

CHECK OFF SHEET**SECTION VI VSC AND ADDITIONAL FEDERAL/STATE REQUIREMENTS - Completed by VE**

Yes	No	Item	Yes	No	Item
		1. Numbering			9. Fuel System
		2. Registration / Documentation			10. Dewatering device
		3. Sound Producing Device			11. Overall vessel condition
		4. Personal Flotation Device (PFD)			12. Electrical systems
		5. Fire extinguishers (minimum)			13. State requirements
		6. Visual Distress Signals (VDS) (if required)			14. Certificate of Compliance
		7. Ventilation			15. Hull Identification Number (HIN)
		8. Backfire Flame Arrester			

SECTION VII REQUIREMENTS FOR A PWC FACILITY - Completed by VE

Yes	No	Item	Yes	No	Item
		1. Meets all requirements of Section VI			17. Hat or Helmet
		2. Portable waterproof VHF-FM radio			18. Gloves with non-slip palms
		3. Satisfactory radio check on required frequencies			19. Foot protection
		4. Safety Lanyard (kill switch) & spare			20. Spare spark plugs
		5. Flashlight			21. Rescue throw bag or rescue heaving line (minimum 50 feet)
		6. PFD, Impact rated for max speed of PWC			22. Towline (minimum 30 feet)
		7. CG Auxiliary or Patrol Ensign (optional)			23. PWC Tool Kit
		8. First Aid Kit			24. Inspector viewed Reg/Doc papers for ownership
		9. Visual Distress Signal (VDS) (if required)			25. Attached Assent & Authorization form for multiple owners
		10. Knife (3" blade minimum)			26. Attach info requirements for corporate owned facilities
		11. Watch			27. Attached authorization for corporate offer for use
		12. Throwable PFD (Type IV)			28. Fire extinguisher (mounted)
		13. Sponges (2)			
		14. Emergency Survival Blanket			
		15. Mooring Lines (2)			
		16. Goggles or Sun Glasses			

NOTES

INSTRUCTIONS**PRIVACY ACT STATEMENT**

1. Authority: 14 USC 826 and 827
2. Principal Purpose: To provide a means of selection and acceptance of vessels of U.S. Coast Guard operational facilities.
3. Routine Use: Retained by directors of Auxiliary and cognizant USCG group commanders as a record of which vessels have been accepted by the director as U.S. Coast Guard operational facilities.
4. Disclosure: Voluntary, however, the detailed information requested on this form enables the Coast Guard to select qualified vessels as Coast Guard facilities. Failure by the member to provide all or part of the information will prevent the acceptance of the vessel as a Coast Guard facility.

Make sure your letters and numbers are printed like this:

1 2 3 4 5 6 7 8 9 0 A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

PWC FACILITY INSPECTION AND OFFER FOR USE FORM

This form is used to report a PWC vessel facility inspection and offer for use as well as to report changes in the status of a facility. If you sell or trade your facility and acquire a new one, this form is to be used to remove the old facility and enter the new one into the data base.

INSTRUCTIONS (Use Ballpoint pen)

Check the appropriate box, in the heading, for the type of report - initial (new) report, reinspection (reoffer), or change.

SECTION I - OWNER DATA Shaded area in SECTION I is for Director use only.

OWNER'S MEMBER NUMBER - The member holding the largest percentage of ownership enters their member number. If this owner is not Auxiliary then enter "NON AUX." If the facility has multiple owners and is being offered of use, then attach "Assent and Authorization for Use" information outlined in the Auxiliary Operations Policy Manual. If the facility is corporate owned, leave member number blank. If the facility is corporate owned and being offered for use, then also attach the required information and the "Corporate Resolution" authorizing offer for use as outlined in the Auxiliary Operations Policy Manual.

OWNER'S LAST NAME - Enter the last name, first name, and middle initial that corresponds to the member number. If the facility is corporate owned, enter the corporation's name.

TYPE OF OWNERSHIP - Check the appropriate box for ownership of the facility.

CO-OWNER'S MEMBER NUMBER AND LAST NAME - Complete as above instructions for "OWNER", except this applies to the owner who holds the second largest percentage of ownership.

REGISTRATION NUMBER - Enter the facility's state registration number. Do not use hyphens or leave spaces between letters and numerals. Example: MU 185 NA is entered as MU185NA or CZ-1625-BA is entered as CZ1625BA. Leave unused blocks blank.

FACILITY'S NAME - Enter the name of the vessel. If the vessel does not have a name, leave this box blank.

