



KEEHI MARINE, INC.

24 SAND ISLAND ACCESS ROAD
Honolulu, HI 96819
Tel: (808) 845-6465
Fax: (808) 841-6610
Website: www.keehimarine.com
Email: info@keehimarine.com



Required Information to Apply for a Slip

\$20 Application Processing Fee

Cash, AMEX, Visa, or MasterCard accepted.

Please make check out to **Keehi Marine Inc.**

Processing fee will be credited to your first month's rent upon approval.

If application is declined, your processing fee will be refunded within 10 business days.

- Complete Slip Application and Questionnaire
- Attach most recent photos of boat (*Hard copy only)
- Copy of valid Driver's License or State I.D.
- Copy of current HA Registration or USCG Documentation for the Boat
(*If recent purchase, submit a copy of USCG document for exchange)
- Employment Verification:
 - a. Letter from HR Department on letter head stating your position and how long you have been employed.
 - b. If you are self employed please provide a copy of your active GET license.
 - c. If you are retired, provide information on source of income. (i.e. Social Security, Investments, etc.)
- Copy of two (2) most recent pay stubs with current employer or GET return for self employed for the past 6 months.
- Letter from your bank, stating that you in good standing. (See attached bank form)
- Copy of your liability insurance for the boat. Must be a minimum of \$500,000 of liability coverage. Must cover salvage costs for grounded and sunken vessels, damage to docks, pollution, containment, wreck, and removals, etc. Include **KEEHI MARINE, INC.** as additional insured or party of interest.
- An in-water survey (see attached form under Vessel Pre-Mooring Contract Inspection) or any recent detailed survey within the last 6 months completed by a certified surveyor. **ANY MAJOR DEFICIENCIES NEEDS TO BE ADDRESSED PRIOR TO SUBMISSION OF APPLICATION.**
- Make sure to sign and date the slip application.

*****Please note that only completed applications will be processed.
Please allow a minimum of 2 business days for completed applications.**

KEEHI MARINE CENTER

24 Sand Island Access Road
 Honolulu, HI 96819
 Tel: (808) 845-6465
 Fax: (808) 841-6610
 Website: www.keehimarine.com
 Email: info@keehimarine.com

A1

Office Use Only

* Separate Application must be submitted for additional
 boat owners and live-aboard members (A2).

Submission Date:

() Please initial if \$20 Application fee collected.

Boat Owner Information

LEGAL FULL NAME			LICENSE ID. NO.	
SOCIAL SECURITY NO. / TAX ID IF BUSINESS		EMAIL ADDRESS		
CELL NO.	HOME NO.	BUSINESS NO.		
STREET ADDRESS		CITY	STATE	ZIP CODE
BILLING ADDRESS / IF DIFFERENT FROM ABOVE		CITY	STATE	ZIP CODE

Emergency Contact

NAME & RELATIONSHIP				
CELL NO.	HOME NO.	BUSINESS NO. OR EMAIL		
STREET ADDRESS		CITY	STATE	ZIP CODE

Boat Emergency Contact

BOAT EMERGENCY CONTACT & RELATIONSHIP (MUST BE A LOCAL RESIDENT AND KNOW HOW TO OPERATE YOUR BOAT)				
CELL NO.	HOME NO.	BUSINESS NO. OR EMAIL		
STREET ADDRESS		CITY	STATE	ZIP CODE

Personal References

NAME & RELATIONSHIP	CELL NO.	EMAIL ADDRESS
NAME & RELATIONSHIP	CELL NO.	EMAIL ADDRESS

Vessel Information

NAME OF VESSEL			YEAR BUILT
LENGTH OVERALL (INCLUDING BOW SPRIT & SWIM STEP)	BEAM	DRAFT	HULL COLOR
REGISTRATION OR DOCUMENTATION NO.		REGISTRATION PORT	
MORTGAGEE/LIEN HOLDER(S)			
TYPE OF VESSEL () POWER CRUISER / _____ HP () MULTI-HULL () SAILBOAT () SAMPAN STYLE			

Employment

CURRENT EMPLOYER	POSITION	START OF EMPLOYMENT
STREET ADDRESS	CITY	STATE
MANAGER/SUPERVISOR NAME	BUSINESS NO.	

