## MISSOURI STATE HIGHWAY PATROL BUOY APPLICATION

| ☐ PRIVATE DOCK (SECTION A ONLY) ☐ NO WAKE COVE (SECTION A & B ONLY) ☐ LIMITED NO WAKE COVE - VESSELS 40' + ☐ OTHER |  |  |                  |                                  |                          |         |              |                |                            |                     |                |  |
|--|--|--|------------------|----------------------------------|--------------------------|---------|--------------|----------------|----------------------------|---------------------|----------------|--|
| Ш  |  | A & C ONLY)  | LOOLLO 40        | + L                              |                          |         | ON A & EX    | (PLAIN REC     | QUEST                      | IN ADDITI           | IONAL REMARKS) |  |
|  |  | PPLICANT INFORMA   |                  |                                  |                          |         |              |                |                            |                     |                |  |
| APF  | PLICANT'S NAMI   | E (LAST NAME / FIRST NAM   | E / MI)          |                                  |                          |         | NAME OF BU   | JSINESS (IF AP | PLICABLE                   | ≣)                  |                |  |
| APPLICANT MAILING ADDRESS  |  |  |                  |                                  |                          | CITY    |              |                |                            | STATE               | ZIP CODE       |  |
| PRIMARY TELEPHONE NUMBER SECONDARY TELE  |  |  |                  |                                  |                          | JMBER   |              | APPLICANT E    | MAIL ADI                   | DRESS               |                |  |
| PRIMARY CONTACT (IF DIFFERENT THAN APPLICANT)  PRIMARY CONTACT TELEPHONE NUMBER / EMAIL ADDRESS                    |  |  |                  |                                  |                          |         |              |                |                            |                     |                |  |
| 911 LAKE STREET ADDRESS (BUOY LOCATION)  |  |  |                  |                                  | CITY                     |         |              |                |                            | STATE               | ZIP CODE       |  |
| NAME OF LAKE OR RIVER  |  |  |                  |                                  | NAME OF LAKE / RIVER ARM |         |              |                | NAM                        | ME OF COVE          | I              |  |
| MIL  | E MARKER   | NAME OF COUNTY   | NUMB             | IUMBER OF BUOYS REQUESTED APPLIC |                          |         |              | APPLIC         | PLICANT DOCK PERMIT NUMBER |                     |                |  |
| PROPOSED PLACEMENT OF BUOY(S) - EXAMPLE: 100' FROM CENTER OF DOCK  |  |  |                  |                                  |                          |         |              |                |                            |                     |                |  |
| SECTION B - NO WAKE COVE INFORMATION NEEDED  |  |  |                  |                                  |                          |         |              |                |                            |                     |                |  |
| 1. A diagram of the cove, including docks and the shoreline, and proposed placement of the buoy line.              |  |  |                  |                                  |                          |         |              |                |                            |                     |                |  |
| 2.   | A county plot map of the cove with the affected property owner's names indicated on their plot.                                      |  |                  |                                  |                          |         |              |                |                            |                     |                |  |
| <ul><li>3.</li><li>4.</li></ul>  | (sample petitions available for individually owned properties and multi-family properties such as condo complexes).                  |  |                  |                                  |                          |         |              |                |                            |                     |                |  |
| 5.   | A letter of approval from any property owner permitted a dock at or within one hundred (100) feet outside of the proposed buoy line. |  |                  |                                  |                          |         |              |                |                            |                     |                |  |
| 6.   |  |  |                  |                                  |                          |         |              |                |                            |                     |                |  |
| SECTION C - LIMITED NO WAKE COVE INFORMATION NEEDED (APPLIES TO VESSELS 40 FEET AND OVER)                          |  |  |                  |                                  |                          |         |              |                |                            |                     |                |  |
| 1.<br>2.   | cove on a do   | A diagram of the cove, including the proposed placement of signage to notify boaters of the limited no wake area (requires a sign on each side of the cove on a dock or the shoreline).  A letter of approval from property owners where the signs are to be placed. |                  |                                  |                          |         |              |                |                            |                     |                |  |
| 3.   | ·  | Proof of ownership for property owners where the signs are to be placed.   |                  |                                  |                          |         |              |                |                            |                     |                |  |
| 4.   | Additional inf   | Additional information may be requested from the applicant during the Patrol's investigation of the application.   |                  |                                  |                          |         |              |                |                            |                     |                |  |
| ΑГ   | DITIONAL F   | REMARKS  |                  |                                  |                          |         |              |                |                            |                     |                |  |
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|  |  |  |                  |                                  |                          |         |              |                |                            |                     |                |  |
| PRINT NAME   |  |  |                  |                                  | SIGNATURE                |         |              |                | DA                         | DATE OF APPLICATION |                |  |
|  |  | to: Missouri State Highwa  | ay Patrol, Water | Patrol [                         | Divisio                  | n, P.O. | Box 568, Jef | ferson City, M | O 65102                    | -0568.              |                |  |
|  | Email to: Buoys@mshp.dps.mo.gov Additional questions may be directed to the Water Patrol Division at 573-751-5071.                   |  |                  |                                  |                          |         |              |                |                            |                     |                |  |