



Motorized Vessel Float Plan (< 65 ft.)

Revised March 12, 2020

Date Submitted: _____ Submitted By: _____

VESSEL

Name: _____ Registration No.: _____ HIN: _____
 Make & Model: _____ Hull & Trim Color(s): _____
 Length: _____ ft. Maximum Weight Capacity: _____ lbs.
 Vessel's Company/Institution/Owner: _____ UMD Rental Charter Personal
 Engine Type & Horsepower: _____ Fuel Capacity: _____ gal.

OPERATOR/CREW/PASSENGERS/PARTICIPANTS

Vessel Operator: _____ Phone No.: _____

Boater Education Card MOCC USCG Captain's License

Name	Emergency Contact	Emergency Phone No.	UMD Affiliate?
1. _____	_____	_____	<input type="checkbox"/>
2. _____	_____	_____	<input type="checkbox"/>
3. _____	_____	_____	<input type="checkbox"/>
4. _____	_____	_____	<input type="checkbox"/>
5. _____	_____	_____	<input type="checkbox"/>

Please complete roster on another Float Plan sheet if needed, but do not exceed the Maximum Weight Capacity of the vessel

ITINERARY & ENVIRONMENTAL CONSIDERATIONS

Purpose of Trip: _____

	Date	Time	Location/Waypoint (Use marina/boat ramp addresses when applicable)
Depart			
Arrive			
Depart			
Arrive			
Depart			
Arrive			

Please complete itinerary on another Float Plan sheet if needed

Estimated Distance(s) from Shore: _____ mi.

Water Classification: Flat Water Class I Class II Class III ≤ Class IV Intracoastal Inshore Offshore

Tidal Pattern: Diurnal Semidiurnal Mixed High Tide(s): _____ Low Tide(s): _____

Time of Sunrise: _____ Time of Sunset: _____

TOWING VEHICLE

Towing Vehicle Make/Model/Color: _____ Vehicle Tag: _____

Trailer Tag: _____ Parking Location of Vehicle and Trailer: _____

COMMUNICATION

Vessel Monitor: _____ Phone No.: _____

Trip/Passenger Contact #1: _____ Phone No.: _____

Trip/Passenger Contact #2: _____ Phone No.: _____

Check in with Vessel Monitor: at departure and arrival every 3 hours every 5 hours Other: _____

UMD Department Emergency Contact: _____ Phone No.: _____

Local Rescue Authority: _____ Phone No.: _____

(e.g. United States Coast Guard, Natural Resource Police, Park Police, etc.; must be applicable to location of boating activity)

SAFETY EQUIPMENT CHECKLISTS

University Required Safety Equipment

The Department of Environmental Safety, Sustainability, and Risk **require** that all vessels have a means of communication in the event of an emergency.

- Emergency Communication Device

Federally Required Safety Equipment

The following lists are required safety equipment mandated by the United States Coast Guard while operating in federal waterways. Select and use the appropriate list below based on the length of the vessel.

Required Safety Equipment for Vessels < 16 ft.:

- Boating Safety Education Certificate or Equivalent
- Certificate of Number on Board (State Registration)
- Validation Decal Displayed
- PFDs: Type I, II, III, or V
Quantity: _____(NOT Type IV)
- ONE** Type B-1 Fire Extinguisher (when enclosed compartment)
- Backfire Flame Arrestor (inboard engines)
- Ventilation System
- Muffler
- Audible Distress Signal
- THREE** Nighttime Visual Distress Signal (Only required between sunset and sunrise or in restricted visibility)
- Navigation Lights (Only required between sunset and sunrise or in restricted visibility)

Required Safety Equipment for Vessels 16 – < 26 ft.:

- Boating Safety Education Certificate or Equivalent
- Certificate of Number on Board (State Registration)
- Validation Decal Displayed
- PFDs: Type I, II, III, or V
Quantity: _____(NOT Type IV)
- PFDs: Type IV
- ONE** Type B-1 Fire Extinguisher (when enclosed compartment)
- Backfire Flame Arrestor (inboard engines)
- Ventilation System
- Muffler
- Audible Distress Signal
- THREE** Daytime Visual Distress Signal
- THREE** Nighttime Visual Distress Signal (Only required between sunset and sunrise or in restricted visibility)
- Navigation Lights (Only required between sunset and sunrise or in restricted visibility)

