to time require temporary vessel relocation for maintenance, emergencies, or marina events (including the Kaiapoi River Carnival).

Signed by the Licensee

Name: _____ Name: _____

Signature: _____ Signature: _____

Position: _____ Position: _____

Date: _____ Date: _____

Witness to the signature(s)

Name: _____ Signature: _____

Position: _____ Date: _____

NOTE: Individual Licensees must each sign and have their signatures witnessed. Company Licensees must sign by at least one director, whose signature must be witnessed. Trust Licensees must sign by all trustees with each signature witnessed.