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| DEPARTMENT OF HOMELAND SECURITY U.S. COAST GUARD ANSC 7054 (01-11) | U.S. COAST GUARD AUXILIARY AIDS TO NAVIGATION REPORT | VERIFICATION(s) _____ DISCREPANCY |
|---|---|--------------------------------------|

SECTION I - MEMBER INFORMATION

| | | | | | | |
|-------------------|-------|-----------------------------------|---------------|----|-----------------|--|
| MEMBER NUMBER | | LAST NAME, FIRST NAME AND INITIAL | | | UNIT (DIV/FLOT) | |
| REPORT DATE | OPCON | TELEPHONE NUMBER | EMAIL ADDRESS | | | |
| NUMBER AND STREET | | | CITY | ST | ZIP | |

SECTION II - COAST GUARD NOTIFICATION

| | | | | | | |
|---------------------------|---------------|---------------|------------------------------------|-----------|--------|--|
| COAST GUARD UNIT NOTIFIED | DATE OBSERVED | DATE REPORTED | METHOD OF REPORTING TO COAST GUARD | | | |
| | | | RADIO | TELEPHONE | MAIL | |
| | | | TIME REPORTED _____ | | E-MAIL | |

SECTION III - AID OWNER, IDENTIFICATION AND CHARACTERISTICS

| | | | | | |
|--|----------|---|-------------|-----------|-----------|
| AID NAME: | | LLNR | MILE MARKER | PATON NO. | CHART NO. |
| POSITION: | LATITUDE | LONGITUDE | | OTHER | |
| OWNERSHIP: COAST GUARD (30) STATE (31) PRIVATE (31) OTHER (31) | | | | | |
| TYPE OF AID: BUOY STRUCTURE LIGHTED SOUND ELECTRONIC SINGLE PILE MARKER MILE MARKER | | | | | |
| STRUCTURES: WOOD METAL | | SOUND SIGNALS: BELL GONG HORN WHISTLE | | | |
| OTHER _____ | | LIGHT COLOR: RED GREEN WHITE YELLOW | | | |

SECTION IV - DISCREPANCIES (See instructions for items marked with asterisks *)

COMMON DISCREPANCIES

| | | |
|--------------------------|-------------------------|--------------------------|
| VANDALIZED* | DAMAGED BY COLLISION | RETROREFLECTIVE MATERIAL |
| IMPROPER CHARACTERISTICS | OBSCURED | PEELING |
| MISSING* | DAMAGED | MISSING |
| BIRD NEST | FADED | INADEQUATE |
| EXCESSIVE BIRD FOULING | PEELING PAINT | LEANING MORE THAN 15° |
| BATTERY BOX* | MISSING VENT VALVE | UNAUTHORIZED AID** |
| NUMBER UNREADABLE | DAYMARK DELAMINATED | OTHER _____ |
| EXCESSIVE DETERIORATION | ROTTING WOOD STRUCTURES | |

LIGHTED AIDS:

| | | |
|------------------------|-----------------------------|--------------|
| LANTERN DAMAGED | EXTINGUISHED | TIMING ERROR |
| OPERATING CONTINUOUSLY | LIGHT DIM/REDUCED INTENSITY | OTHER _____ |

BUOYS:

| | | | |
|--------------|-----------------|--------------|----------------|
| SINKING | SUBMERGED | OFF STATION* | TAPPER MISSING |
| ADRIFT | CAPSIZED | STRANDED | BELL MISSING |
| GONG MISSING | WHISTLE MISSING | OTHER _____ | |

COMMENTS:

AIDS TO NAVIGATION REPORT ANSC-7054 (1-07) (formerly CG-5474)

A. GENERAL- This form is used to submit ONLY that which refers to aids to navigation, such as buoys, lights, day beacons, ranges, electronic aids, and bridges which are owned or operated by federal, state, private and other agencies. A complete listing of reportable ATONs may be found in the ATON Chart Updating Guide. The report should contain as much information as possible, particularly in cases that involve discrepancies. Such detail will not only assist in prompt restoration, but may serve as defense in cases of liability. A chart section should be submitted with all unauthorized aid reports.

Credit towards award points occurs only when reports are forwarded through the AUXDATA System. Submission of ANSC 7054 to your Aid to Navigation chain as well as ANSC-7030 to your Information Services Officer is required to receive credit.

B. Section TOP

a. Check the correct box on the right for the activity being reported. Choose only ONE box and in the case of verifications where there are NO discrepancies put the total number of verifications being reported on this form on the right and list the multiples in the comments section at the bottom.

C. Section I - OBSERVER'S IDENTIFICATION

a. Enter 7-digit member number, last name, first name and initial, and unit (Division & Flotilla). Enter Report Date, OPCODE number for the Coast Guard unit for whom you are working (or in some cases the agency), a telephone number at which you can be reached, your email address (if available), your mailing address street, city, state and zip. Enter number of hours this report represents.

D. Section II - COAST GUARD NOTIFICATION

a. Name of CG unit or agency you notified, date of the observation and date reported and method as below:

- i. Radio for CRITICAL discrepancies
- ii. Telephone for URGENT reports
- iii. US Mail/e-mail for ROUTINE reports
- iv. 24 HR time of report.

E. Section III - AID OWNER, IDENTIFICATION AND CHARACTERISTICS

- a. **AID NAME** as found in the Light List or other official list, Light List number, mile marker or PATON number, and chart number.
- b. **POSITION** — LATITUDE & LONGITUDE or how you determined the aid position and the geographic location of the aid. (bay, river name)
- c. **OWNERSHIP**—Who is responsible for aid (check box)
- d. **TYPE of AID** and Characteristics — check boxes that apply (bridges are structures).

Section IV - DISCREPANCIES

a. Check all that apply. If a private aid is UNAUTHORIZED provide chartlet, digital picture, and as much information as possible. Do NOT attempt to confront the possible aid owner.

b. Check the appropriate boxes for lighted aid discrepancies and buoys. Common Discrepancies marked with an asterisk (*) require more information be included in the Comments section. ** If unauthorized aid, also enclose chart section indicating position and describe method utilized to determine position and (digital) picture if possible. Off Station Buoys require the following: Describe method utilized to determine aid was off-station (i.e., DGPS, WAAS/GPS, GPS, horizontal sextant angles, compass bearings, range finder, radar ranges, or seaman's eye).

F. COMMENTS

a. Up to 10 verifications may be listed here if so approved by your local Coast Guard unit. ONLY one discrepancy per report. Information not above such as BRIDGE FENDER discrepancies may be included here. Information such as possible ownership of unauthorized aids, or details of discrepancies, and methods of searching for missing aids may also be listed here.

Notes: If you have done this mission as part of an underway ATON patrol then no more time than it takes to file this report may be claimed on your 7030. If however, you have not claimed this time previously (because for example, you did this mission by automobile) the only additional information your IS officer needs is the number of hours spent on this mission. This is accomplished by entering your beginning and ending time on the 7030. The small numbers in parentheses next to Bridge Discrepancy and Ownership are the AUXDATA mission numbers for the various ATON activities.

Submit an individual 7030 to your IS chain for AUXDATA entry or e-form 7030 if so established in your AOR