

Welcome

- How you can enhance boat inspections and safety checks for the recreational boater. Go beyond asking to see a life jacket, throwable flotation device, fire extinguisher, and visual distress signals. Make sure that everyone on board understands how to use these devices and offer ways to practice with each device.

Beyond the Basics

Recreational Boat Inspection or Safety Check

Introduction

Scenario

Disclaimer

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- The previous story is being used to enhance my presentation by helping to emphasize the importance of providing enhanced information to the recreational boater during a safety check or inspection.
- There is no information taken from a true story.
- No people, animals, or fish were harmed due the telling of this story.

Encounters

Uniforms

- First impressions
- Sets the tone of the encounter



First Contact

Boater's Card



Life Jackets (33 CFR 175)

- Where are they
- How to choose
- Try yours on
- Discuss fit
- Been in the water with one?
- Accessories



Throwable Devices (Type IV)

- Types of throwable
- Have you used one?
- Do you have a line attached?
- Alternate throwable devices?



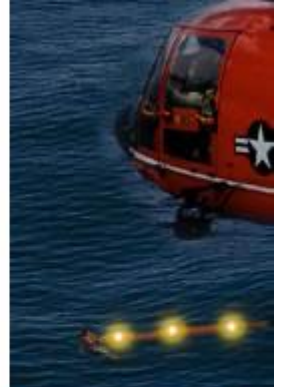
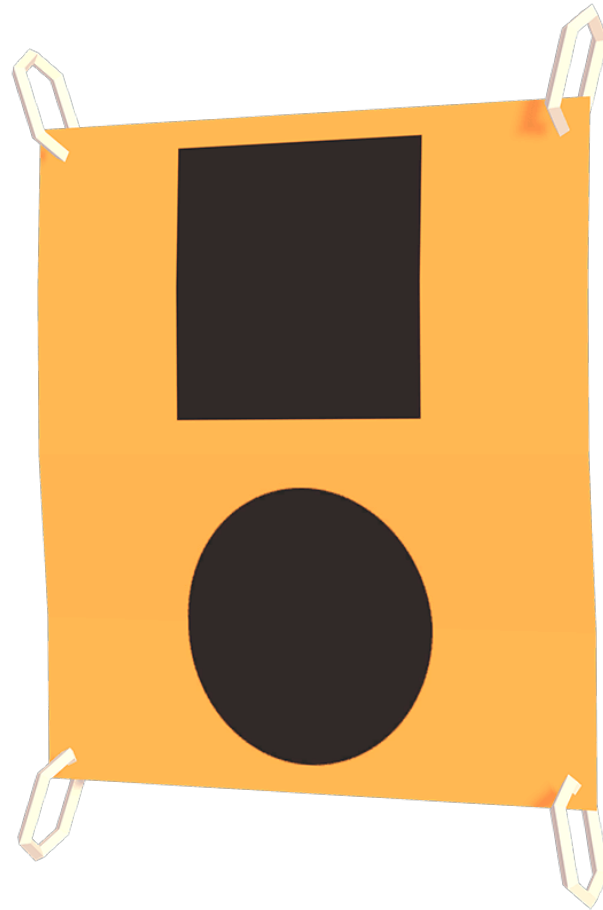
Fire Extinguishers (46 CFR 25)

- Talk about them with persons onboard
- No one ever told me about it
- How long do they last
- How do they work
- Where do you stand
- Alternatives to using an extinguisher to put out a fire
- Jet Boat
- Burn pan



Signaling Devices 33 CFR 175.101)

