LAKE DABINAWA ASSOCIATION
DOCK PERMIT APPLICATION

***For new, modified, or relocated docking structures per Article IX, Section 7, Bylaws & Covenants.**

PROPERTY OWNER INFORMATION	**CONTRACTOR OR AGENT INFORMATION** (if applicable)
Name(s): _____	**Name(s):** _____
Mailing Address: _____	**Mailing Address:** _____
_____ ____ _____ **City State Zip Code**	_____ ____ _____ **City State Zip Code**
Phone: _____	**Phone:** _____
Email: _____	**Email:** _____

Physical Address of project (if different from mailing address)**:**

_____

Lot Identification: East or **West** (circle) **#(s):** _____

PROJECT DESCRIPTION:

TYPE OF PROJECT	**DOCK INFORMATION**
_____ **New unused dock, lift, ramp***	**Dimensions:** _____
_____ **New used dock, lift, ramp***	**Distances to extended side lot lines:**
_____ **Existing dock, lift, ramp* modification**	**____ feet, ____ feet**
_____ **Existing dock, lift, ramp* relocation**	**Distances to adjacent existing docks:**
***also includes other dock structures and anchoring systems that require approval**	**____ feet, ____ feet, ____ feet, ____ feet**
	Height (highest point of roof if applicable)**: ___ feet**
ANCHORING SYSTEM DESCRIPTION:	**Flotation system description:**

SIGNATURE: I, the undersigned, am the owner or duly authorized agent for the above project, and by my signature I certify the property owner officially applies for a dock permit as indicated above:

Signature(s): _____ **Date:** _____

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Yes	No	APPLICATION CHECKLIST FOR APPLICANT
		Drawing of structure including dimensions and details of anchoring and flotation systems.
		Aerial site plan showing structure placement relative to side lot lines, locations of adjacent existing docks, and an illustration that the dock placement will not interfere with travel to and from existing docks or with the free flow of watercraft through coves.

OWNER/AGENT CERTIFICATIONS - Initial next to the following statements.

By signing this permit application, I certify that:

_____ **I understand that all used docks new to the lake will be quarantined on dry land for a minimum of two weeks followed by an inspection by the Board or a designee PRIOR TO INSTALLATION.**

_____ **I understand that compliant, existing flotation will be authorized until it has severely deteriorated and is no longer serviceable or capable of supporting the structure, then modifications will be required and materials must be disposed of in an environmentally safe manner.**

_____ **I understand that docks are to have three inch Lot numbers clearly visible from the lake side.**

_____ **I understand that watercraft and trailers without a Lake Dabinawa boat permit may not be used for installation or repair of any floating structure without prior application and approval by the Board. I further understand that I, or my authorized contractor, must certify that proper steps were taken to quarantine and properly sterilize the unit from existic and invasive species, in accordance with guidelines published by the Kansas Department of Wildlife and Parks PRIOR TO INSTALLATION.**

Signature of Lot Owner indicates the above is understood and will be followed:

Signature(s): _____ **Date:** _____

Please scan and/or email completed **3-page** application form and required checklist materials to lakedabinawa@gmail.com or mail to **Lake Dabinawa Association, 5096 Saratoga Dr, McLouth, KS 66054**, at least 30 days prior to the Board meeting. **Please also notify your neighbors of your plans.**

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Yes	No	N/A	APPROVAL CHECKLIST
			The application is complete.
			The proposed location meets all requirements and is not anticipated to interfere with the travel of watercraft to and from existing docks or with the free flow of watercraft through coves.
			The anchoring system has been found to be secure and is anticipated to prevent the structure from going adrift and swinging into or colliding with other objects on the lake.
			The anchoring system is not attached to trees or other vegetation.
			The flotation system meets requirements and is found to be serviceable and capable of supporting the structure.
			Watercraft and trailers without LDA boat permits have applied and been approved for use for installation or repair of dock structures.

Date of Board of Directors Approval: _____ **Board Seal:**

Chair Signature: _____ **Date:** _____

Secretary Signature: _____ **Date:** _____

Quarantine Start Date (if applicable): _____ **Quarantine End Date:** _____

Date post-quarantine inspection: _____ **Inspector Name:** _____

Inspector Signature(s): _____

Date post-construction inspection: _____ **Inspector Name(s):**

_____

Inspector Signature(s): _____