



Florida State University Coastal & Marine Laboratory

Boating Safety Manual

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SECTION 1.00 - Overview

1.10 PURPOSE

The purpose of this manual is to establish good small boating practices under the auspices of the Florida State University Coastal and Marine Laboratory (FSUCML): to ensure that all boating under FSUCML auspices is conducted in a manner that will maximize safety and to set forth standards for training and boating authorization that will allow a working reciprocity between other institutions. Any person designated as an FSUCML affiliated Small Boat Operator is required to observe the provisions of this manual.

1.20 CONTENTS

The FSUCML Boating Safety Manual contains policy and procedures for all small boating operations. This manual includes:

1. Policy that pertains to all FSUCML affiliated boating operations.
2. Requirements and training for obtaining Small Boat Operator (SBO) authorization.
3. Administrative procedures for conducting the FSUCML Boating Safety Program (SAFETY PROGRAM).
4. Equipment and maintenance standards.

1.30 APPLICABILITY

The provisions of this manual apply whenever FSUCML affiliated personnel are operating a small boat under FSUCML auspices, whether or not the boat is owned by the university. For the purposes of this manual, the auspices of the FSUCML Boating Safety Program include any boating operation in which FSUCML is connected because of ownership of any equipment used, locations selected, or relationship with the individual(s) concerned.

Small Boats used under FSUCML auspices fall into two categories:

1. Boats owned, supported, or administered by FSUCML that are used for scientific research.
2. Non-FSUCML owned, supported or administered boats used for FSUCML affiliated research. It is the duty of the Principle Investigator or Program Director using such a vessel to ensure the vessel is being run by a trained operator and that all applicable safety standards are being met. No other vessels are covered by this document.

For the purposes of this policy, a small boat is any boat less than or equal to 35 feet in length. In order to be approved for use by FSUCML personnel, a small boat must be numbered in accordance with the regulations of the State of Florida or in accordance with applicable Federal Law or with a federally approved numbering system of another State.

SECTION 2.00 - Responsibility

2.10 BOATING SAFETY COMMITTEE MEMBERSHIP

The Director of FSUCML is responsible for the administration of the program. The Boating Safety Committee (Safety Committee) shall consist of the following including a chair selected by its membership:

1. Director of FSUCML - who may delegate his/her committee participation.
2. Boat Safety Officer
3. Other Members - of which one shall be a faculty member and of which a majority should be knowledgeable about boating operations.

2.20 BOATING SAFETY COMMITTEE RESPONSIBILITY

1. Has autonomous authority over the boating program.
2. Shall periodically review the Boating Safety Officer's performance and the SAFETY PROGRAM.
3. Shall sit as a board of investigation to inquire into the nature and cause of boating accidents or violations of the boating safety manual.
4. Acting through the Boating Safety Officer, the SAFETY COMMITTEE shall:
 - a. Review and revise the boating safety manual.
 - b. Assure compliance with the boating safety manual.
 - c. Take disciplinary action for unsafe practices.
 - d. Recommend the issue, reissue, or the revocation of boating authorizations.
 - e. Establish and/or approve training programs through which the applicant can satisfy the requirements of FSUCML Boating Safety Manual.
 - f. Suspend boating operations that are considered to be unsafe or unwise.

2.30 BOATING SAFETY OFFICER

The Boating Safety Officer serves as a member of the Boating Safety Committee. This person should have broad experience in boating.

Duties and Responsibilities

1. The Boating Safety Officer is responsible to the Boating Safety Committee for the conduct of the Small Boat Program. Operational authority for the FSUCML Small Boat Program, including authorization of Operators, approval of a boat request form/float plan, maintenance of boats, and ensuring compliance with this manual for all FSUCML Small Boat Operators rests with the Boating Safety Officer.
2. With the approval of the Boating Safety Committee, the Boating Safety Officer may permit portions of this program to be carried out by a qualified delegate, although the Boating Safety

Officer may not abrogate responsibility for the safe conduct of the SAFETY PROGRAM.

3. The Boating Safety Officer (Safety Officer) shall suspend boating operations that are considered unsafe (this would also include trailering of vessels). He/she shall ensure that all boats are in full compliance with U.S. Coast Guard, Department of Motor Vehicle and Department of Transportation requirements, with respect to equipment and safety procedures.

