



LNNLRCD Dock Registration Application

Parcel #	Address of Property	Office Use Only RCD Dock #

Do you request the RCD to affix your numbers to your dock for a fee of \$20?

Yes _____ No _____

If yes, please enclose \$20 with this application, payable to RCD.

Contact Information:

Name: _____ Signature: _____ Date: _____

Mailing Address: _____ City, State, Zip: _____

Phone Number: _____ E-Mail Address: _____

Return applications to:

<p>Mail:</p> <p>LNNLRCD Attn: Dock Registration 404 Lake Ct Dixon, IL 61021</p>	<p>E-mail:</p> <p>rebecca.miller@lostlakercd.org</p> <p>Subject: Dock Registration</p>
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