

REQUEST FOR BOATING REGULATION CHANGE PETITION FORM

We the undersigned support the following request- (If additional space is needed to describe your request please use the back of the form. Follow up calls and visits made be made by a Maryland Boat Act Representative)

Regulatory Request:

Contact Person: (Please Print) Contact person's information must appear on each page.

Name: _____

Address: _____

City/State/Zip: _____

Phone Number: _____ **E-Mail:** _____

Waterfront Property Owner? Yes / No Boater? Yes / No

May a Member of the Boat Act Advisory Committee Contact You? Yes / No

Signature/Date

Name: _____

Address: _____

City/State/Zip: _____

Phone Number: _____ **E-Mail:** _____

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