2.40 PRINCIPAL INVESTIGATORS AND PROGRAM DIRECTORS

1. Principal Investigators and Program Directors are personally responsible for assuring that all boat operations, under their direction, are conducted in accordance with this manual.
2. Principal Investigators and Program Directors are required to meet the safety standards of this manual and have on-board the safety equipment as outlined in Appendix I, regardless of ownership of the vessel.
3. Principal Investigators and Project Directors must determine that all individuals assigned to small boat operations related to their projects are properly authorized as described in section 3.20 of this manual.

2.50 SMALL BOAT OPERATOR (SBO)

1. Only persons who have been authorized as Small Boat Operators may operate small boats under FSUCML auspices, whether or not the boat is owned by FSUCML.
2. The designated Small Boat Operator is responsible for all aspects of boating operations, regardless of any senior personnel present in the boat. These responsibilities include, but are not limited to:
 - a) Safe transport of the vessel to and from the launch site.
 - b) The safe navigation of the vessel to and from the site(s) of operation.
 - c) The safe operation of the vessel and equipment at all times.
 - d) Ensuring that all required operational and safety equipment is on board before getting underway.
 - e) Ensuring that all passengers and divers have clearance to be working on the project requiring the vessel.
 - f) Verifying and adhering to the load ratings of the tow vehicle, vessel trailer, vehicle towing assembly (tongue weight) and vessel (vessel and transom loading).
 - g) Reporting all accidents, incidents, citations, and safety concerns/issues to the Safety Officer.
4. Failure to comply with provisions of the Boating Safety Manual may be cause for the revocation or restriction of the Small Boat Operator's authorization by the Boating Safety Committee. However, any Operator may deviate from the requirements of this manual to the extent necessary to prevent or minimize a situation that is likely to cause death, serious physical harm, or major environmental damage. A report of such actions must be submitted within 24-hours to the Boating Safety Officer explaining the circumstances and justifications.

SECTION 3.00 – Administrative Procedures & Training Requirements

The regulations in this manual must be observed wherever Small Boat Operations are carried out under the auspices of the FSUCML Boating Safety Program. All SBOs must follow the provisions of the manual and all equipment used must conform to U.S. Coast Guard requirements.

3.10 AUTHORIZATION OF SMALL BOAT OPERATORS

To become an authorized boat operator, submit FSUCML's application form and:

1. Complete a boating safety course from a SAFETY COMMITTEE approved provider.
2. Provide documentation of and/or acquire practical experience in operating a boat (see Small Boat Training Manual)
3. Demonstrate proficiency in the safe operation of the proposed type of boat in local conditions (see Small Boat Training Manual).
4. Demonstrate proficiency in the operation of any specialty equipment and procedures specific to the boat or task to be undertaken.

The Boating Safety Officer has the authority to give limited authorizations to FSUCML personnel that restrict SBOs to the use of certain boats and/or in certain waters. The Safety Officer also has the authority to defer to another institution's training program for the authorization of SBOs.

3.20 MAINTAINING AUTHORIZATION

The SAFETY PROGRAM shall set standards for maintaining authorization.

3.30 REVOCATION OF AUTHORIZATION

A SBO's authorization may be revoked for any action deemed unsafe or unlawful or for not meeting the procedural requirements of the SAFETY PROGRAM.

3.40 RE-AUTHORIZATION

If a SBO's authorization is revoked, the SBO may be re-authorized after compliance with such conditions as the Boating Safety Officer may impose. The SBO shall be given the opportunity to present their case to the Boating Safety Committee before conditions for re-authorization are stipulated.

3.50 TRAILERING, LAUNCHING AND RETRIEVING

To become qualified to tow, launch or retrieve a vessel, the SBO or designated driver must complete the training module or demonstrate to the Boating Safety Officer or their designee, the proper procedures for towing the boat and trailer over the road, as well as launching and retrieving the boat from the trailer to the water.

SECTION 4.00 – Administrative Procedures & Record-keeping

4.10 BOATING PROPOSALS AND FLOAT PLANS

All small boat use requires a boat reservation, [available on-line](#). The reservation of any FSUCML boat is on a first come, first served basis. You can view current reservations on the [boating calendar](#) to ensure that the boat you want is available.

