

APPLICATION FOR WAIVER OF BOATING REGULATION

NEW APPLICATION FOR WAIVER

RENEWAL APPLICATION FOR WAIVER

ORGANIZATION/INDIVIDUAL NAME:		AREA CODE & TELEPHONE:	
ADDRESS: <i>(Street, P.O. Box)</i>	CITY:	STATE:	ZIP CODE:
EMAIL:	WEB/URL ADDRESS:		

APPLICANT IS:

(Check One)

Individual

Civic, Politic, or Social Organization

Commercial Entity

NAME OF PERSON COMPLETING APPLICATION: <i>(If Different than Above)</i>		AREA CODE & TELEPHONE:	
ADDRESS: <i>(Street, P.O. Box)</i>	CITY:	STATE:	ZIP CODE:

RELATIONSHIP TO ORGANIZATION:

Identify the Regulation, Rule, Statute, or Legal Authority from which you seek a Waiver:

Explain briefly your reason for the Waiver Request:

In support of your application, please attach any materials necessary for consideration of this request, including: maps, drawings, photographs, copies of regulations, statutes, rules, scientific data, expert/industry reports or standards, statistics, or any other material that may aid in the consideration of your application. Please note further, that your appearance before the commission may be necessary in order to consider your application. Send your application and supporting materials to:

**New Jersey State Police Marine Services Bureau
P.O. Box 7068, West Trenton, NJ 08628-0068**

Date of Application

Applicant Signature

DO NOT WRITE BELOW THIS LINE – FOR STATE POLICE USE ONLY

WAIVER: **GRANTED** **DENIED**
(Explain on back.)

DATE APPROVED

WAIVER

Waiver of _____ is hereby granted to: _____

Within the following conditions. _____

STARTING: _____ **ENDING:** _____

TIME: _____ **Hours** **TO:** _____ **Hours**

BODY OF WATER: _____



New Jersey State Police Marine Services Bureau Chief's Signature