



GEORGIA

DEPARTMENT OF NATURAL RESOURCES

LAW ENFORCEMENT DIVISION

Long Term Anchoring Permit Application

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

Date of Birth: _____ Driver's License Number: _____

Vessel Make: _____ Vessel Model: _____

Vessel Year: _____ Vessel Style: _____

Hull Identification Number (HIN): _____ Registration Number: _____

USCG Documentation # (if applicable): _____

Vessel Name (if applicable) _____

Requested Location 1 GPS Coordinates: _____ County: _____

Requested Location 2 GPS Coordinates: _____ County: _____

Requested Location 3 GPS Coordinates: _____ County: _____

Signature _____

Date _____

Please download the document, fill in, sign, and email to DNRLD.SPU@dnr.ga.gov or print, sign, and mail to:

Special Permits Unit
GA DNR Law Enforcement
2070 U.S. Hwy 278, S.E.
Social Circle, GA 30025