

BOAT SURVEY

COVER LETTER

Date

Registered Boat Owner
Street
City, state Zip

Dear Registered Boat Owner,

The United States Coast Guard needs your help. I am writing on their behalf to ask you to complete a survey that will help us understand boating activities and safety in the United States.

The purpose of this survey is to count the boats owned by people like you and to understand how they are used. It is *important for us to obtain responses no matter how frequently people use their boats or how much money they spend while boating.*

Your address was randomly selected from a list of all registered boaters in your state. Your household represents thousands of other households like yours. Only with your response can we accurately represent everyone in your state.

Your answers are completely confidential and will be used for statistical purposes only in accordance with the Privacy Act of 1974. You are not required to answer any question that you feel is an intrusion of your privacy.

If you have any questions or comments about this study, we would be happy to talk with you. Please contact [SOME ONE] by phone at ###-###-#### or you can write to us at the address at the bottom of this letter.

Thank you very much for your help with this important study. Please return your completed questionnaire in the postage paid envelope provided.

Sincerely,

MAIL SURVEY—2011 ADMINISTERED Q4 2010

ABOUT ALL YOUR BOATS

1. Please describe the five longest boats you own in the following table. *Please use the boat types listed below to describe the boats in the Type column.*

Boat	Have you used the boat in the last year for making money?	Registration			Attributes	
		Is the boat registered?	Is the boat documented with the US Coast Guard? **	state of registration	Length	Type*
1	Y / N	Y / N				
2	Y / N	Y / N				
3	Y / N	Y / N				
4	Y / N	Y / N				
5	Y / N	Y / N				

***Types of Boats:**

Powerboats

CM CABIN MOTORBOAT
 JB JET BOAT
 OM OPEN MOTORBOAT
 PB PONTOON BOAT
 HB HOUSEBOAT
 AB AIRBOAT

Sailboats

AS AUXILIARY MOTOR SAIL
 SO SAIL ONLY

Personal Watercraft

JS JETSKI






Other Boats

CN CANOE
 KY KAYAK
 RB ROWBOAT
 IF INFLATABLE






** ‘Documented’ means that the boat is recorded by the United States Coast Guard. Only some very large boats are documented with the Coast Guard.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The Coast Guard estimates that the average burden for this report is 12.6 minutes. You may submit any comments concerning the accuracy of this burden estimate or any suggestions for reducing the burden to: Commandant (CG-5422), U.S. Coast Guard, Washington, DC 20593- 0001.

2. Please tell us how the same boats were used in 2010

Boat	Has the boat been used this year? (that is, <i>during 2010</i>)?	During 2010, how many days has the boat been used?	On an average day in 2010, how many hours did you go out on the boat?	On an average day in 2010, how many people were aboard the boat?
1	<input type="checkbox"/> N / <input type="checkbox"/> Y 	_____ days	_____ hours	_____ people
2	<input type="checkbox"/> N / <input type="checkbox"/> Y 	_____ days	_____ hours	_____ people
3	<input type="checkbox"/> N / <input type="checkbox"/> Y 	_____ days	_____ hours	_____ people
4	<input type="checkbox"/> N / <input type="checkbox"/> Y 	_____ days	_____ hours	_____ people
5	<input type="checkbox"/> N / <input type="checkbox"/> Y 	_____ days	_____ hours	_____ people

3. Please tell us how those boats in September, 2010?

Boat	Did you use this boat during September (that is, during <i>September 2010</i>)?	During September , how many days was the boat used?	On an average day in September , how many hours did you go out on the boat?	On an average day in September , how many people were aboard the boat?
1	<input type="checkbox"/> N / <input type="checkbox"/> Y 	_____ days	_____ hours	_____ people
2	<input type="checkbox"/> N / <input type="checkbox"/> Y 	_____ days	_____ hours	_____ people
3	<input type="checkbox"/> N / <input type="checkbox"/> Y 	_____ days	_____ hours	_____ people
4	<input type="checkbox"/> N / <input type="checkbox"/> Y 	_____ days	_____ hours	_____ people
5	<input type="checkbox"/> N / <input type="checkbox"/> Y 	_____ days	_____ hours	_____ people

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The Coast Guard estimates that the average burden for this report is XX-XX minutes. You may submit any comments concerning the accuracy of this burden estimate or any suggestions for reducing the burden to: Commandant (CG-XXXX), U.S. Coast Guard, Washington, DC 20593-0001.