All small boats leaving from the FSUCML boat basin must file a Float Plan. If the boat is launched at the FSUCML for day trips within state waters, use the float plan in Appendix III. If the trip requires that the boat is used offshore (beyond state waters) or towed off site for the day or multiple days, use the float Plan in Appendix IV.

4.20 MAINTENANCE OF RECORDS

1. The Boating Safety Officer or designee shall keep a file of usage for all boats, including a log of scheduled and unscheduled maintenance for each boat, boat trailer and outboard engine.
2. Records shall be maintained for a period of 10 years.

4.30 INCIDENT REPORTING

1. All incidents, domestic and foreign, must be reported to the Boating Safety Officer and to the FSUCML Human Resources Officer within 24 hours of the incident. The Boating Safety Officer will circulate this report to the Director of FSUCML and the Boating Safety Committee. A reporting form can be found in Appendix V. A reportable incident is defined as follows:
 - a) Someone is injured and requires more than just first aid for the injury.
 - b) A vessel breaks-down while in use in any manner that is not easily remedied, suffers more than minor hull damage, or is involved in a near-accident or other unsafe event whether on land or in the water.
 - c) The US Coast Guard or Florida Marine Patrol contacts or cites the FSUCML about any suspected incident involving an FSUCML boat
2. The Boating Safety Officer shall investigate and document the incident and related personal injury and/or property damage or loss and prepare a report.
3. Incident reports shall be held indefinitely.

SECTION 5.00 – Operational Procedures

All boats and equipment used by FSUCML authorized operators in US waters, regardless of ownership, will, at a minimum, conform to U.S. Coast Guard requirements and to the standards set forth in this manual.

All boats operated outside of U.S. Coast Guard jurisdiction shall at a minimum comply with U.S. Coast Guard regulations in addition to any applicable local requirements and to the standards set forth in this manual.

5.10 STABILITY

All boats used by FSUCML personnel are required to have an installed data plate that designates the number of people and weight capacity according to the manufacturer's specifications. If this information is unavailable, the Boating Safety Officer will make a recommendation based on USCG stability standards. It is the responsibility of the SBO to stay within these limits and to have all weight evenly distributed so that the boat will trim properly. If the manufacturer's specifications have been altered or if modifications are constructed for specific research, which alters the trim and stability, it is the responsibility of the Principal Investigator to verify the stability and safety of any modification to the Boating Safety Officer.

5.20 EQUIPMENT

1. The operator shall be familiar with the operation of the equipment and shall inspect all emergency equipment prior to departure.
2. Malfunctioning or missing equipment must be repaired or replaced prior to use. It is the responsibility of the SBO and/or Principal Investigator(s) to replace or renew any equipment lost or damaged as a result of negligence or misuse by the SBO. In the event of a disagreement as to responsibility for lost or damaged equipment, the Boating Safety Committee will review the case and assign responsibility for replacing it. Required equipment for FSUCML boats is listed in Appendix I.
3. The nature of specific operations may require boats and boating equipment to meet higher standards as determined by the Boating Safety Officer or the Boating Safety Committee. For instance, small boats that are operating offshore shall be equipped with an Emergency Position Indicating Radio Beacon (EPIRB).
4. In the event that an EPIRB is triggered on an FSUCML vessel, the USCG will contact the FSUCML who will refer them to the Boating Safety Officer. The Boating Safety Officer or designee shall handle all communications, including
 - a) Providing the US Coast Guard with relevant Float plan information, including:
 - Name and contact information for everyone on board
 - Departure ramp, destination site, and proposed arrival time
 - Vessel description including registration numbers (from K drive)
 - b) Alerting the FSUCML director or designee
 - c) Communicating to the USCG any updates received about the vessel either from the vessel captain, crew, or other entity
 - d) Standing by for new information from the USCG

5. In the event that the SBO or crew notice that the EPIRB is missing or suspect it has accidentally gone overboard or become submerged, the SBO is required to immediately contact the FSUCML Boating Safety Officer or Designee. If lab contact cannot be made, contact USCG on ch. 16 and provide them with the FSUCML boat registration numbers to verify status.

5.30 COMMUNICATIONS

During boat operations, regularly scheduled communications between the SBO and the responsible FSUCML Marine Operations personnel (MO personnel) on the waterfront shall be maintained. If the boat launched from the FSUCML, that communication shall occur on radio channel 88A. To initiate any change in an approved float plan, the SBO shall communicate all changes to the MO personnel. If the SBO or their designee, is unable to notify the MO personnel, the filed plan shall be adhered to unless conditions are unsafe, in which case the boat shall return to port or find safe harbor. Failure to follow procedures may be cause for suspension or revocation of SBO authorization.

