# Haul Out Form

Date of Haulout:_____ Time: _____

**Location of Haulout:** **MVM or MIM** Phone Number:_____

Owner Name:_____ Email:_____

Boat Name:_____ From Dock:_____ Marina: Valley / Inlet

Boat Dimensions: _____ Length

_____ Width

Boat Manufacturer:_____ Model:_____ Type: Sail / Power

Boat Registration #_____

| | | | |
|---|---|---|---|
| Spar (Mast): | Up / Down | Hoist Rental: | Yes / No |
| Have Boat Cradle / Trailer | Yes / No | Need Blocking | Yes / No |
| | | Need Stands | Yes / No |

What Happens to Boat

| | | | |
|---|---|---|---|
| Pump Out | Yes / No | Have a pass? | Yes / No |

Winter Storage

| | | | |
|---|---|---|---|
| **Outdoor Storage at MVM** | Yes / No | **Outdoor Storage at MIM (Inlet Marina)** | Yes / No |
| Indoor unheated | Yes / No | Yes = plus Trucking | |
| Indoor Heated | Yes / No | Yes = plus Trucking | |
| Customer Self-Storage | Yes / No | | |

Reference

| | | |
|---|---|---|
| Indoor Heating | Ocean | 519-524-8836 |
| Shrink Wrapping | Roy Selvey | 519-272-1761 |

OFFICE USE ONLY: Billing

| | |
|---|---|
| Invoice Number | |
| Invoice Date | |
| Invoice Value | |
| Email / Delivered | |
| Payment received | |
| | |
| | |

Include:

| | |
|---|---|
| Haul out | Yes / No |
| Hoist use | Yes / No |
| Pump out | Yes / No |
| Blocking | Yes / No |
| Stands | Yes / No |
| Transportation | Yes / No |
| Storage | Yes / No |