- Pyrotechnics
- Electronic
- Physical
- How to handle them



Other Thoughts

Inspections vs. Safety Checks

- Inspection




REPORT OF INSPECTION		REPORT NUMBER			
		89150			
REGISTRATION NO.		NO./STICKER DISPLAY PROPER			
		YES <input type="checkbox"/> NO <input type="checkbox"/>			
HIN		VALID <input type="checkbox"/>			
FUEL COMPARTMENT <input type="checkbox"/> OPEN <input type="checkbox"/> CLOSED ENGINE COMPARTMENT <input type="checkbox"/> OPEN <input type="checkbox"/> CLOSED		MAKE AND MODEL HULL MATERIAL LENGTH FT. IN. ACTIVITY <input type="checkbox"/> UNDERWAY <input type="checkbox"/> RAMP INSP.			
USE <input type="checkbox"/> PLEASURE <input type="checkbox"/> LIVERY		<input type="checkbox"/> PASSENGER FOR HIRE <input type="checkbox"/> OTHER (SPECIFY)			
PROPULSION		H.P.			
<input type="checkbox"/> INBOARD <input type="checkbox"/> OUTBOARD <input type="checkbox"/> HAND PROPELLED <input type="checkbox"/> SAIL <input type="checkbox"/> JET <input type="checkbox"/> OTHER					
NAME AND ADDRESS OF OWNER					
NAME AND ADDRESS OF OPERATOR					
DATE		LOCATION OF WATERWAY			
19__		NAME			
TIME		COUNTY/CITY			
M.		<input type="checkbox"/> LAKE <input type="checkbox"/> RIVER <input type="checkbox"/> OCEAN <input type="checkbox"/> BAY <input type="checkbox"/> DELTA			
RESULTS OF INSPECTION (CHECK ONLY APPLICABLE ITEMS)					
YES	NO	ITEM	YES	NO	ITEM
		VALID CERTIFICATE OF NUMBER			SOUND SIGNAL DEVICES
		NUMBERS PROPERLY DISPLAYED			VISUAL DISTRESS SIGNALS
		REQUIRED LIGHTS (NIGHT ONLY)			VENTILATION
		FLAME ARRESTOR PROPERLY INSTALLED			WATER SKI FLAG
		PERSONAL FLOTATION DEVICES ADEQUATE			FIRE EXTINGUISHERS ADEQUATE
		NUMBER OF APPROVED ACCEPTABLE FLOTATION DEVICES ON BOARD			NUMBER OF APPROVED SERVICEABLE FIRE EXTINGUISHERS ON BOARD
		NUMBER OF NONAPPROVED OR NOT SERVICEABLE FLOTATION DEVICES			NUMBER OF NONAPPROVED OR NOT SERVICEABLE FIRE EXTINGUISHERS
REMARKS (DESCRIBE DETAILS OF DISCREPANCIES, CONTINUE ON REVERSE IF NECESSARY)					
CITATION ISSUED <input type="checkbox"/> YES <input type="checkbox"/> NO					
ISSUING AGENCY		OFFICER'S SIGNATURE		TITLE	
STATE <input type="checkbox"/> COUNTY <input type="checkbox"/> CITY <input type="checkbox"/>					

Inspections vs. Safety Checks

- Safety Check



	<h2 style="margin: 0;">VESSEL SAFETY CHECK (VSC)</h2> <p style="font-size: small; margin: 0;">To be completed by a U.S. Coast Guard approved Vessel examiner. See the back of this form for a brief explanation of required items. A Federal Requirements pamphlet is also available.</p>	<p>Date of VSC: _____</p> <p>Decal Awarded: Yes <input type="checkbox"/> No <input type="checkbox"/></p>																																																																																				
<p>Owner/Operator Name: _____</p> <p>Owner/Operator has attended Safe Boating Class: Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Location of VSC – County: _____ State: _____</p> <p>Replaced decal was: Last Year <input type="checkbox"/> Outdated <input type="checkbox"/> First Time <input type="checkbox"/></p>		<p>VESSEL INFORMATION:</p> <p>Registration or Documentation Number: _____</p> <p>HIN: _____</p> <p>Length: <16 <input type="checkbox"/> 16-25 <input type="checkbox"/> 26-39 <input type="checkbox"/> 40-65 <input type="checkbox"/></p> <p>Powered by: Gas <input type="checkbox"/> Diesel <input type="checkbox"/> Sail <input type="checkbox"/> Other <input type="checkbox"/></p> <p>Area of Operations: Inland <input type="checkbox"/> Coastal <input type="checkbox"/></p> <p>Type: PWC <input type="checkbox"/> Open <input type="checkbox"/> Cabin <input type="checkbox"/> Other <input type="checkbox"/></p>																																																																																				
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<p>I certify that I have personally examined this vessel and find it meets the above requirements at the time of the Vessel Safety Check. I am a qualified Vessel Examiner of the: CGAUX <input type="checkbox"/>, USPS <input type="checkbox"/>, State of _____ <input type="checkbox"/>, or _____ <input type="checkbox"/></p> <p>Printed Name of the Examiner _____ Examiner Number _____</p> <p>Examiner Signature _____ Telephone/Mobile Number _____</p>																																																																																						
<p>Additional Comments: <i>This is not an official boarding for law enforcement purposes. It is recommended that you correct any deficiencies noted. This checklist is furnished for your information. There is no assumption of liability of any kind for advice given or opinions expressed in connection to this examination. By accepting the Vessel Safety Check decal, you are pledging to maintain your boat and equipment to the standard of safety exhibited during this examination. Please remove the Vessel Safety Check decal if the boat is sold or no longer meets the requirements.</i></p> <p>I am consenting to this Vessel Safety Check of my watercraft with full knowledge that it is provided to me as a public service on a volunteer basis without cost, and I understand and agree that my receipt of a Vessel Safety Check shall not constitute or be construed as a warranty or guarantee as to either the qualification, knowledge, or skills of the operator; the seaworthiness of the vessel; or the serviceability or adequacy of any equipment on board.</p>																																																																																						
<p>Owner/Operator Signature: _____</p>		<p>Date: _____</p>																																																																																				

