

Radio Call	Frequency:	High Site:	DF Bearing:
Time:	Date:	UCN:	Initials:

-- Initial SAR Check-sheet --

About the Distressed Vessel			
1. Position	Type of Position	Lat/Long	
		Loran Lines	Geographic Location
How determined?			
2. Number of Persons Aboard	ADULTS:	CHILDREN:	TOTAL:
Health or medical concerns?			
3. Nature of Distress (if PIW complete additional PIW box below)			
4. Description of Vessel			
Including...			
Length	Color	Type	Name of Vessel
			at anchor? Y N
5. Have all persons aboard the vessel put on Personal Flotation Devices.			
***** ADVISE VESSEL OF INTENDED ACTIONS AT THIS TIME *****			

6. Determine Initial Severity/Emergency Phase (done by Watch Supervisor)	
<input type="checkbox"/> Distress <input type="checkbox"/> Dispatch Resources/Activate SAR Alarm. <input type="checkbox"/> Advise vessel of Coast Guard's Actions. <input type="checkbox"/> Brief Group/District <input type="checkbox"/> Provide Emergency Instructions to Vessel in Distress. <input type="checkbox"/> Issue UMIB. <input type="checkbox"/> Complete additional Check-Sheets as Situation Dictates. <input type="checkbox"/> Refer to D1 SARPLAN.	<input type="checkbox"/> Uncertainty <input type="checkbox"/> Alert <i>Additional Information is needed.</i> Complete one or more of the following: <input type="checkbox"/> Supplemental Check-sheet <input type="checkbox"/> Overdue Check-sheet <input type="checkbox"/> Flare Sighting Check-sheet <input type="checkbox"/> MEDEVAC/MEDICO Check-sheet <input type="checkbox"/> Grounding Check-sheet

About any People in the Water			
Number:	Confirmed?	Description	PFD?
Time:			Exp suit? Light?

Complete all of the above before shifting frequency; Complete below before hanging up phone.

About the Reporting Source	
Name of Reporting Source	
Name of Reporting Source Vessel	
Call back number (with area code)	Is this a cell phone number?
Address of Reporting Source	

About the On Scene Weather			
Wind	Seas	Swells	Visibility

FLARE SIGHTING

<p>PROCEDURES</p> <p>A. AWARENESS ____ 1. Fill out the INITIAL SAR CHECKSHEET. ____ 2. Fill out the FLARE SIGHTING checksheet. ____ 3. Assume or designate SMC.</p> <p>B. INITIAL ACTION ____ 1. Attempt to correlate w/ other SAR incidents. ____ 2. Brief SC. ____ 3. If other than red, orange, or white, and no correlating incidents exist, retain report for future reference. ____ 4. Evaluate emergency phase. ____ 5. Issue UMIB.</p> <p>C. PLANNING/ OPERATIONS ____ 1. Dispatch SRU. ____ 2. Develop SAP. ____ 3. Contact local agencies/ DOD units; check for pyro exercises in area. ____ 4. Have R/S vector SRU to scene. ____ 5. Conduct PRECOMS/solicit info from local contacts. ____ 6. SRU question all vsls/people in area for further info. ____ 7. If origin located, confirm that the subj fired a flare. ____ 8. Prep for next/first light search.</p> <p>D. MISSION CONCLUSION ____ 1. Close the case or request ACTSUS. ____ 2. Dealert SRU. ____ 3. CX UMIB. ____ 4. Debrief. ____ 5. Case administration.</p>	<p style="text-align: center;">OBTAIN A CLEAR MENTAL PICTURE OF WHAT THE R/S OBSERVED</p> <p>DTG of Report: _____ Reporting Source Name: _____</p> <p>Address: _____ Phone: _____</p> <hr/> <p>Flare color: RED AMBER WHITE GREEN OTHER: _____ # Observed: _____</p> <p>Type of flares: PARACHUTE HANDHELD METEOR OTHER: _____</p> <p>Time interval between flares: _____ Duration of burn: _____</p> <p>Trajectory: RISE FALL ARC STEADY OTHER: _____</p> <p>Additional Information: _____</p> <p>R/S Position: _____</p> <p>Position Uncertainty: _____</p> <p style="text-align: center;">DETERMINE THE ANGLE OF ELEVATION</p> <p>To determine the angle of elevation, particularly from the inexperienced R/S, ask the R/S to hold his/her arm at arm's length, make a fist, and place the bottom of the fist on the horizon. If the elevation of the flare is ABOVE the fist, the angle is greater than 8 degrees. Any elevation above 8 degrees can be approximated as the distance to the flare is within 1 NM. If the elevation is BELOW the top of the fist, ascertain how high up the fist, i.e. ¼, ½, ¾ or number of fingers. The distance to the source of the flare is much greater for any angle below 8 Degrees. The conversion tables from the CG Addendum to NSM (pg 2-45) are reproduced on the back of this checksheet for convenience.</p> <p>Angle of Elevation: _____ deg NLT: _____ deg NMT: _____ deg</p> <p>How Determined: _____</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border-right: 1px dotted black; vertical-align: top;"> Distance from R/S based on angle of elevation (as per NSM): NLT: _____ nm + / - _____ nm NMT: _____ nm + / - _____ nm </td> <td style="width: 50%; vertical-align: top;"> Bearing from R/S: _____ deg T / M + / - _____ deg </td> </tr> </table> <p>Apparent origin of flare: SURFACE AIR OTHER: _____</p> <p>Relation to the horizon: ABOVE BELOW ON OTHER: _____</p> <p>R/S height of eye: _____ Any vsls or aircraft sighted in vic: _____</p> <p>Obstruction in line of sight: TREES BLDGS OTHER: _____</p> <p>O/S Weather: Wind: ____/____ Seas: ____/____ Vis: ____ Sea temp: ____</p> <p>Additional notes: _____</p> <hr/> <p>If R/S is on a vessel, will R/S respond to sighting: Y / N ETA O/S: _____</p> <p>Intended action by R/S: _____</p> <p>If R/S is on land, will R/S remain by the phone to vector SRU: Y / N</p> <p>Advise R/S of Coast Guard intentions: _____</p>	Distance from R/S based on angle of elevation (as per NSM): NLT: _____ nm + / - _____ nm NMT: _____ nm + / - _____ nm	Bearing from R/S: _____ deg T / M + / - _____ deg
Distance from R/S based on angle of elevation (as per NSM): NLT: _____ nm + / - _____ nm NMT: _____ nm + / - _____ nm	Bearing from R/S: _____ deg T / M + / - _____ deg		