The SBO or designee shall notify MO personnel by phone or in person upon return to port. Special arrangements shall be made in advance for multi-day trips or for vessels returning outside of regular-office hours. Notice of return is required within two hours after the scheduled time of return. If shore-based or radio contact is not made, the MO Personnel may initiate procedures for U.S. Coast Guard action. The SBOs shall take into account the limited VHF radio and cell phone coverage in coastal waters.

5.40 WEATHER

General Guidelines

- 1) NOAA Weather 5-Day Marine Forecasts are to be considered the basic weather planning guideline for FSUCML small boat operations. These forecasts are available online at (<http://forecast.weather.gov/MapClick.php?site=tae&zmx=1&zmy=1&map.x=181&map.y=243>) or on VHF or dedicated weather radios.
- 2) Unless specifically exempted from doing so by the Boating Safety Officer, all FSUCML Small Boat Operators are required to consult NOAA Weather 5-Day Marine Forecasts for the planned area of operation immediately prior to departure as well as the NOAA radar image found on the same page.
- 3) In general, FSUCML Small Boat Operators shall not plan small boat operations when NOAA forecasts for the time and area of operation include predictions of a Small Craft Advisory.
- 4) It is the Boating Safety Officer's responsibility to determine when sea conditions are unsafe for small vessel operation. While this can depend in some respects on the particular boat and the experience of the small boat operator, the Boating Safety Officer has the authority to cancel any trip.

5.50 SPECIAL OPERATIONS

SCUBA DIVING

Any persons SCUBA diving from an FSUCML boat are required to observe the provisions of Florida State University, Florida State University Diving Safety Manual.

Diving by students, staff, marine scientists and faculty of the university or with FSU equipment as a necessary part of their occupation, and by other authorized divers under the supervision of the FSUCML Scientific Diving Program as a necessary part of research, constitutes diving under FSUCML auspices.

All dive plans must be approved by the FSUCML Diving Safety Officer (DSO). The designated lead diver will be in charge of all diving operations. An FSUCML authorized SBO will remain on board.

5.60 SAFETY CHECKS

Prior to Departure

1. Perform a functional inspection of the boat and all equipment, including location and condition of PFDs.
2. Assess all environmental risks weather conditions, sea conditions.
3. Review all emergency procedures with everyone aboard man-overboard, fire and abandonment and methods for seeking assistance.
4. Establish communication schedule and responsible shore contact person.

After Returning

1. Upon return the SBO will log in the return time with the responsible person as agreed upon before departure.
2. Note any problems with the boat or equipment that occurred during their cruise on the status board and inform the Boating Safety Officer within 24-hours. E-mail is an acceptable means.
3. The SBO or designee will ensure that the boat, boat trailer, engine and all other equipment are thoroughly rinsed with fresh water and stowed after each use. For outboards, the SBO or their designee will ensure adequate fuel remains for subsequent operations.

5.70 OPERATIONAL AREAS

The regulations herein shall be observed at all locations where boating operations are conducted under the auspices of the FSUCML Small Boating Program. Areas of operation belong to one of two classifications:

1. Inland Waters: Shoreward of the demarcation line that separates International Navigation Rules from U.S. Inland Navigation Rules, for example within the waters of Dog Island Sound. The demarcation line is known as the COLREGS (Convention on the International Regulations for Preventing Collisions at Sea, 1972) Demarcation Line. It is shown on nautical charts.
2. Coastal Waters: Seaward of the COLREGS Demarcation Line, but normally considered within sight of land.

The type of service for each boat within the Small Boat Program will be clearly identified. Boats will be used only in their designated areas or in areas that provide greater protection.