One of your household's boats was identified in the cover letter. The rest of the survey concerns the identified boat only.

4. Do you still own this boat?
- YES →GO TO QUESTION 6
 - NO
5. If you no longer own this boat, what happened to it?
- I NEVER OWNED THAT BOAT
 - I SOLD OR GAVE AWAY THE BOAT
 - OTHER: _____

The next questions are about this boat, if you do not own it, you have completed the survey and should send it back in the envelope provided. Thanks for your response!

BOAT DETAILS

6. What is the model year of this boat? _____
- SAIL
 - WATER JET
7. When this boat was purchased, was it new or used?
- NEW
 - USED
8. Of what material is the hull of this boat constructed?
- ALUMINUM
 - STEEL
 - CARBON FIBER
 - FIBERGLASS
 - RIGID HULL INFLATABLE
 - RUBBER
 - VINYL
 - CANVAS
 - WOOD
 - OTHER MATERIAL: _____
9. What is the primary means of propulsion of this boat? Is it...
- HUMAN POWERED (OARS, PADDLES, PEDALS)
 - AIR THRUST
 - PROPELLER

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10. Does this boat have a motor?

- YES →CONTINUE TO QUESTION 11
- NO →GO TO QUESTION 15

If the boat has a motor:

11. Which type of motor or engine powers the boat?

Select all that apply. Do not include trolling motors.

- INBOARD ENGINE
- OUTBOARD MOTOR
- INBOARD-OUTBOARD ENGINE (STERNDRIVE)

12. How many engines or motors power this boat? _____

13. What is the total horsepower of the engines or motors that power this boat? *For example: If that boat has twin 25 horsepower engines, its total horsepower is 50.* _____

14. Which type(s) of fuel is/are used in this boat's primary engine?

Select all that apply.

- DIESEL
- ELECTRIC
- GASOLINE
- OTHER _____

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The Coast Guard estimates that the average burden for this report is XX-XX minutes. You may submit any comments concerning the accuracy of this burden estimate or any suggestions for reducing the burden to: Commandant (CG-XXXX), U.S. Coast Guard, Washington, DC 20593-0001.

BOAT OPERATION

15. Are you the primary operator of this boat?

- YES
- NO

16. Have you ever taken a boat safety course?

- YES
- NO

17. How experienced in the operation of this boat are you?

- VERY EXPERIENCED
- SOMEWHAT EXPERIENCED
- SOMEWHAT INEXPERIENCED
- VERY INEXPERIENCED

BOAT STORAGE

18. Where is this boat kept during the primary boating season?

- ON THE WATER
- ON LAND

19. Do you intend to take the boat out on the water in 2010?

- YES
- NO

20. Was the boat transported or trailered for the purpose of putting it in the water in 2010?

- YES
- NO

21. Was this boat used outside the state of where the boat is kept in 2010?

- YES
- NO

BOAT EXPENDITURES

The next questions are about money you spent on **this boat** in 2010.

22. Did you buy this boat new in 2010?

- YES →GO TO QUESTION 22A
- NO

22a. How much did you spend? _____

23. Do you have a monthly loan payment for this boat?

- YES →GO TO QUESTION 23A
- NO

23a. How much do you pay monthly for the boat including principal and interest? _____

24. In 2010, how much did you spend on:

Storage <i>(slip rental fees, dry stack, winter storage, and self storage rental)</i>	\$
Insurance for liability, theft, fire	\$
Taxes on the boat	\$
New motors and trailers	\$
Pre-Owned and Rented motors and trailers	\$
Services performed by others like boat maintenance, repairs, or installation of new products <i>(upgrades performed by others including labor and parts)</i>	\$
Products, parts, supplies, and accessories that you purchased directly <i>(to be installed or used on the boat or the trailer including electronics and navigation, parts, docking and anchors, paint and maintenance supplies, hardware, sail supplies, trailer parts, etc.)</i>	\$

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Other things including boating-related clothing, fishing equipment for this boat, navigation charts, safety-related equipment, and water sports equipment	\$
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25. The US Coast Guard is interested in learning about how boats are used so that it can understand how safe boating is. Your personal experiences on this boat can help. Can we contact you this year to conduct very short surveys about this boat?