Trade Reference (If Owner is a Business)

COMPANY NAME	ADDRESS	BUSINESS NO.
COMPANY NAME	ADDRESS	BUSINESS NO.

Fuel Card

() YES, I WOULD LIKE A FUEL ACCESS CARD WITH DISCOUNTED RATES FOR KEEHI MARINE CENTER TENANTS. (DISCOUNT APPLIED AFTER 3 MONTHS OF TENANCY).

Method of Payment

CHECK ONE () CARD () CASH () CHECK	IF CARD: () AMEX () MC () VISA		
CARD NO.	EXP. DATE	SEC. CODE	ZIP CODE:

The information provided above is true to the best of my knowledge. I/WE authorize the release of my credit information to KEEHI MARINE, INC., regarding our account with you. I/We appreciate your cooperation with KEEHI MARINE, INC.

APPLICANT SIGNATURE	DATE
PROCESS BY:	DATE
APPROVED BY:	DATE

KEEHI MARINE CENTER

24 Sand Island Access Road
 Honolulu, HI 96819
 Tel: (808) 845-6465
 Fax: (808) 841-6610
 Website: www.keehimarine.com
 Email: info@keehimarine.com

A2

Office Use Only

Submission Date:

CHECK ALL THAT Boat Co-Owner Additional Live-Aboard Member
 APPLIES:

Boat Co-Owner / Additional Live-Aboard Member Information

LEGAL FULL NAME			LICENSE I.D. NO.	
SOCIAL SECURITY NO. / TAX ID IF BUSINESS		EMAIL ADDRESS		
CELL NO.	HOME NO.	BUSINESS NO.		
STREET ADDRESS		CITY	STATE	ZIP CODE
BILLING ADDRESS / IF DIFFERENT FROM ABOVE		CITY	STATE	ZIP CODE

Personal References

NAME & RELATIONSHIP	CELL NO.	EMAIL ADDRESS
NAME & RELATIONSHIP	CELL NO.	EMAIL ADDRESS

Employment

CURRENT EMPLOYER			
POSITION		START OF EMPLOYMENT	
STREET ADDRESS	CITY	STATE	ZIP CODE
MANAGER/SUPERVISOR NAME		BUSINESS NO.	
APPLICANT SIGNATURE			DATE
PROCESS BY:			DATE
APPROVED BY:			DATE

KEEHI MARINE QUESTIONNAIRE



1	Where are you coming from?	Local Marina		Mainland Marina		
	How long have you been at your current Marina?					
	Please provide most recent Marina's contact information.					
	Name of Marina			Contact No.		
	Address		City		State	Zip Code
	May we contact your current Marina?			Yes		No
	If no, please specify.					
2	Reasons why you are moving out?					
3	Are you currently on a temporary slip?		Yes		No	
	If yes, when is your last day?					
4	When do you plan on moving to Keehi Marine Center?					
5	How long do you plan on staying? Estimate date of departure.					
6	Are you planning to do any construction work on your boat?				Yes	No
	If yes, please specify.					
7	Are you going to live aboard?		Yes		No	
	If yes, how many people?		*Maximum of 2 occupancy per boat. Please fill out additional application.			
	Are you going to stay aboard?		Yes		No	
	How often? *Staying past 3 nights per week (Sun.-Sat) will subject to the live-aboard rate.					
8	Are you or any members of your party handicapped?		Yes		No	
	If yes, are you in a wheelchair?		Yes		No	
	* We will do our best to accommodate you in a suitable slip.					
9	Are you going to be a absentee owner?		Yes		No	
	If yes, do you have a local caretaker that can operate your boat?		Yes		No	
	Name & Relationship			Contact No.		
	Street Address		City		State	Zip Code
10	Does anyone in your party smoke?			Yes	No	
11	How many vehicles and/or motorcycles/moped will be parked in our parking lot?					
<u>NO STORAGE OF VEHICLES!</u>						
12	Are you aware of our policy that no pets are allowed on property?			Yes	No	

KEEHI MARINE CENTER

24 Sand Island Access Road
Honolulu, HI 96819
Tel: (808) 845-6465
Fax: (808) 841-6610
Website: www.keehimarine.com
Email: info@keehimarine.com



Bank Account Verification Form

Form is to be filled out by bank representatives ONLY.

