

Float Plan

INSTRUCTIONS: Complete this plan before you go boating and leave it with a reliable person who can be depended upon to notify the Coast Guard, or other rescue organization, should you not return or check-in as scheduled. If you have a change of plans after leaving, be sure to notify the person holding your Float Plan.

Do NOT file this plan with the Coast Guard.

Vessel

IDENTIFICATION:

Name & Port: _____

Document / Registration: _____

Length: _____ Type: _____

Hull I& Trim Color _____

Propulsion

Paddle Gas Diesel Electric

Inboard Outboard Inboard/Outboard

Fuel - Capacity: _____ (gal) Cruising Range _____ mi

Year / Make _____

Mfgr. Hull ID No. _____

COMMUNICATIONS:

Radio Call Sign: _____

Cockpit Radio-1: Type _____ Freq. Monitored: _____

Cockpit Radio-2: Type _____ Freq. Monitored: _____

Handheld Radio: Type _____ Freq. Monitored: _____

DSC MMSI Number: _____

Cell Phone: _____

NAVIGATION: (Check all aboard)

Maps Charts Compass Navigation Rules

GPS Radar Loaran C _____

Safety & Survival

PFD: (specify qty)

_____ Type 1

_____ Type 2

_____ Type 3

_____ Type 4

_____ Type 5

VISUAL DISTRESS SIGNALS (specify qty)

_____ Mirror (day only)

_____ Red or Orange Distress Flag (Day only)

_____ Orange Smoke, Floating (Day & Night)

_____ Red Distress Flares (Day & Night)

_____ Electric distress light (Night only)

GROUND TACKLE: (Check all onboard & supply requested info.)

Working anchor - line length _____ ft.

Storm anchor - line length _____ ft.

AUDIBLE DISTRESS SIGNALS:

Horn / Whistle

Bell

MEDICAL KIT:

First Aid

Trauma

OTHER GEAR:

Survival suits

Safety harness

Dinghy / Life Raft

Fire Extinguisher

Flashlight / Searchlight

Sea anchor

EPIRB

NAME	AGE	GENDER	MEDICAL NOTES	HOME TELE.
OPERATOR: _____				
CAR DESCRIP LOCATION & LICENSE				
TRAILER DESCRIP LOCATION & LICENSE				

ARRIVAL OR DESTINATION	DATE	TIME	PLACE	MODE OF TRAVEL	CHECK-IN TIME

Contact Person 1: _____ Telephone # _____ Contact Person 2: _____ Telephone # _____
 Search & Rescue Telephone # _____ (See USCG Emergency Guide at

www.uscgaux.org/~0853302/FloatPlanCentral/BoatingEmergencyProtocol.htm

If there is concern for the safety –

- Contact the parties shown as the contact person – ask questions about the persons on board and the vessel – has there been any contact, is the location known, is the safety known?
- If there is genuine concern –
- Gather all the facts available – missed information or inaccurate information will cause confusion, wrong searches and risk the individuals, gather as many facts as possible before contacting a Search and Rescue Team

- Period of time the vessel has been overdue
- Purpose of the trip or voyage
- Description of vessel – color, size, shape, name, power, etc.
- Vessel's departure point and destination
- Places the vessel planned to stop during the transit
- Navigation equipment on board (such as GPS, Compass, Maps, Charts, LORAN, etc.)
- Survival equipment on board (personal flotation devices, EPIRB, flares, etc.)
- Number of people on board vessel, as well as personal habits e.g. dependability, reliability, etc.)
- Was the vessel already moored, or did a vehicle take it to the location?
- License plate number and description of the vehicle of the towing and/or crew transport vehicle.
- Communications equipment on board including radio frequencies monitored, cellular telephone numbers of people aboard.
- Additional points of contact in the area.
- Were there any pending commitments (work, appointments, etc.)?