- YES → GO TO QUESTION 26

26. We will contact you 2 to 4 times in the coming year to ask you a few questions about this boat. The surveys will take about 10 minutes, and because we value your time, you will be compensated with \$5 for each completed survey. Participation is completely voluntary, and your responses are completely confidential.

Please provide your contact information below to participate.

Mailing address:

Address: _____

City _____

State _____

Zip _____

Phone _____

Email _____

27. Would you prefer to complete the surveys by internet or telephone?

- INTERNET
- TELEPHONE

- NO

Thank you! You have completed the survey. Please put it in the postage paid envelope provided and return it.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The Coast Guard estimates that the average burden for this report is XX-XX minutes. You may submit any comments concerning the accuracy of this burden estimate or any suggestions for reducing the burden to: Commandant (CG-XXXX), U.S. Coast Guard, Washington, DC 20593-0001.

MAIL SURVEY—2013 ADMINISTERED Q4 2012

NOTE: FOR MANY OF THE QUESTIONS IN THIS SURVEY, WE HAVE LISTED VARIABLE NAMES RATHER THAN QUESTION NUMBERS. THIS PROMOTES QUALITY DURING THE DEVELOPMENT PROCESS. AFTER OMB APPROVAL, QUESTION NAMES WILL BE CHANGED TO SEQUENTIAL NUMBERS AND SKIP PATTERNS WILL BE CHANGED TO CORRESPOND. WE WILL ALSO CHANGE THE RESPONSE NUMBERS TO CHECK BOXES.

ABOUT ALL YOUR BOATS

1. Please describe the five longest boats you own in the following table. *Please use the boat types listed below to describe the boats in the Type column.*

Boat	Have you used the boat in the last year for making money?	Registration			Attributes		Did you use the boat in 2010?
		Is the boat registered?	Is the boat documented with the US Coast Guard? **	state of registration	Length	Type*	
1	Y / N	Y / N					Y / N
2	Y / N	Y / N					Y / N
3	Y / N	Y / N					Y / N
4	Y / N	Y / N					Y / N
5	Y / N	Y / N					Y / N

***Types of Boats:**

Powerboats

- CM CABIN MOTORBOAT
- JB JET BOAT
- OM OPEN MOTORBOAT
- PB PONTOON BOAT
- HB HOUSEBOAT
- AB AIRBOAT

Sailboats

- AS AUXILIARY MOTOR SAIL
- SO SAIL ONLY

Personal Watercraft

- JS JETSKI

Other Boats

- CN CANOE
- KY KAYAK
- RB ROWBOAT
- IF INFLATABLE

** ‘Documented’ means that the boat is recorded by the United States Coast Guard. Only some very large boats are documented with the Coast Guard.

One of your household's boats was identified in the cover letter. The rest of the survey concerns the identified boat only.

2. Do you still own this boat?
- YES →GO TO QUESTION 4
 - NO
3. If you no longer own this boat, what happened to it?
- I NEVER OWNED THAT BOAT
 - I SOLD OR GAVE AWAY THE BOAT
 - OTHER: _____

The next questions are about this boat, if you do not own it, you have completed the survey and should send it back in the envelope provided. Thanks for your response!

BOAT DETAILS

4. What is the model year of this boat? _____

5. When this boat was purchased, was it new or used?

- NEW
- USED

6. Of what material is the hull of this boat constructed?

- ALUMINUM
- STEEL
- CARBON FIBER
- FIBERGLASS
- RIGID HULL INFLATABLE
- RUBBER
- VINYL
- CANVAS
- WOOD
- OTHER MATERIAL: _____

7. What is the primary means of propulsion of this boat? Is it...

- HUMAN POWERED (OARS, PADDLES, PEDALS)
- AIR THRUST
- PROPELLER
- SAIL
- WATER JET

8. Does this boat have a motor?

- YES →CONTINUE TO QUESTION 9
- NO →GO TO QUESTION 13

If the boat has a motor:

9. Which type of motor or engine powers the boat?

Select all that apply. Do not include trolling motors.