APPENDIX I - Safety Equipment

Motorboats operating in inland/coastal waters shall carry at least the following equipment:

1. One VHF Channel. Cell phone &/or CB radio also recommended
2. Class I, II, or III PFD for each person on board, plus one 'throwable' with at least 50' of line.
3. Anchor and anchor line
4. Oars or paddles
5. USCG approved visual distress signaling device
6. Emergency repair kit and tools
7. Fire extinguisher on all motorboats
8. Fog horn, or other signaling device
9. First aid kit and, if diving, an oxygen unit

Suggested equipment:

1. A cellular telephone or CB radio
2. Drinking water/food
3. Spare fuel
4. Sea anchor
5. Dock lines
6. Bailer
7. GPS
8. Dive Flag

APPENDIX II - BOATING EMERGENCY MANAGEMENT PROCEDURES

Introduction

Most boating incidents take place through the culmination of several factors leading up to a single point when unsafe situations combine and pass a critical point resulting in an emergency situation. Identifying these factors and correcting them immediately is the best course of action.

General Procedures (Personnel Injury)

The nature and severity of personnel injury shall be the determining factor for the mode and method of patient transport.

Make contact with victim, if safe, rescue as required.

1. Establish ABC's. (Airway, Breathing, Circulation) Then apply first aid as required.
2. Determine severity and select the mode of transport. (Self-transport, USCG, or EMS)
3. As applicable, contact the pre-designated land base, USCG channel 16 VHF, or EMS 911 or local equivalent
4. Coordinate with EMS for patient transfer site and ETA.
5. Notify the Boating Safety Officer or the designated Assistant.
6. Complete the Accident Forms as required.

General Procedures (Non-urgent Disabled or Damaged Vessel)

For non-emergency related damage or disabling situations it is the responsibility of the operator to suspend the mission and assess all conditions then take appropriate action. The operator must communicate the situation to the designated mother-ship or land-based point of contact. A communication schedule shall be established to monitor the situation until safe moorage is obtained.

1. Apply measures to minimize or correct the situation and contact land base or mother ship.
 - Location
 - Nature of problem
 - Type of assistance needed
 - Number of persons on board
 - Establish a communication schedule based on severity.

2. Arrange USCG assistance if another assistance provider (such as Tow Boat U. S., Vessel Assist) is not available. Hail USCG on VHF Channel 16 and follow their directions.

- Same as #1 above.
- Request notification of the land base that is holding your float plan.

2. Notify the Boating Safety Officer or the designated Assistant.

3. Complete the Accident Form if required.

Emergency Procedures (Collision, Fire, Flooding, Grounding, Crew overboard)

Severe situations that can lead to the loss of life and property are collision, fire, flooding, grounding and crew over board. Each of these situations requires the operator to immediately initiate measures to correct the situation. Additionally, the USCG and/or another designated agency shall be notified to facilitate rescue and/or assistance.

1. Initiate control measures to prevent/minimize loss of life and the vessel.

2. Contact USCG Channel 16 VHF

- MAYDAY, MAYDAY, MAYDAY!
- Location (Speak slowly and repeat position)
- Nature of distress
- Vessel name, ID number & description
- Number of people on board

3. Request notification of the Boating Safety Officer or the designated Assistant as soon as possible.

**Boating
Program
Incident Call
Tree
2023**

**Emergency contact at
FSUCML**

First contact BSO:
Captain Matt Edwards
VHF Channel 09
(850) 590-3350
medwards5@fsu.edu
Travis Mohrman as
backup if unavailable.

Second contact P.I.

Contact victim's
emergency contact



APPENDIX III - Float Plan for Small Boat Launched at the FSUCML, Operated onsite

Florida State University Coastal & Marine Laboratory – Float Plan for Small Boats Launched from FSUCML

Directions: This float plan is for boats launched from the FSUCML and operated within state waters. To be completed by user, one plan per day. It can be filled out online. Complete all questions in the user section below that are applicable to your trip. Deliver the completed form to the FSUCML Marine Ops staff member assisting you on the day of the trip. Do Not E-Mail form.

User Name	Affiliation	Grant No.	Reservation No.

Trip Date (mmddyy)	Est. Time Depart	Est. Time Return	
2 nd trip, same day	Est. Time Depart	Est. Time Return	
Areas of operation			
Specific Activity			

Print all passenger names below. All volunteers must check "VOL" box by their name. Max. capacity pontoons = 15 people

No.	Name	VOL	No.	Name	VOL
1			9		
2			10		
3			11		
4			12		
5			13		
6			14		
7			15		
8					

By signature below, I confirm that I have completed the checklist for the designated boat, I will comply with all FSUCML boat operation policies and I have been checked out on the operation and communication procedures for proper use of the designated boat, trailer and vehicle. If diving, I confirm that I am an active AAUS Science Diver.