Name of Slip Applicant: _____

The person/entity named above is applying for a marina slip at Keehi Marine Center. As part of the application process, please provide us with the following information.

Name of Bank: _____

Branch: _____

Type of Account: _____

Date Opened: _____

Is account in good standing? Yes No

Average balance within the past 6 months: _____

Name: _____

Title: _____

Business No. _____

Signature: _____

Bank Stamp or Card

Keehi Marine Center - Vessel Pre Mooring Contract Inspection and Yearly Inspection

Vessel Name:		Official Number:	
LOA:	BEAM:	DRAFT:	
Owner Name:		Date:	
Inspector Name:		Inspector Sign:	

	Inspection Item	Details	OK	Remarks
1	Documents aboard and current			
2	Lifejackets and type IV devices			
3	Current Visual Distress Kit			
4	Horn, Bell, Rules, and Plaques			
5	Proper extinguishers for class			
6	Steering condition			
7	Shaft seals, Bilge pumps operational			
8	Navigation lights			
9	Absorbent pads, clean bilge			
10	Cooking fuel stowage			
11	Engine installed as designed & performed satisfactorily (INCLUDING TEST RUN)			
12	Fuel system condition			
13	Charging and battery system			
14	Wiring system and short tie			
15	Approved commode types(s)			
16	Adequate anchor rode rigged			
17	Adequate mooring lines			
18	Standing rig condition			
19	Dinghy and boarding box			
20	Main deck condition	POOR FAIR		GOOD EXCELLENT
21	Interior & engine room condition	POOR FAIR		GOOD EXCELLENT

Certified Marine Surveyors on Oahu

Rob Oakley

All Island Marine Survey

808-597-0086

allislandsurvey@gmail.com

Harry Guiang

Charles Taylor Marine Technical Services

808-778-9545

harold.guiang@charlestaylor.com

Capt. Dan Habel

Pacific Rim Marine Surveying, LLC

808-221-9306

PacificRimMarineSurveying@gmail.com

Capt. David Chellemi

Marine Surveyor

808-779-9491

Mike Price

MP Marine LLC

562-235-2708

mpriceracing@gmail.com

Keehi Marine Center
24 Sand Island Access Road
Honolulu, HI 96819
Tel: (808) 845-6465
Fax: (808) 841-6610
Web: www.keehimarine.com
Email: info@keehimarine.com

Marina Slip Rates eff. 3/1/2020



SLIP USAGE BASED ON LICENSE AGREEMENT (LONG TERM - MORE THAN 30 DAYS):

30'	\$390.00	Inclusive	PLUS	\$13.00 per foot per month for additional footage, if applicable
40'	\$520.00	Inclusive	PLUS	\$13.00 per foot per month for additional footage, if applicable
50'	\$650.00	Inclusive	PLUS	\$13.00 per foot per month for additional footage, if applicable

END-TIES

30'	\$500.00	Inclusive	PLUS	\$13.00 per foot per month for additional footage, if applicable
40'	\$630.00	Inclusive	PLUS	\$13.00 per foot per month for additional footage, if applicable
50'	\$760.00	Inclusive	PLUS	\$13.00 per foot per month for additional footage, if applicable

***** SECURITY DEPOSIT REQUIRED = EQUIVALENT TO ONE MONTHS RENT**

***** LIVE ABOARD = \$12 per foot on overall boat length/month in addition to slip fee**

*** All fees are based on the greater of:

- 1) The OVERALL length of the vessel, from bowsprit to stern and NOT waterline length
- 2) The slip length

*** Included in the monthly slip fee:

- 1) Hawaii General Excise Tax
- 2) Water, shower, laundry, and restroom facilities
- 3) Parking permit for one vehicle

*** Electricity will be separately metered and charged

*** Locker rentals available.