



Boat Salvage Report Form

I am a: Property Owner Boat Owner Insurance Agent

Contact Name: _____

Mailing Address: _____

Phone No.: _____

Email Address: _____

Insurance Company Name: _____

Insurance Claim No. (if available): _____

Current location of boat: *(Give street address or be as specific as possible.)*

Boat Hull ID or Boat Name and Port of Call:

Boat description: *(Include approximate length of boat, type of boat. Attach pictures.)*

Describe plan for removal. *(State if insurance company is handling or if a private contractor has been retained along with the estimated timeline. Note if removal will involve the use of public right-of-ways or waterways. City Staff will help to coordinate where hazards exist.)*

Signature

Date

Print Name

Send completed forms to: boats@orangebeachal.gov