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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 planned. If you have a change of plans after leaving, be sure to notify the person holding your Float Plan. For additional copies of this plan, visit: www.floatplancentral.org



www.uscgboating.org

Do NOT file this plan with the U.S. Coast Guard

VESSEL

IDENTIFICATION:

Name & Hailing Port _____
Document / Registration No. _____ HIN _____
Year & Make _____
Length _____ Type _____ Draft _____ Hull Mat. _____
Color _____
Prominent Features _____

COMMUNICATION:

Radio Call Sign _____
DSC MMSI No. _____
Radio-1: Type _____ Ch./ Freq. Monitored _____
Radio-2: Type _____ Ch./ Freq. Monitored _____
Cell / Satellite No. _____
E-mail _____

PROPULSION:

Primary-- Type _____ No. Eng. ___ Fuel Capacity _____
Auxiliary--Type _____ No. Eng. ___ Fuel Capacity _____

NAVIGATION: (Check all on board)

Maps Charts Compass GPS / DGPS
 Radar Sounder _____

SAFETY & SURVIVAL

VISUAL DISTRESS SIGNALS:

- Electric S-O-S Light
- Orange Flag
- Orange Smoke
- Red Flares

AUDIBLE DISTRESS SIGNALS:

- Bell
- Horn / Siren
- Whistle

OTHER GEAR:

- Drogue / Sea Anchor
- EPIRB _____
- Fire Extinguisher
- Flashlight / Searchlight
- Food & Water for _____ days
- Foul Weather Gear
- Life raft / Dinghy
- Personal Locator Beacon
- Signal Mirror
- _____
- _____
- _____

PFDs: (Do not count Type IV devices)

_____ Quantity On Board

GROUND TACKLE:

Anchor: Line Length _____

PERSONS ONBOARD

OPERATOR:

Name _____
Address _____
City _____ State _____ Zip Code _____
Vehicle (Year, Make & Model) _____
Trailer will be parked at: _____

Age Gender Notes (Special medical condition, can't swim, etc.)

Has experience: with this Vessel with Area
Home phone _____
Vehicle License No. _____
Trailer License No. _____

PASSENGERS / CREW:

Name & Address

Age Gender Notes (Special medical condition, can't swim, etc.)

1. _____
2. _____
3. _____
4. _____
5. _____

Attach "Supplemental Passenger List" if additional passengers or crew on board.

ITINERARY

	DATE	TIME	LOCATION / WAYPOINT	MODE OF TRAVEL	REASON FOR STOP	CHECK-IN TIME
Depart						
Arrive						
Depart						
Arrive						
Depart						
Arrive						
Depart						
Arrive						
Depart						
Arrive						

Attach "Supplemental Itinerary" if there are additional locations or waypoints.

Contact 1: _____ Phone Number _____

Contact 2: _____ Phone Number _____

If you have a genuine concern for the safety or welfare of any persons on board the Vessel described above, who have not returned or checked-in in a reasonable amount of time, then follow the step-by-step instructions on the *Boating Emergency Guide™* included with this float plan, or on the Internet at:

www.floatplancentral.org/help/BoatingEmergencyGuide.htm

BOATING EMERGENCY GUIDE™

You will need the following items before you begin: 1) the **Float Plan** if one was given to you, 2) **Pen** or **Pencil**, 3) Clean sheet of **Paper** or **Writing Tablet**, and 4) your local **Telephone Directory**. Begin with Step 1 below.

Step 1: Do you have a genuine concern for the safety or welfare of any persons who have not returned or checked-in in a reasonable amount of time?

If YES, then continue with **Step 2**, otherwise **STOP**, no further action is required.

Step 2: Were you given a prepared Float Plan by anyone on board the vessel?

If YES, then continue with **Step 3**, otherwise got to **Step 5**.

Step 3: On the Float Plan, locate the two Contact lines at the bottom of the page. Call Contact number 1...

