

VESSEL SAFETY EXAMINATION CHECKLIST

Fisheries Observer Program  
NMFS, Southwest Region

Observers must verify the condition of each item on the list when embarking a vessel. Please advise the Logistics Coordinator or Project Manager if a vessel does not provide these safety items. **DO NOT LEAVE ON A VESSEL YOU FEEL IS UNSAFE**

Trip Number: \_\_\_\_\_  
Observer Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

Vessel Name: \_\_\_\_\_  
USCG Commercial Fishing Vessel Safety  
Examination Decal  
Issued Date: \_\_\_\_\_

	Safe	Unsafe	Comments
PFD/Immersion Suit	( )	( )	_____
Ring Life Buoys	( )	( )	_____
Life Raft	( )	( )	_____
Packing Date: _____			
Hydrostatic Release Date: _____			
Stowage of Life Raft	( )	( )	_____
Distress Signals	( )	( )	_____
EPIRBS	( )	( )	_____
Fire Extinguishers	( )	( )	_____
First Aid Equipment	( )	( )	_____
Guards for Exposed Hazards	( )	( )	_____
Nautical Charts for fishing area	( )	( )	_____
Compass	( )	( )	_____
Anchor and Radar reflectors	( )	( )	_____
General alarm System	( )	( )	_____
Communication Equipment			
w/emergency power source	( )	( )	_____
High Water Alarm	( )	( )	_____
Bilge Pump	( )	( )	_____
Electronic Position Fixing Devices	( )	( )	_____
Emergency Instructions	( )	( )	_____

Any additional comments/concerns:

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