Safety, Mission, Fun

- You must remain safe while engaging
- Stay on task
- **HAVE FUN!!!!!!**

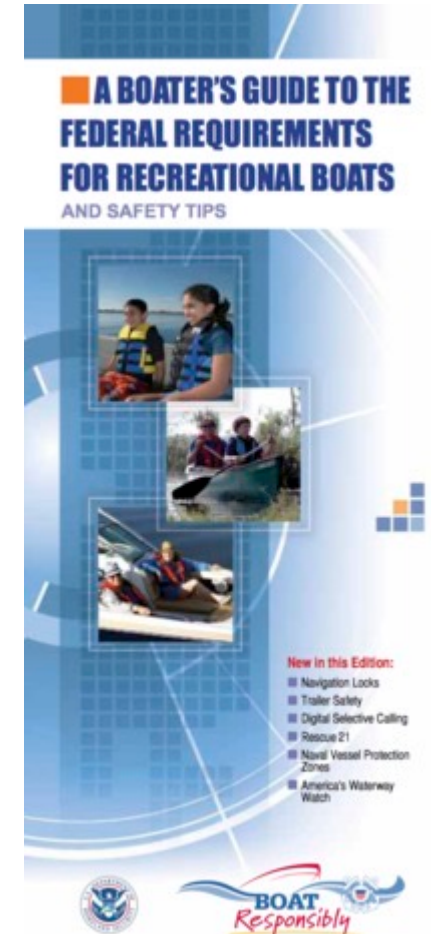
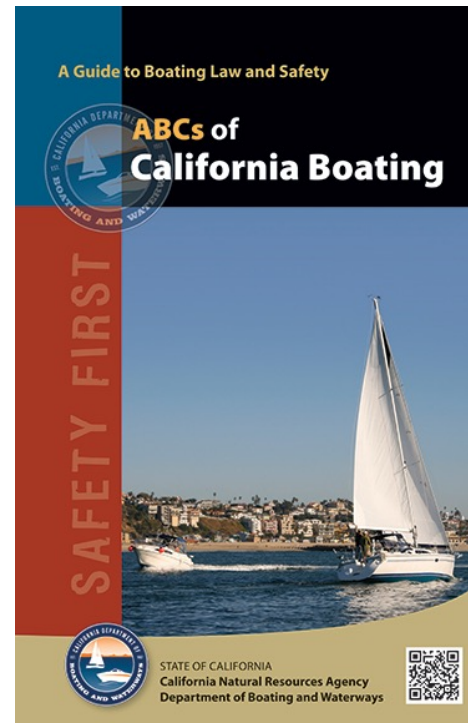


Training, Education, Experience

- It's a total package

Handouts

- Many pamphlets available



Swag

- Give out the cool stuff
- Kids love it



Questions and Answers

Credits

Credits

- Los Angeles County Sheriff's Department
 - Herb Haas – Reserve Deputy Sheriff
 - Sgt. Kamal Ahmad – Special Enforcement Bureau
 - Sgt. Charles Weathers – Parks Bureau
- U.S. Coast Guard Auxiliary
 - Christopher Galante
 - Linnea Haas