FLOAT PLAN

Leave a copy with a relative or a friend and in your vehicle at the launch site.

Your name: _____________________________________________________________________

Telephone: ____________________  Cell: _______________________

Description of boat:
  Make: __________________  Color: ___________________  Length: ______________
  Type: ___________  Name: ___________________  Registration number: ______________

Description of engine:
  Type: ________  Horsepower: ______  # of engines: ______  Fuel capacity: _____________

Number of persons onboard: ______________
  Name: ____________________________________  Cell:  _______________________
  Name: ____________________________________  Cell:  _______________________
  Name: ____________________________________  Cell:  _______________________
  Name: ____________________________________  Cell:  _______________________

Survival equipment aboard. Check as appropriate.

- Life preservers
- Flares
- Flashlight
- Signal mirror
- EPIRB
- Anchor(s)
- Smoke signals
- Horn
- Water
- Paddles
- Raft or dinghy
- Food
- Extra Clothing

Radio  ❑ Yes  ❑ No  Type: ___________________  Call sign: __________________

MMSI #: ______________ (For DSC-capable VHF marine radio linked with GPS # obtained from BoatU.S.)

Trip information:
  Hunting / Fishing / Boat Ride  Going in or around: _______________________________________

(Please Circle)

Date and time of departure: _______________________________________________________________

Other pertinent information: _______________________________________________________________

(Rev. 08-18-2011)