

AUXILIARY OPERATIONAL FACILITY CHECK-OFF SHEET

Instructions:

1. To be completed by facility inspector
2. Explain negative answers.
3. Attach to ANSC 7003 (Rev 01-05) and submit to DIRAUX
4. **Reverse to be completed for coastal/offshore vessel ONLY.**

NAME: _____ Co-Owner: _____ Member ID # _____

NAME OF FACILITY: _____ DIVISION: _____ FLOTILLA: _____

Vessel is recommended for: (check one)

Inland Semi Protected Coastal/Offshore
(see reverse)

HULL: Wood Fiberglass Steel Aluminum Carbon Fiber
 Concrete Other _____

Item:	Note	Yes	No	Item:	Note	Yes	No
Portable Pump	(a)			Vessel Configuration	(e)		
PFD w/Light	(b)			Towline	(f)		
Damage Control Kit	(c)			Throwable Float w/Line			
Tide Table	(d)			Non-Owner Consent Form	(g)		

NOTES:

- (a) Must be capable of pumping 10 GPM. Not required for Inland/ Protected.
- (b) One for each crewmember, per minimum crew requirements, plus four PFD's With no lights required; 2 child PFD's required for off-shore vessels.
- (c) Reference Boat Crew Manual: Volume V, Chapter III (search & rescue).
- (d) Not required for Inland/ Protected.
- (e) Configuration shall be such that the vessel can safely perform all operational functions. There shall be adequate room to handle tow lines in the fat portion of the vessel. Cleats shall be through bolted and reinforced.
- (f) Minimum Towline Requirements: (nylon or equivalent).

<u>Coastal Vessels</u>			<u>Inland Vessels</u>		
Class	Dia.	Length	Class	Dia.	Length
A and 1	1/2"	100'	A and 1	1/2'	50'
2 Less than 35 feet	1/2"	200'	All Others	1/2'	100'
Vessels over 35 feet	3/4"	200'			

(g) **Non- Owner Consent Form # 17 Must be turned in each year.**

*** Request two 2 3x5 photos of your facility (side & stern view) be submitted with your facility papers. (ALL VESSELS if not already in)**

(inspectors signature)

(date)

(SEE REVERSE)

CERTIFICATION FOR COASTAL/OFFSHORE FACILITY

Instructions:

1. Inspectors shall insure facility meets all requirements on reverse.
2. Vessels less than **Twenty Four Feet** do not qualify for this certification.
3. All exemptions are to be requested from DIRAUX.
4. In the event of disagreement on configuration or adequacy of equipment . Resolution shall be made by the DSO Operations and /or DIRAUX.

1. Any vessel over **Twenty Four Feet (24')** equipped as an operational facility and meeting the following criteria, may be designated as a Coastal/Offshore Operational Facility.

2. **Minimum rated horse power**

- a. Gasoline 150 h.p.
- b. Diesel 120 h.p.
- c. Sailboats excluded but must have auxiliary power.

3. **Minimum 24" freeboard**

- a. Measurement from lowest opening in hull excluding closed scuppers.

4. **Deep V Configuration or trawler hull**

- a. Class II and III excluded.
- b. Sailboats excluded.

5. **Minimum 8' beam**

6. **Cabin**

- a. Sufficient size to protect two crewmember from weather and provide bunk for injured/sick person.
- b. Contain Sufficient space for navigation and plotting.
- c. Contain enclosed head facilities with adequate privacy.

7. **Minimum Fuel Capacity** = 100 mile range (Sailboats = 30 mile range).

8. **Sufficient working area** at stern to allow the proper handling of tow lines.

9. **REMARKS:** _____

We certify that the facility _____
Meets all the requirements to be classified as a Coastal/Offshore Facility.

(owners signature)

(date)

(inspector's signature)

(date)

(SEE REVERSE)