

## **South Beach Harbor - Pier 40A**

Phone (415) 495-4911 & Fax (415) 512-1351



## **Authorization to Sublicense Berth**

Berth Holder Name:		Date:	
Address:			
City:	State:	Zip	
Cell Phone:	Home Phone:	Work Phone:	
E-Mail:			
Harbormaster to offer bert Agreement with South Bea sublicensee as may come t from months within a 12-month	ach Harbor and the Port of San I to the harbormaster's attention for through period), with the understand that be berth without any set off or into	he Licenser has a Berthing License	
qualified sublicensees and sublicensee to the Licensee	credit fifty percent (50%) of an	th is used by a transient guest the	
any sublicensee's timely d and expenses, including re	leparture from the berth. The pri-	me using the berth is contingent upon amary Licensee agrees to pay all costs South Beach Harbor may incur in the berth.	
	f said period unless a new Autho	od specified above and terminate orization to Sublease the berth	
Berth Holder Signature: _		Date:	
STAFF ONLY:			
Annroyed By:		Date Entered:	