

HARBOR BAY COMMUNITY DEVELOPMENT DISTRICT

Vessel Registration Form

Vessel Owner Name: _____ Date: _____

Property Owner Name (if different than Vessel Owner): _____

Block Number: _____ Lot Number: _____

MiraBay Address where boat is docked: _____

Alternate Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email Address: _____

Vessel #1

FL Registration # _____ Boat Mfg _____

HIN# _____ Boat Size _____ Boat Name _____

TYPE: Power Sail PWC Other

HP: _____

REGISTRATION: Initial Annual Renewal

Vessel #2

FL Registration # _____ Boat Mfg _____

HIN# _____ Boat Size _____ Boat Name _____

TYPE: Power Sail PWC Other

HP: _____

REGISTRATION: Initial Annual Renewal

Vessel #3

FL Registration # _____ Boat Mfg _____

HIN# _____ Boat Size _____ Boat Name _____

TYPE: Power Sail PWC Other

HP: _____

REGISTRATION: Initial Annual Renewal

RELEASE OF ALL LIABILITY AND INDEMNITY FOR MECHANICAL BOAT LIFT. IN CONSIDERATION FOR THE USE OF THE MECHANICAL BOAT LIFT (THE "MECHANICAL BOAT LIFT") SEPARATING THE MIRABAY LAGOON FROM THE MIRABAY CANALS, I (THE UNDERSIGNED PARTY) HEREBY RELEASE, HOLD HARMLESS, AND AGREE TO INDEMNIFY THE DISTRICT ENGINEER, THE DISTRICT COUNSEL, TERRABROOK APOLLO BEACH, LLC, NEWLAND REAL ESTATE GROUP, LLC, NASH FINANCING, LLC AND NASH VINGT-HUIT, LLC, NEWLAND COMMUNITIES, L.L.C. AND TERRABROOK APOLLO BEACH, L.P., A DELAWARE LIMITED PARTNERSHIP, MIRABAY HOMEOWNERS ASSOCIATION, INC., A FLORIDA NON-PROFIT CORPORATION, THE HARBOR BAY COMMUNITY DEVELOPMENT DISTRICT, AND THEIR RESPECTIVE SUCCESSORS, ASSIGNS, MEMBERS, PARENTS, PARTNERS, SUBSIDIARIES, AFFILIATES, LENDERS, MANAGERS, OFFICERS, DIRECTORS, SUPERVISORS, REPRESENTATIVES, STAFF, CONSULTANTS, AGENTS, CONTRACTORS, SUBCONTRACTORS, AND EMPLOYEES OF EACH AND ANY OF ALL OF THE FOREGOING ENTITIES AND INDIVIDUALS (COLLECTIVELY, THE "IDEMNITEES" AND EACH INDIVIDUALLY REFERRED TO AS THE "IDEMNIFIED PARTY"), FROM AND AGAINST ANY AND ALL LIABILITY FOR INJURY, DAMAGE OR LOSS INCURRED OR SUSTAINED BY ME, MY MINOR CHILD (OR WARD) OR THIRD PARTIES, ARISING OUT OF MYSELF OR ANY MEMBER OF MY FAMILY OR ANYONE OPERATING A BOAT OR WATERCRAFT OWNED AND/OR USED ON THE DISTRICT WATERWAYS OR RELATED TO THE USE OF THE MECHANICAL BOAT LIFT. THE FOREGOING RELEASE, HOLD HARMLESS AND INDEMNITY INCLUDES: (A) ANY INJURY, DAMAGE OR LOSS CAUSED BY OR CLAIMED TO HAVE BEEN CAUSED BY THE NEGLIGENCE, WHETHER IN WHOLE OR IN PART, OR WHETHER BY ACT OR OMISSION, OF THE IDEMNITEES; (B) ANY INJURY, DAMAGE, AND LOSS ARISING OUT OF BODILY INJURY INCURRED OR SUSTAINED BY ME, MY MINOR CHILD (OR WARD) OR THIRD PARTIES; (C) ANY INJURY, DAMAGE AND LOSS TO PROPERTY OWNED BY MYSELF, ANY MEMBER OF MY FAMILY OR BY ANY OTHER PARTY; (D) ALL OTHER INJURIES, DAMAGES AND LOSSES OF ANY KIND. MY OBLIGATION TO INDEMNIFY THE ABOVE-NAMED PARTIES INCLUDES THE OBLIGATION TO INDEMNIFY SAID PARTIES AGAINST ANY ATTORNEYS' FEES AND COSTS INCURRED BY THE INDEMNIFIED PARTY IN THE DEFENSE OF ANY CLAIM OR SUIT RELATED TO OR ARISING OUT OF ANY SUCH INJURY, DAMAGE OR LOSS.

I HAVE READ THIS AGREEMENT CAREFULLY BEFORE SIGNING AND CERTIFY THAT I AM 18 YEARS OF AGE OR OLDER AND THAT I AGREE TO ABIDE BY THIS AGREEMENT. I FURTHER CERTIFY THAT I HAVE READ AND WILL ABIDE BY THE DISTRICT'S RULE REGARDING DISTRICT WATERWAYS AND BOATING FACILITIES, AS MAY BE AMENDED FROM TIME TO TIME, WHICH GOVERNS ALL RESIDENTS OF THE DISTRICT.

Date: _____

_____ Witness Initials

Print Name: _____

Approval

Signature of District Manager: _____ **Date:** _____

A copy of this form will be filed with the District. Keep your copy with important boating papers. If a vessel is added or deleted, please contact the District so we can update our files. Any registrations issued for Power Boats in excess of one Power Boat per lot are revocable at any time by the District in the District's sole discretion. The submission of this form to the District shall operate as the applicant's absolute consent to this potential revocation and waiver of any right to compensation from the District as a result of such revocation.

PRIVACY NOTICE: Under Florida's Public Records Law, Chapter 119, Florida Statutes, the information you submit on this form may become part of a public record. This means that, if a citizen makes a public records request, we may be required to disclose the information you submit to us. Under certain circumstances, we may only be required to disclose part of the information submitted to us. If you believe that your records may qualify for an exemption under Chapter 119, Florida Statutes, please notify the District Manager.