



PENNSYLVANIA FISH AND BOAT COMMISSION COURTESY FLOAT PLAN

*Complete this information before going boating and leave it with a reliable person.
When you return, remember to contact that person.*

1. Contact

Name: _____

Address: _____

Phone: _____

E-mail: _____

2. Boat Description

Type: _____

Color: _____

Length: _____

Registration Number: _____

Choose one:

Inboard _____ Sail _____

Outboard _____ Other _____

Canoe/kayak/SUP _____

3. People Onboard

Name: _____

Phone: _____

Name: _____

Phone: _____

Name: _____

Phone: _____

Name: _____

Phone: _____

4. Radio

CB: _____
(Yes) (No)

VHF: _____
(Yes) (No)

5. Automobile

Make/Model: _____

Color: _____

License Plate Number: _____

Parked at: _____

6. Trip Information

Leaving From: _____

Date: _____ Time: _____

Returning To: _____

Date: _____ Time: _____

7. Stops

Stop 1: _____
(Location)

(Time)

Stop 2: _____
(Location)

(Time)

Stop 3: _____
(Location)

(Time)

Stop 4: _____
(Location)

(Time)

8. Emergency Contact (if not returned by)

Date: _____ Time: _____

Name/Relationship: _____

Phone: _____