Boat Operator _____

(Print Name)
(Signature)
(Date)

To be completed by FSUCML Staff

Number of Individuals: _____ Weather _____ Wind Speed (mph) _____

Boat used-License Number (check appropriate boat)							
Pontoon 1 FL7620LP		Pontoon 2 FL2870LP		Pontoon 3 FL1803LE		Calcutta FL880NX	
						Cape Horn L0965MW	
Car. Skiff FL7949KR		Polar FL7028MW		Twin V FL4770PS		Zodiac FL5080PN	
						Dusky FL6797FG	
Kayaks # Singles		Kayaks # Tandems					

Liability Waivers Provided by User (Yes or No)		If appropriate, Number of Hours used FSUCML Staff Boat Operator	
Time & Date of Departure (mmddyy)		Fuel Used (gallons)	
Time & Date of Return (mmddyy)		Specific Activity	
Trip cancellation	By Staff	By User	Reason

I certify that the above named Boat Operator (if not FSUCML Staff Boat Operator) has been checked out on the operation, safety, and communication procedures for proper use of the designated boat and/or vehicle

Signature of FSUCML staff checking vessel out _____

I certify that the data inserted above is accurate and complete.

Signature of FSUCML staff checking vessel in _____

APPENDIX IV - Float Plan for Small Boats on Off-Site Trips

Florida State University Coastal & Marine Laboratory Float Plan for Offshore and Off Site Trips

Directions: To be completed by user. Email or hand deliver to the FSUCML Marine Ops staff member one day before the trip.

User Name	Affiliation	Grant No.	Reservation No.
Route: Depart: From – To - Date		Return: From - To - Date	
Departure Port/Landing for Boat trips		Truck Used to Tow Boat	
Name & Location of Lodging:			

Passenger List. (Please check the "VOL" box if passenger is acting as a volunteer. Volunteers must complete proper paperwork before departure)					
No.	Name	Cell #	Emergency Contact & Relationship	EC Number	VOL
1					
2					
3					
4					
5					
6					

By signature below, I confirm that I have completed the checklist for the designated boat, I know the location of the boat's SeaTow number and the boat's E-PIRB, I will comply with all FSUCML boat operation policies and I have been checked out on the operation and communication procedures for proper use of the designated boat, trailer and vehicle. If diving, I confirm that I am an active AAUS Science Diver. I have submitted Completed Waivers for all passengers.

Boat Operator _____
(Print Name)
(Signature)
(Date)

To be completed by FSUCML Staff

Boat used (License No) – (check appropriate boat)							
Calcutta FL880NX		Twin V FL4770PS		Cape Horn FL0965MW		Dusky FL6797FG	
Car. Skiff FL7949KR		Zodiac FL5080PN					
Kayaks # Singles		Kayaks # Tandems					

Liability Waivers Provided by User	Y / N (circle one)	If appropriate, Number of Hours used FSUCML Staff Boat Operator	
Time & Date of Departure		Fuel Used (gallons)	
Time & Date of Return		Specific Activity	

I certify that the above named Boat Operator has been checked out on the operation, safety, and communication procedures for proper use of the designated boat and/or vehicle. I also certify that all of the information above is complete and correct.

Signature of FSUCML staff checking vessel out: _____

Signature of FSUCML staff checking vessel in _____ Fuel documented by: _____

APPENDIX V – Incident Reporting Form

FIRST REPORT OF INJURY OR ILLNESS FLORIDA DEPARTMENT OF FINANCIAL SERVICES

DIVISION OF WORKERS' COMPENSATION. For assistance call 1-800-342-1741 or contact your local EAO Office
Report all deaths within 24 hours 1-800-219-8953 or (850) 922-8953

RECEIVED BY CLAIMS-HANDLING ENTITY	SENT TO DIVISION DATE	DIVISION RECEIVED DATE

PLEASE PRINT OR TYPE

EMPLOYEE INFORMATION

NAME (First, Middle, Last)	Social Security Number	Date of Accident (Month-Day-Year)	Time of Accident <input type="checkbox"/> AM <input type="checkbox"/> PM
HOME ADDRESS Street/Apt #: _____ City: _____ State: _____ Zip: _____	EMPLOYEE'S DESCRIPTION OF ACCIDENT (Include Cause of Injury)		
TELEPHONE Area Code _____ Number _____			
OCCUPATION	INJURY/ILLNESS THAT OCCURRED	PART OF BODY AFFECTED	
DATE OF BIRTH	SEX <input type="checkbox"/> M <input type="checkbox"/> F		

