



FLOAT PLAN

Complete this form before going out on your boat, and leave it with a reliable person who will notify the Coast Guard and local authorities if you do not return as scheduled. If you are delayed and it is not an emergency, inform the person with your float plan to avoid an unnecessary search.

- Name of person filing this plan: _____
Telephone #: (_____) _____ - _____
- Description of boat: Registration number: _____ Type: _____ Make: _____
Color: _____ Trim: _____ Length: _____ Name: _____
- Names of persons on board: Age: Address:

Telephone #: (_____) _____ - _____

Telephone #: (_____) _____ - _____

Telephone #: (_____) _____ - _____

Telephone #: (_____) _____ - _____

Telephone #: (_____) _____ - _____

Telephone #: (_____) _____ - _____
- Description of engine: Type: _____ Horsepower: _____ # of engines: _____ Fuel capacity: _____
- Survival equipment on board. Check as appropriate:
 Life Jackets (PFDs) Flares Flashlight Signal mirror Anchor(s) Raft or dinghy
 Smoke Signals Horn Water Paddles Food
- Radio Yes No Type: _____ Frequencies: _____ Call sign: _____
- Trip expectations
Leaving from: _____ Going to: _____
Departing on: _____ / _____ am pm Returning: _____ / _____ am pm
date time date time
- Other pertinent information: _____
- Description of automobile: Trailer license #: _____ License Plate #: _____
Make: _____ Model: _____ Color: _____ Where parked: _____
- If not returned by: _____ / _____ am pm
Call: _____ date time
U.S. Coast Guard telephone #: (_____) _____ - _____
Local authority: _____ Telephone #: (_____) _____ - _____