- INBOARD ENGINE
- OUTBOARD MOTOR
- INBOARD-OUTBOARD ENGINE (STERNDRIVE)

10. How many engines or motors power this boat? _____

11. What is the total horsepower of the engines or motors that power this boat? *For example: If that boat has twin 25 horsepower engines, its total horsepower is 50.* _____

12. Which type(s) of fuel is/are used in this boat's primary engine?

Select all that apply.

- DIESEL
- ELECTRIC
- GASOLINE
- OTHER _____

BOAT OPERATION

13. Are you the primary operator of this boat?
- YES
 - NO
14. Have you ever taken a boat safety course?
- YES
 - NO
15. How experienced in the operation of this boat are you?
- VERY EXPERIENCED
 - SOMEWHAT EXPERIENCED
 - SOMEWHAT INEXPERIENCED
 - VERY INEXPERIENCED

BOAT STORAGE

16. Where is this boat kept during the primary boating season?
- ON THE WATER
 - ON LAND
17. Do you intend to take the boat out on the water in 2010?
- YES
 - NO
18. Was the boat transported or trailered for the purpose of putting it in the water in 2010?
- YES
 - NO
19. Was this boat used outside the state of where the boat is kept in 2010?
- YES
 - NO

BOAT EXPENDITURES

The next questions are about money you spent on **this boat** in 2010.

20. Did you buy this boat new in 2010?
- YES →GO TO QUESTION 20A
 - NO
- 20a. How much did you spend? _____
21. Do you have a monthly loan payment for this boat?
- YES →GO TO QUESTION 21A
 - NO
- 21a. How much do you pay monthly for the boat including principal and interest? _____
22. In 2010, how much did you spend on:

Storage <i>(slip rental fees, dry stack, winter storage, and self storage rental)</i>	\$
Insurance for liability, theft, fire	\$
Taxes on the boat	\$
New motors and trailers	\$
Pre-Owned and Rented motors and trailers	\$
Services performed by others like boat maintenance, repairs, or installation of new products <i>(upgrades performed by others including labor and parts)</i>	\$
Products, parts, supplies, and accessories that you purchased directly <i>(to be installed or used on the boat or the trailer including electronics and navigation, parts, docking and anchors, paint and maintenance supplies, hardware, sail supplies, trailer parts, etc.)</i>	\$
Other things including boating-related clothing, fishing equipment for this boat, navigation charts, safety-related	\$

equipment, and water sports equipment	
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23. The US Coast Guard is interested in learning about how boats are used so that it can understand how safe boating is. Your personal experiences on this boat can help. Can we contact you this year to conduct very short surveys about this boat?

- YES → **GO TO QUESTION 24**

24. We will contact you 2 to 4 times in the coming year to ask you a few questions about this boat. The surveys will take about 10 minutes, and because we value your time, you will be compensated with \$5 for each completed survey. Participation is completely voluntary, and your responses are completely confidential.

Please provide your contact information below to participate.

Mailing address:

Address: _____

City _____

State _____

Zip _____

Phone _____

Email _____

23. Would you prefer to complete the surveys by internet or telephone?

- INTERNET
- TELEPHONE

- NO

Thank you! You have completed the survey. Please put it in the postage paid envelope provided and return it.

REMINDER POSTCARD

Date

Last week a questionnaire was sent to you on behalf of the United States Coast Guard. Your household was randomly selected from a list of all registered boats in your state.

If you have already completed and returned the questionnaire to us, thank you! If you have not, please do so today. Information collected in this study will be used to learn more about boats and boat safety in the US.

If you did not receive a questionnaire, or if it was misplaced, please call us at XXX-XXX-XXXX

Thank you.

A vertical blue line runs through the center of the postcard. A solid blue square is positioned on the left side of the line, overlapping it.

SELECTED RESPONDENT

Street

Town, City, #####