FACILITY'S DISTRICT CALL SIGN - Enter the district assigned CALL SIGN for the facility being inspected.

HIN - Enter the Hull Identification Number on the vessel. Verify that it matches the HIN listed on the vessel registration.

SECTION II - FACILITY DATA (Note: To be completed by owner before inspection of vessel.)

VESSEL LOCATION - Enter the city and state where the vessel is located or berthed.

ZIP CODE - Enter the zip code where the vessel is located or berthed.

TRAILERED - Check the appropriate box.

MANUFACTURER - Enter the name of the manufacturer of the vessel.

MODEL - Enter the manufacturer's model number or the model name of the vessel.

YEAR - Enter the year the vessel was built.

LENGTH - State the length of the hull in feet (as indicated on the registration papers.)

BEAM - State beam of vessel in feet.

DRAFT - State the draft of vessel in feet.

ENGINE MANUFACTURER - Indicate the name of the engine manufacturer.

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MODEL NUMBER - Enter the engine model number.

YEAR - Enter the year the engine was installed in the vessel.

HORSEPOWER - Enter the total horsepower of the engine.

FUEL CAPACITY - Enter the total fuel capacity in U.S. gallons.

PASSENGERS - Enter the number of passengers the vessel can seat, including the operator.

FUEL CONSUMPTION - Indicate the fuel consumption per hour and speed in knots for economical, cruise, and maximum. (NOTE: ONE (1) KNOT = 1.15 STATUTE MILES PER HOUR)

VHF-FM RADIO EQUIPMENT - Enter the manufacturer's name, model number, output in watts, and government channels/frequencies available for the radio equipment. If synthesized, so state in lieu of listing all frequencies. (NOTE: Indications such as Channel 16, Channel 83, etc. is acceptable.)

GPS/DGPS NAVIGATION EQUIPMENT - Enter the manufacturer and model number for the equipment.

OTHER SPECIAL EQUIPMENT - In the space provided list other equipment or attach a separate sheet that lists other special equipment, if necessary. (Example: EPIRB, strobe light, cell phone, CB radio, etc.).

TOTAL VALUE OF VESSEL - Enter the total fair market value of the vessel and all its equipment. If the vessel and all of the equipment is new enter the cost (in whole dollars).

VALUE-HULL - Enter the fair market value of the hull. If the vessel is new enter the cost (in whole dollars).

VALUE-MACHINERY - Enter the fair market value of the vessel's engine, and any other machinery installed on the vessel, if known. If it is new, enter the cost (in whole dollars). If unknown, leave blank; value is included in "VALUE-HULL".

VALUE-ELECTRONICS - Enter the fair market value of all electronics installed on the vessel. If all are new enter the cost (in whole dollars).

VALUE - OTHER EQUIPMENT - Enter the fair market value of all other equipment installed in the vessel. If all are new enter the cost (in whole dollars).

(NOTE: The sum total of the values of the hull, machinery, electronics and other equipment cannot exceed the total value listed for the vessel).

SECTION III - OWNER STATEMENT AND SIGNATURE

Check the appropriate box but be sure you fully understand the statements before checking the statement which best describes the owner's intentions on the OFFER FOR USE. Any questions should be answered to the owner's(s) complete satisfaction prior to signing and dating the form. For corporate owned facilities, the appropriate designated officer of the corporation is to sign as the owner. Remember, before any facility can be accepted for use, ALL appropriate information must be provided to and approved by the director.

SECTION IV - VE's ENDORSEMENT (To be completed by VE only)

If facility does not meet requirements, return VE signed form to owner - don't forward to director for signature.

Enter date of inspection. Enter your member number.

Print VE name and sign the form.

Forward in accordance with district policy.

SECTION V - DIRAUX ENDORSEMENT (To be completed by director only).

Make sure required documents are attached before signing.

Confirm (or issue) district call sign in SECTION I.

Sign and date the form.

Forward copies in accordance with district policy.

SECTION VI - VSC and Additional Federal/State Requirements (To be completed by VE only).

Check the appropriate boxes.

Item 6 - Visual Distress Signals (VDS): Federal requirement: one electric distress light or 3 combination (day/night) red flares. Required to be carried when operating between sunset and sunrise only.

SECTION VII - Requirements for a PWC Facility (To be completed by VE only).

Check the appropriate boxes.

Item 9 - Visual Distress Signals (VDS): Auxiliary Operations Policy Manual, COMDTINST M16798.3 (series), requires CG approved combination (day/night) VDS attached to PFD if operated over 3 miles from land.

Make sure required documents are attached. See SECTION I instructions.