



WOODS HOLE OCEANOGRAPHIC INSTITUTION

SMALL BOAT FLOAT PLAN

Boat Name: _____

Boat Operator: _____

Operator's signature acknowledges that operator & crew understands their roles for the "cruise"

Cognizant Person: Front Desk (WHOI)/ _____ (Away)
(508) 548-1400

Departure Time and Date: _____

Estimated Time of Return (ETR) and Date: _____

Check local radio or internet weather

Nature of Work: _____

Area of Work: _____

Travel Routes: _____

Scuba Diving Plans: Yes _____ No _____ Depth _____ No. of Dives _____
(Diving Equipment: Rope and Ladder)

List Trip Participants & Job

Small Boat Office Use Only

_____ Day(s)

Project # _____

EQUIPMENT CHECK

(Note not all items on equipment check list apply to each boat)

Boat Equipment Check

_____ Oil level

_____ Fuel level at Departure (Gals.)

_____ Charged Batteries

_____ Tools

_____ Engine Hours

Safety Equipment Check

_____ #PFD's**

_____ Fire Extinguisher(s)

_____ First Aid Kit

_____ Cell Phone (No. _____)

_____ VHF Radio, DGPS

_____ Nav. Aids (charts, compass)

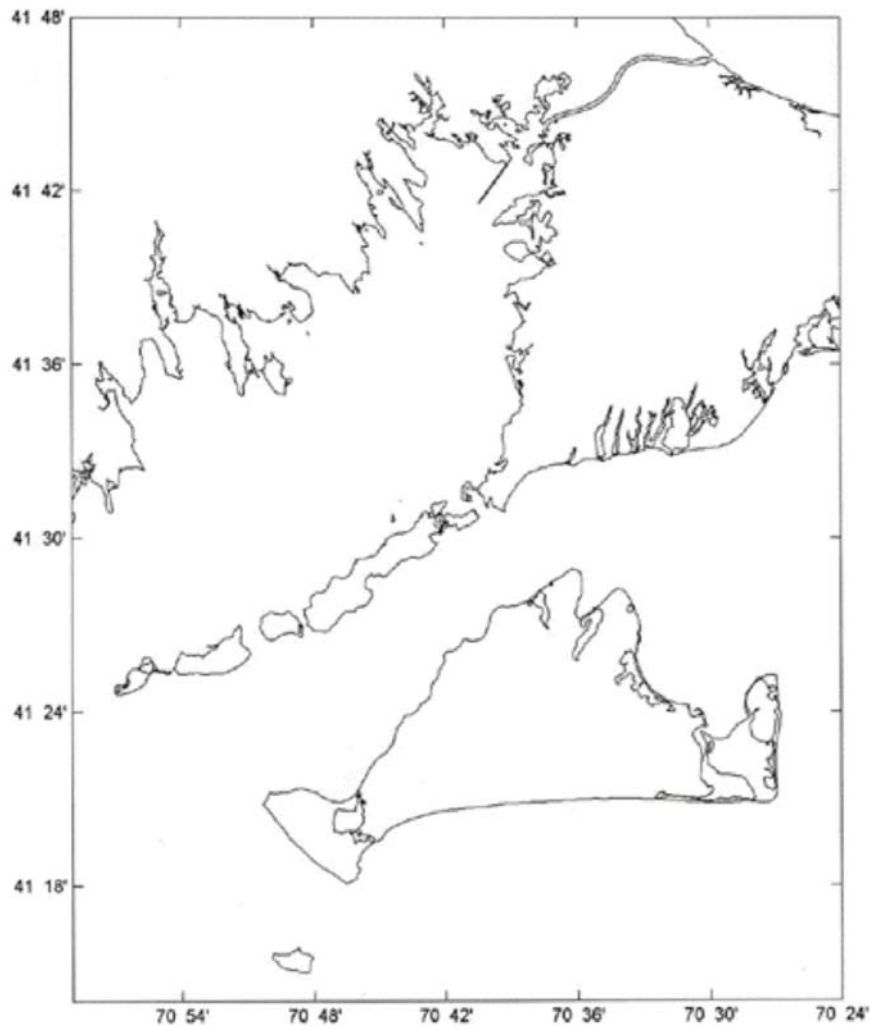
_____ Paddles (Calanus), Bailer, Anchor

_____ Ditch case

** State and Federal required safety gear, USCG recommends that all persons wear PFD at all times.

When the water temperature is below 50°F, use of thermal bouyant worksuits are encouraged.

Local Area Chart: Please circle general area of research for WHOI-based departures and include route of travel



COMMENTS/DEFICIENCIES (please let us know):

At Conclusion of Cruise:

_____ Turn off Main Battery

_____ Refuel Boat (if needed)

_____ Tilt Engine Up (Calanus)

_____ Rinse off boat and gear with fresh water

_____ Turn off Circuit Breakers

_____ Store all gear including the boat in the proper

_____ Fuel level at Arrival

_____ Engine Hours