

Northlake Dry Storage

P.O. Box 4055
Bullfrog, UT 84533
435-684-3019 phone

AUTHORIZATION TO RECOVER AND/OR LAUNCH VESSEL

I, (NAME) _____, THE UNDERSIGNED, being the registered owner of the vessel, and with the consent of the other owner(s), if any, of the vessel described below, authorize ARAMARK Sports and Entertainment, Inc. hereafter referred to as ARAMARK, to RECOVER AND/OR LAUNCH the vessel. I understand the cost is currently \$10 per foot based on actual physical measurement by dry storage personnel. Additional fees may be added based on extra services required (blocking boat, etc.)

I further understand that ARAMARK will not accept responsibility or liability for damage that may result from ARAMARK's efforts to recover and/or launch said vessel, with the exception of damages that occur from gross negligence on the part of ARAMARK or it's employees. I, the owner, waive any claims against ARAMARK for such damage.

I further agree that ARAMARK may proceed with such efforts with the understanding that it is at owner risk of damage whether or not foreseen by ARAMARK.

I also understand that ARAMARK reserves the right to refuse to attempt recover and/or launch of said vessel if ARAMARK determines it is in a damaged condition or could cause a spill of fuel or other environmental contamination to the environment. I also agree that the scheduled time and date is subject to change due weather or other unforeseen events.

CUSTOMER AUTHORIZATION - (PLEASE PROVIDE ALL REQUESTED INFORMATION)

PRINT NAME: _____ BOAT NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBERS:

WORK: _____ HOME: _____ FAX: _____

CREDIT CARD INFO:

(AMEX/DISC/MC/VISA): _____ EXP.: _____

WE DO NOT KEEP CREDIT CARD NUMBERS ON FILE - PLEASE PROVIDE A CURRENT CARD NUMBER WITH EACH REQUEST.

Will You Be Piloting The Vessel? _____ If No, please complete Auth to Tow/Pilot _____

MAKE OF BOAT: _____ Length: _____ Boat Type: Mono-hull _____ Pontoon _____

Driveable: _____ No _____ Yes Location of Keys _____

Hull Number/State: _____ LOCATION : Buoy #: _____ Slip #: _____ Dry Storage: _____

Special Instructions: _____

AUTHORIZING SIGNATURE: _____ DATE: _____

(PLEASE NOTE: We can not proceed without an authorizing signature admitting agreement of fees and a method of payment.)

The following damage is noted to the aforementioned vessel before pilot / tow was attempted:

NORTHLAKE DRY STORAGE OFFICE USE BELOW:

DATE OF RECOVERY _____ TIME OF RECOVERY _____

DATE OF LAUNCH _____ TIME OF LAUNCH _____

