Harbor Walk Boat Slips

BOAT SLIP, DOCK BOX, BOAT LIFT OR MISCELLANEOUS WAIVER REQUEST

Please Note: Initiation of any action that requires a waiver without prior written approval of the Association is a violation of the covenants and is at the applicant's own risk.

Name: (Please print in ink or type)_____

Property Address: _____, Norfolk, VA 23518

Phone: (hm)_____ (wk)_____(cell)_____

Email Address:_____

APPLICATION FOR: (complete separate application for each request)

☐ **Boat Slip Waiver** ☐ **Dock Box Installation** ☐ **Boat Lift Installation** ☐ **Other/Misc.**

Description: _____

_____

_____

Please attach supplemental sheets, etc., as needed, to explain the purpose and details of the request.
Failure to provide adequate information may result in denial of application.

Owner's Signature: _____ Date:_____

Please return completed form to The Select Group at the address, fax number or email address below.

Date Application Received: _____

Boat Slip Committee Recommendation:

☐ Approved as Submitted ☐ Disapproved

☐ Approved with the following stipulations: _____

_____

_____

Committee Signature:_____ Date:_____

Board of Directors Action:

☐ Approved as Submitted ☐ Disapproved

☐ Approved with the following stipulations: _____

_____

_____

Board Signature:_____ Date:_____

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