



SEFSC Pelagic Observer Program Vessel Safety Checklist

Trip Number:

Vessel Name:

Vessel Number:

Persons on Board for trip:

USCG CFVS Decal Number:

Date of Issuance/Expiration:
**Circle one of the above.*

Is Decal Current: **YES** **NO**

**Is it marked correctly for pelagic fishing? Mark the sticker below to resemble the one on the vessel.*

Epirb Cat 1 Present: **YES** **NO**

**Visually inspect, only captain or crew are to handle epirb or housing.*

Location:

Battery Expiration:
Expires on date displayed.

Hydrostatic Release Expiration:
Expires on date displayed.

NOAA Registration Expiration:
Expires on date displayed. See middle diagram on right.

Life Raft Manufacturer:

Capacity:

Location:

SOLAS A Rated: **YES** **NO**

Hydrostatic Release Expiration:
Expires on date displayed.

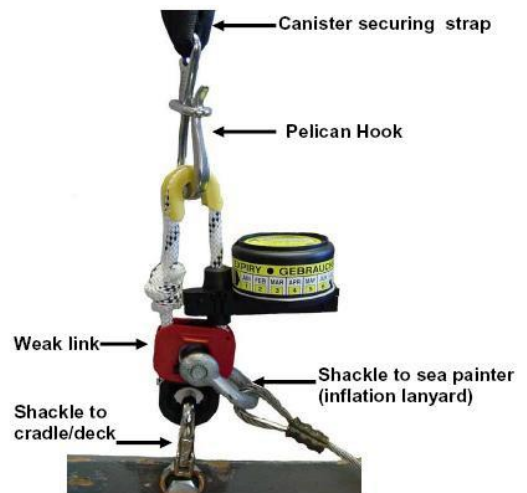
Service Date: (Issuance/Expiration)
Expires on date displayed.

Is release properly set up? **YES** **NO**
See diagram to the right.

Number of Type I PFD's:
Include POP issued PFD.

Number of Throwable PFD's:
**24 inch ring bouy or Lifesling. 1 with 60 ft of line for vessels 26-65 ft in length. 3 devices for vessels >65ft, with at least one of them with 90 ft of line.*

Number of Immersion Suits:
Include POP issued Immersion Suit. Only above 32' 00 N Latitude.



****Turn Over****

Number of Fire Extinguishers: #	
Location 1:	
Charged:	
Expiration:	
Location 2:	
Charged:	
Expiration:	
Location 3:	
Charged:	
Expiration:	

Flares: **CHECK EXPIRATION	
Number of Parachute flares: (3)	
Number of Hand Flares: (6)	
Number of Smoke Flares: (3)	
Location:	

First Aid Kit Location:

CPR/First Aid Trained Capt/Crew (name):
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**** After completing this form, complete a thorough vessel check to your personal standards. Record any concerns below. Contact the POP office with concerns prior to deployment.**

NOTES:

Public Burden Statement - Effective 4/30/2020

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0648-0593. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information collection. All responses to this information collection are mandatory. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the NOAA/NMFS/SEFSC at: 75 Virginia Beach Drive, Miami, FL 33149, Attn: Fisheries Biologist Andy Davis, Andrew.Davis@noaa.gov

Observer Signature: _____ Date: _____

Captain/Owner Signature: _____ Date: _____