



Transfer of swing mooring permit

To: The General Manager
Greater Wellington Regional Council
PO Box 11646
Wellington 6142

Telephone: 04 384 5708 Facsimile: 04 385 6960

Pursuant to section 135 of the Resource Management Act 1991, the undersigned hereby applies to **transfer** a permit, in accordance with the details below:

This form must be completed prior to transferring your swing mooring, you are required to consult with the Harbourmaster for the following:

- The proposed mooring location is appropriate for the new vessel
- The proposed mooring location meets the minimum spacing requirements
- The proposed mooring specifications are appropriate for the location.

Your application will not be processed without the prior approval of the Harbourmaster.

Phone: 04 384 5708 Fax : 04 471 1373

Personal details (BLOCK CAPITALS)

Full name or company name of **existing** permit holder:

Postal address: _____

Telephone no's: Business: _____ Private: _____

Facsimile: _____ Email: _____

Name and address for service of documents (if different from above): _____

Full name or company name of **new** permit holder [please give christian names for permit]:

Postal address: _____

Telephone no's: Business: _____ Private: _____

Facsimile: _____ Email: _____

Name and address for service of documents (if different from above): _____

Transfer of swing mooring permit (continued)

Permit details

Permit no: _____

Permit type: _____

Describe any proposed change in the activity: _____

Vessel details

1. Name of vessel: _____

2. Type of vessel:

Yacht Catamaran Trimaran Launch

Other, please specify _____

3. Purpose:

Commercial Pleasure Other (please specify) _____

4. Length of vessel: _____ (m) Beam: _____ (m)

Draught: _____ (m)

5. Colour of hull: _____ Colour of cabin: _____

6. Construction:

Wood Fibreglass Steel Concrete

Other, please specify _____

Mooring details

7. Mooring area: _____

8. Buoy number: _____

9. GPS position: _____ NZMS 260 Reference _____

Mooring location approved by Harbour Master: _____

Transfer of swing mooring permit (continued)

10. Mooring specifications: _____

Mooring specifications approved by Harbour Master: _____

11. Mooring meets minimum spacing requirements: _____

Spacing requirements approved by Harbour Master: _____

If any of these details change, please inform Harbours Department and Environmental Regulation Department in writing.

Signature (current permit holder): _____ Date: _____

Signature (new permit holder): _____ Date: _____