

**University of California, Davis
Pre-Trip Vessel Checks**

VSL Operator: _____ Number of Crew: _____ Research Destination: _____ _____	VSL Name / Number: _____ <p align="center">VSL Class / Length:</p> <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;">A</td> <td style="text-align: center;">I</td> <td style="text-align: center;">II</td> <td style="text-align: center;">III</td> <td style="text-align: center;">IV</td> </tr> <tr> <td style="text-align: center;">(< 16')</td> <td style="text-align: center;">(16'-25')</td> <td style="text-align: center;">(26'-40')</td> <td style="text-align: center;">(41'-65')</td> <td style="text-align: center;">(> 65')</td> </tr> </table> <p align="center">INBOARD / OUTBOARD / GAS / DIESEL</p>	A	I	II	III	IV	(< 16')	(16'-25')	(26'-40')	(41'-65')	(> 65')
A	I	II	III	IV							
(< 16')	(16'-25')	(26'-40')	(41'-65')	(> 65')							

Inland- Bays / Rivers / Harbors / Lakes Offshore- 0-3nm / 3-10nm / > 10nm	Engine Hours Start: _____ End: _____ Fuel: F ¾ ½ ¼ E Oil : F ¾ ½ ¼ E
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UC Required Items				UC Recommended Items			
Item	Y	N	N/A	Item	Y	N	N/A
Display of Numbers and Capacity Plate				Compass w/ Binnacle Light			
Registration / Documentation				Cellular Phone			
Personal Flotation Devices				Anti Exposure Suits			
Type IV Throwable Flotation				Depth Sounder			
Visual Distress Signals				Radar			
Sound Producing Device				E.P.I.R.B. 406 Mhz			
VHF Marine Radio / CB Radio				Tide Tables / Charts			
Fire Extinguisher(s)				Bilge Pump / Bailing			
Anchor w/ Line Attached				Fenders			
Paddles / Oars				Boat Hook			
Mooring Lines				Tool Box			
GPS and Communications				Spare Parts			
First Aid Kit				Oxygen Kit for Dive Operations			
Navigation Lights				Fresh Water / Food			

Vessels Pre/Post-Mission Material Condition

Physically inspect all of the following items: (Hull / Deck / Console / Bilges / Compartments / Engine / Propeller)
Report damages and abnormal conditions to the Boat Manager.

DID YOU CHECK THE WEATHER CONDITIONS AND FILE A FLOAT PLAN? YES / NO