



# FLOAT PLAN

Date \_\_\_\_\_

Complete this plan before you go boating. These are the questions the Coast Guard will ask in the event that you need help. It is not required that you fill in all the blanks on this form, but the more information you can provide, the easier it will be to render help if needed. Leave the plan with a reliable person, such as family member, the Harbor Master or at a marina. Ask the person to notify the Coast Guard or other local authority if you do not return on schedule. Cancel the plan on your return. **Remember, this plan is to help the Coast Guard to help you!**

**DO NOT FILE THIS PLAN WITH THE COAST GUARD.**

Name of Vessel \_\_\_\_\_ Type \_\_\_\_\_

Operator Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_ Cell \_\_\_\_\_

## Description of Vessel

Make \_\_\_\_\_ Reg # \_\_\_\_\_ # Sails \_\_\_\_\_ # Engines \_\_\_\_\_ Type \_\_\_\_\_ Fuel Cap \_\_\_\_\_

Length \_\_\_\_\_ Color \_\_\_\_\_ Color Trim \_\_\_\_\_ Color of Canvas Top \_\_\_\_\_

## Survival Equipment

(The Coast Guard will want to know if you are wearing the Lifejackets)

PFDs Type \_\_\_\_\_ # \_\_\_\_\_ Marine Radio \_\_\_\_\_ EPIRB \_\_\_\_\_ Type \_\_\_\_\_ # Flares \_\_\_\_\_ VDS \_\_\_\_\_

Type \_\_\_\_\_ # \_\_\_\_\_ Anchors \_\_\_\_\_ Length of Anchor Line \_\_\_\_\_

Type \_\_\_\_\_ # \_\_\_\_\_ Raft or Dinghy \_\_\_\_\_ Length \_\_\_\_\_ Name \_\_\_\_\_

## Trip Details

Departure Location \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Return \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Intermediate Location \_\_\_\_\_ Lat \_\_\_\_\_ Long \_\_\_\_\_



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## Other People on Board

Name	Age	Phone	Known Medical Condition
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## Land Vehicles

Auto License \_\_\_\_\_ State \_\_\_\_\_ Make & Type \_\_\_\_\_ Color \_\_\_\_\_  
Trailer \_\_\_\_\_ State \_\_\_\_\_ Where Parked \_\_\_\_\_

## Notification

If Not Returned by: \_\_\_\_\_ (Date, Time) **Call the Coast Guard at:** \_\_\_\_\_  
Or Local Authority at: \_\_\_\_\_ Notify Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

## USCG AUX

This Float Plan Form is produced by the United States Coast Guard Auxiliary. We provide Coast Guard-approved Boating Safety classes, Boating Skills and Seamanship classes, Coastal Navigation classes, and Coast Guard-approved Vessel Safety Checks to the boating public. We work closely with the United States Coast Guard in the performance of its mission. We are an all-volunteer organization and we invite your membership and participation. Please visit our website, below, or call the United States Coast Guard for an Auxiliary contact number in your area. For Information, visit our web site at [www.uscgaux.org](http://www.uscgaux.org)

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