EMPLOYER INFORMATION

COMPANY NAME: <u>Florida State University</u> D. B. A.: <u>Department of Environmental Health & Safety</u> Street: <u>1200 Carothers Hall</u> City: <u>Tallahassee</u> State: <u>FL</u>	FEDERAL I.D. NUMBER (FEIN) <u>59-6001874</u>	DATE FIRST REPORTED (Month/Day/Year)
TELEPHONE Area Code _____ Number _____ <u>(850) 644-6895</u>	NATURE OF BUSINESS <u>Education and Educational Support Services</u>	POLICY/MEMBER NUMBER <u>WC-94-0125</u>
EMPLOYER'S LOCATION ADDRESS (If different) <u>Same</u> Street: _____ City: _____ State: _____ Zip: _____ LOCATION # (If applicable) _____	DATE EMPLOYED	PAID FOR DATE OF INJURY <input type="checkbox"/> YES <input type="checkbox"/> NO
PLACE OF ACCIDENT (Street, City, State, Zip) Street: _____ City: _____ State: _____ Zip: _____ COUNTY OF ACCIDENT _____	LAST DATE EMPLOYEE WORKED <input type="checkbox"/> YES <input type="checkbox"/> NO RETURNED TO WORK IF YES, GIVE DATE	WILL YOU CONTINUE TO PAY WAGES INSTEAD OF WORKERS' COMP? <input type="checkbox"/> YES
DATE OF DEATH (If applicable)	AGREE WITH DESCRIPTION OF ACCIDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	RATE OF PAY \$ _____ PER <input type="checkbox"/> HR <input type="checkbox"/> WK <input type="checkbox"/> DAY <input type="checkbox"/> MO Number of hours per day _____ Number of hours per week _____ Number of days per week _____
Any person who, knowingly and with intent to injure, defraud, or deceive any employer or employee, insurance company, or self-insured program, files a statement of claim containing any false or misleading information commits insurance fraud, punishable as provided in s. 817.234, Section 440.105(7), F.S. I have reviewed, understand and acknowledge the above statement.		NAME, ADDRESS AND TELEPHONE OF PHYSICIAN OR HOSPITAL
EMPLOYEE SIGNATURE (If available to sign) _____ EMPLOYER SIGNATURE _____	DATE _____ DATE _____	AUTHORIZED BY EMPLOYER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

CLAIMS-HANDLING ENTITY INFORMATION

<input type="checkbox"/> a) Denied Case - DWC-12, Notice of Denial Attached	<input type="checkbox"/> 2. Medical Only which became Lost Time Case (Complete all required information in #3)
<input type="checkbox"/> 1(b) Indemnity Only Denied Case - DWC-12, Notice of Denial Attached	Employee's 8 TH Day of Disability _____/_____/_____ Entity's Knowledge of 8 TH Day of Disability _____/_____/_____
<input type="checkbox"/> 3. Lost Time Case - 1st day of disability _____/_____/_____ Full Salary in lieu of comp? <input type="checkbox"/> YES Full Salary End Date _____/_____/_____	Date First Payment Mailed _____/_____/_____ AWW _____ Comp Rate _____
<input type="checkbox"/> T.T. <input type="checkbox"/> T.T. - 80% <input type="checkbox"/> T.P. <input type="checkbox"/> I.B. <input type="checkbox"/> P.T. <input type="checkbox"/> DEATH <input type="checkbox"/> SETTLEMENT ONLY Penalty Amount Paid in 1 st Payment \$ _____ Interest Amount Paid in 1 st Payment \$ _____	
REMARKS:	INSURER NAME Division of Risk Management, State of Florida CLAIMS-HANDLING ENTITY NAME, ADDRESS & TELEPHONE Division of Risk Management, State of Florida P.O. Box 8020 Tallahassee, FL 32314 (850) 413-3123
INSURER CODE # 9235	EMPLOYEE'S CLASS CODE
SERVICE CO/TPA CODE # 6026	EMPLOYER'S NAICS CODE
CLAIMS-HANDLING ENTITY FILE #	