Required Safety Equipment for Vessels 26 – < 40 ft.:

- Boating Safety Education Certificate or Equivalent
- Certificate of Number on Board (State Registration)
- Validation Decal Displayed
- PFDs: Type I, II, III, or V
Quantity: _____(NOT Type IV)
- PFDs: Type IV
- TWO** Type B-1 OR **ONE** Type B-II Fire Extinguishers
- Backfire Flame Arrestor (inboard engines)
- Ventilation System
- Muffler
- THREE** Daytime Visual Distress Signal
- THREE** Nighttime Visual Distress Signal (Only required between sunset and sunrise or in restricted visibility)
- Navigation Lights (Only required between sunset and sunrise or in restricted visibility)

Required Safety Equipment for Vessels 40 – < 65 ft.:

- Boating Safety Education Certificate or Equivalent
- Certificate of Number on Board (State Registration)
- Validation Decal Displayed
- PFDs: Type I, II, III, or V
Quantity: _____(NOT Type IV)
- PFDs: Type IV
- ONE** type B-1 and **ONE** Type B-II OR **THREE** Type B-1 Fire Extinguishers
- Backfire Flame Arrestor (inboard engines)
- Ventilation System
- Muffler
- Bell and Whistle (Bell must be at least 7.87 inches in diameter and whistle must be audible at least ½ mile; 4-to-6 second sound duration)
- THREE** Daytime Visual Distress Signal
- THREE** Nighttime Visual Distress Signal (Only required between sunset and sunrise or in restricted visibility)
- Navigation Lights (Only required sunset and sunrise or in restricted visibility)
- Current copy of “ISDOT ISCG International – Inland Navigational Rules”

State and Local Required Safety Equipment

If not operating a vessel in waterways not under the sovereignty of the United States Coast Guard, please check that all state and local laws and/or regulations are complied with. Please attach a copy of state and/or local required safety equipment/regulations with the submitted float plan if they vary from the Federal requirements. If not, please use the "Federally Required Safety Equipment List".

Following are recommendations for the above necessary safety requirements. All are not required.

Recommended Visual Distress Signals:

- Electric Distress Signal (night only)
- Flag (day only)
- Flare, Aerial (day and night)
- Flare, Handheld (day and night)
- Signal Mirror (day only)
- Smoke (day only)

Recommended Audible Distress Signals:

- Bell
- Horn
- Whistle

Recommended Emergency Communication Devices:

- VHF Radio
Monitored Channel: _____
- Cell Phone
- Satellite Phone

Additional Recommended Gear:

- | | | |
|---|---|---|
| <input type="checkbox"/> GPS Locator | <input type="checkbox"/> Rescue Throw Bag | <input type="checkbox"/> Mooring Line |
| <input type="checkbox"/> Paddle(s) | <input type="checkbox"/> Flashlight/Searchlight | <input type="checkbox"/> Charts and Compass |
| <input type="checkbox"/> Anchor and Spare | <input type="checkbox"/> Tool Kit | <input type="checkbox"/> Food and Water |
| <input type="checkbox"/> Spare Fuel | <input type="checkbox"/> First Aid Kit | <input type="checkbox"/> Sunscreen |
| <input type="checkbox"/> Binoculars | <input type="checkbox"/> Fenders | <input type="checkbox"/> Bug Repellant |
| <input type="checkbox"/> Boat Hook(s) | <input type="checkbox"/> Bailing Device | |

Other: _____

****If diving activities are occurring off the vessel, Emergency Oxygen MUST be on board the vessel and listed under the "Other" option****

Is there an EPIRB Station (Emergency Position-Indicating Radio beacon) aboard? Yes No EPIRB UIN: _____

Are there any PLBs (Personal Locator Beacon) aboard? Yes No How many? _____

PLB UIN(s): _____

****EPIRB and PLB registration required by Federal regulations: <http://www.beaconregistration.noaa.gov/>****