INLAND WETLANDS AND WATERCOURSES COMMISSION
TOWN OF WINCHESTER

Transferred
REGISTRATION/AUTHORIZATION FORM
For
DOCKS, BUOYS, SWIM FLOATS, WALKWAYS AND BOAT LIFTS

Property owner: ____________________________________________________________
Lake property address: ______________________________________________________
Map: ___________ Block: ___________ Lot(s): ___________ Zone: ________________

Mailing address: Street: ______________________________________________________
City: ______________ State: ___________ Zip: ________________________________
Phone: Home: ______________________ Work: _______________ Cell: ___________

Description of Walkway:
Length ______ Width ______ Composition: _________________________________
Location (distance from nearest property line): ____________________________

Description of Float/Dock:
Length ______ Width ______ Composition: _________________________________
Location (distance from nearest property line): ____________________________
(distance from shore): ________________________________

Description of Swim Float, or any solid or inflatable structure (other than a vessel):
Length _______ Width __________ Composition _____________________________
Location (distance from nearest property line): ____________________________
(distance from shore): ________________________________

BOATLIFT: [ ] Yes [ ] No If yes, quantity total: ______________________
BUOYS: [ ] Yes [ ] No If yes, quantity total: ______________________
JETSKI FLOAT/LIFT: [ ] Yes [ ] No If yes, quantity total: ______________________

COMMENTS:

Attach site plan, or sketch a site plan on the back of this sheet.

DATE: ____________________ OWNER’S SIGNATURE: ________________________

For Municipal Agency Use Only

Date: ______________ Agent [ ] Commission Approval [ ] Permit # __________

Approved & adopted 7/19/95; amended 8/26/98, 9/12/02, 11/3/06