



Town of Mattapoisett

Mooring Inspection Certificate

Office Use Only

GIS: _____

Scan: _____

Date of Inspection: _____

Mooring Number: _____

Mooring Holder:

Name: _____

Mailing Address: _____
Address Town, State Zip Code

Primary Phone No.: _____ Secondary Phone No.: _____

Mooring Information:

Any component that has lost 1/3 of its original size **MUST** be replaced. Standard mooring (pyramid/mushroom) weight must be length x beam x 1.5 and rounded up to the next highest 100. (See Appendix A of the Wharf, Mooring and Anchorage Rules and Regulations for all chain and weight requirements.) Dead weight (Ex. R.R. wheels, etc.) must be double the mooring weight (DW=2X). **Concrete is not allowed.**

Lat/Long: N _____ /W _____ Mooring Type: _____ Weight (DW=2X): _____

Chain	Size	Length	Percentages	Note: Any portion of the system that is below 66% of its original size is a failure and must be replaced.
Heavy Chain				
Medium Chain				
Light Chain				
Pennant				

Description of Boat

Name of Boat: _____ Reg/Doc.# _____ Manufacturer: _____

Length: _____ Beam: _____ Power/Sail: _____

Installer or Inspector Information:

Name: _____

Address: _____

Phone No.: _____ E-mail: _____

How was the mooring inspected (diving, lift, etc.)? _____

Comments:

This is to certify that the above mooring, as installed, meets the required minimum standards of the Wharf, Mooring and Anchorage Rules and Regulations. The Harbormaster reserves the right to re-inspect any mooring. All information requested must be in the document or the mooring permit otherwise, the mooring permit will not be renewed. This document must be completed and signed by the installer/inspector; and returned to the office of the Town Clerk or Harbormaster after the installation/inspection is complete.

Installer/Inspector Signature

Date