IF CONTACT #1	THEN						
Answers phone	<p>Take notes during your conversation.</p> <ol style="list-style-type: none"> Let the person know you are responding to a late return or check-in by the individuals designated on the Float Plan. Determine if the person you are talking to, or anyone else at that location, has recently had contact with anyone on the vessel, and when and where that contact occurred. Are you still concerned about the safety or welfare of any persons on board the vessel? <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th style="text-align: center;">IF</th> <th style="text-align: center;">THEN</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Continue with Step 4.</td> </tr> <tr> <td style="text-align: center;">No</td> <td style="text-align: center;">STOP. No further action is required.</td> </tr> </tbody> </table>	IF	THEN	Yes	Continue with Step 4 .	No	STOP . No further action is required.
IF	THEN						
Yes	Continue with Step 4 .						
No	STOP . No further action is required.						
Does not answer phone	Continue with Step 4 .						

Step 4: Call Contact number 2...

IF CONTACT #2	THEN						
Answers phone	<p>Take notes during your conversation.</p> <ol style="list-style-type: none"> Let the person know you are responding to a late return or check-in by the individuals designated on the Float Plan. Determine if the person you are talking to, or anyone else at that location, has recently had contact with anyone on the vessel, and when and where that contact occurred. Are you still concerned about the safety or welfare of any persons on board the vessel? <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th style="text-align: center;">IF</th> <th style="text-align: center;">THEN</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Continue with Step 6.</td> </tr> <tr> <td style="text-align: center;">No</td> <td style="text-align: center;">STOP. No further action is required.</td> </tr> </tbody> </table>	IF	THEN	Yes	Continue with Step 6 .	No	STOP . No further action is required.
IF	THEN						
Yes	Continue with Step 6 .						
No	STOP . No further action is required.						
Does not answer phone	Continue with Step 6 .						

Step 5: Take a moment to jot down the facts you know about each item in the checklist below.

DO NOT SPECULATE. Speculation about a detail may mislead Search And Rescue personnel, add to the overall search and rescue time, and adversely affect the outcome.

- Period of time the vessel has been overdue.
- Purpose of the trip or voyage.
- Description of the Vessel (type, size, color, features, etc.)
- Vessels departure point and destination.
- Places the Vessel planned to stop during transit.
- Navigation equipment on board (such as GPS, Loran C, Radar, Compass, Sounder, etc.)
- Number of people aboard the Vessel, as well as personal habits e.g. dependability, reliability, etc.
- Was the Vessel already moored, or did a vehicle tow it to the launch point?
- License plate number and description of the tow vehicle, and/or passenger transport vehicle.
- Communications equipment aboard, including type of radio and frequencies monitored, cellular or satellite telephone numbers of individuals, etc.
- Additional points of contact along the vessels planned route.
- Where there any pending commitments e.g. work, appointments, etc.

Continue with **Step 6**.

Step 6:

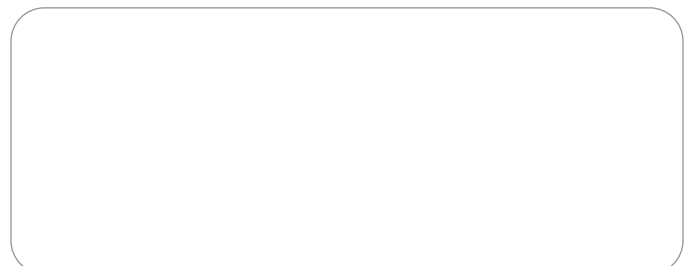
- Contact your local Law Enforcement agency (Police or Sheriff).
- Let the dispatcher know that you are responding to a late return or check-in by the persons on board the vessel.
- The dispatcher will instruct you from here.

Note: The dispatcher will provide you with the necessary contact or agency connection to get a search and rescue mission started. This is usually handled this way because it puts you closest to the agency conducting the actual search and rescue, eliminating an unnecessary middleman.
If the dispatcher would like a follow-up call from you on the outcome of the rescue, they will let you know.

- Continue with **Step 7**.

Step 7: Be patient... you've done everything you can possibly do for now. It is important to keep the telephone available, so emergency personnel can contact you with additional information and/or questions concerning the search and rescue effort.

STOP -- End of Guide



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www.floatplancentral.org