

**BIRCHWOOD DOCK ASSOCIATION  
2026 BOAT SLIP PERMIT**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Name of Insurance Company \_\_\_\_\_

Policy Number \_\_\_\_\_

Boat Length \_\_\_\_\_ft. Boat Width \_\_\_\_\_ft. Boat Model \_\_\_\_\_

**Note: Boat length and width are determined one of two ways per 617.380(7) – First, by the manufacturer’s specification, which shall be used without regard to motors, swim platform, or other appurtenances that add to the dimensions. Second, by physical measurement of the boat. Length shall be measured at the longest part and width measured at the widest part of the vessel.**

**Note: The Dock Association shall have the discretion to determine the physical boat slip to be used by each individual who has a valid Boat Slip Permit. The Dock Association shall assign slips as to maximize the useable number of boat slips.**

**Total slip fees Due: \$1,500**

**Note: Total slip fees include Dock, City, and boat lift storage fees for the dock season.**

SUBMIT your completed application form, verification of residency, a copy of your liability insurance per Birchwood Code 617.390(2), and payment in full by **December 15** to:

**Birchwood Dock Association  
20 Birchwood Avenue, Birchwood MN 55110  
e-mail: [Birchwooddocks@gmail.com](mailto: Birchwooddocks@gmail.com)**

The information being collected is to evaluate your application. You are not legally required to provide any or all of the requested information. Refusing to provide any or all of the requested information may, however, result in denial of your application. The data you provide may be provided to City staff, consultants, and city council members who have a bona fide need to review the information in the course of evaluating your application

By signing below, you hereby authorize the inspection and gathering of data retained by any agency, individual or institution that is deemed necessary to determine whether you are prohibited by Minnesota Statute and/or City of Birchwood Village Ordinance Codes from obtaining the license(s) or permit(s) for which you applied. Failure to complete and sign this release of information form will result in the inability to process this license application(s). You may be asked at a future date to sign additional release of information forms if it is deemed necessary.

Date: \_\_\_\_\_ Signature \_\_\_\_\_

For Office Use Only

|  |
|--|
| Fee: _____ Cash__ Check # _____ Receipt#: _____              |
| Insurance Copy _____ Verified By: _____ Dock Assigned: _____ |
| Notes: _____   |