



**TOWN OF HUNTINGTON  
DEPARTMENT OF HUMAN SERVICES  
Senior Citizen Division  
Senior Beach House**

**239 Little Neck Road, Centerport, NY 11721  
[TOHseniors.com](http://TOHseniors.com) (631) 261-9186  
[JFrangione@HuntingtonNY.gov](mailto:JFrangione@HuntingtonNY.gov) (631) 351-3253**

APPLICANT'S NAME:		
STREET ADDRESS:		
TOWN:	STATE:	ZIP:
E-MAIL ADDRESS:		
DAYTIME TELEPHONE #:	EVENING TELEPHONE #:	
BOAT TYPE: (Circle one) Metal Wood Plastic Fiberglass	BOAT MODEL: (Circle one) Canoe Dinghy Kayak Sunfish	
BOAT COLOR:	BOAT MANUFACTURER:	
As the APPLICANT, I understand that the granting of rack space is for the seasonal operation from Friday preceding Memorial Day thru October 31 <sup>st</sup> or boat will be impounded at a fee of \$50.00.		
As the APPLICANT, I hereby certify that the information I have provided on the form is complete and accurate to the best of my knowledge. I agree to abide by the terms set forth in this application, and the Rules & Regulations of the Town of Huntington Department of Human Services. I understand that failure to do so may lead to the cancellation of this agreement, the denial of future agreements, or other legal action by the Town of Huntington.		
The APPLICANT agrees to hold harmless and defend the Town of Huntington, its officers, agents and employees jointly, severally, individually or in their individual capacity, from and against any claim, damage cost, fee including reasonable attorney fees incurred or arising out of the APPLICANT'S use and/ or occupancy of the Town of Huntington's facilities.		

APPLICANT'S SIGNATURE:	DATE:
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**OFFICE USE ONLY**

DATE:	CHECK #: AMOUNT:	VERIFY BLUE TOH SENIOR MEMBERSHIP CARD? YES _____
STAFF SIGNATURE:		RACK # ASSIGNED:
SUPERVISOR APPROVAL:		RACK PERMIT #:

**TOWN BOARD  
FRANK P. PETRONE, Supervisor**

MARK A. CUTHBERTSON, Councilman  
EUGENE COOK, Councilman

SUSAN A. BERLAND, Councilwoman  
TRACEY A. EDWARDS, Councilwoman