FLARE SIGHTING

TYPE	TRAJECTORY	AVERAGE HEIGHT	CANDLEPOWER NOMINAL RANGE****
METEOR*	RAPID RISE AND FALL	200 -675 FT	10,000-30,000 15 – 17 NM
PARACHUTE**	RAPID RISE/ SLOW DESCENT	200 – 1200 FT	20,000 – 40,000 14 – 20 NM
HANDHELD***	STEADY	ASSUME 10 FT	500 – 15,000 8 – 16 NM

*Meteor flares have no minimum altitude requirements.

**Parachute flare requirements by SOLAS: 300 Meter (990') height, 30K candlepower

***Handheld candlepower requirements: USCG – 500; SOLAS – 15,000

****Nominal Range: Allard's Law Nomogram for 10nm visibility & no moon.

CONVERT ESTIMATED "NOT MORE THAN" VERTICAL ANGLE TO ESTIMATED MINIMUM DISTANCE OF FLARE FROM OBSERVER

ESTIMATED "NMT" VERTICAL ANGLE		TYPE OF FLARE		
DEGREES	HANDS (FIST)	HANDHELD	METEOR	PARACHUTE
On the horizon or too small to estimate		0.1	1.0	4.0
2	¼	0.05	0.5	2.0
4	½	0.00	0.25	1.00
8	1	0.00	0.1	0.5
16	2	0.00	0.05	0.2
24	3	0.00	0.00	0.15
32	4	0.00	0.00	0.1
		DISTANCE IN NAUTICAL MILES		

NOTES: (1) If estimated "NMT" value is not listed, use the next greater entering value to yield the least minimum distance. (2) This table for observers at or less than 20' elevation.

CONVERT ESTIMATED "NOT LESS THAN" VERTICAL ANGLE TO ESTIMATED MINIMUM DISTANCE OF FLARE FROM OBSERVER

ESTIMATED "NLT" VERTICAL ANGLE		TYPE OF FLARE		
DEGREES	HANDS (FIST)	HANDHELD	METEOR	PARACHUTE
On the horizon or too small to estimate		6.0	28.0	30.0
2	¼	4.0	24.0	26.0
4	½	2.0	6.0	8.0
8	1	1.0	3.0	4.0
16	2	0.5	1.0	1.5
24	3	0.25	0.5	0.75
32	4	0.1	0.25	0.5
		Distance in Nautical Miles		

NOTES: (1) If estimated "NLT" value is not listed, use the next lesser entering value to yield the greatest maximum distance. (2) This table for observers at or less than 20' elevation.

ADDITIONAL INFORMATION:

UNCORRELATED MAYDAY, PROBABLE HOAX CALLS, AUTOMATED S.O.S, and MAYDAY

<u>PROCEDURES</u>	PRIMARY INFORMATION	
A. AWARENESS _____ 1. Fill out the INITIAL SAR Check-sheet. _____ 2. Fill out the UNCORRELATED MAYDAY AND PROBABLE HOAX CALLS Check-sheet. _____ 3. Assume/designate SMC.	Exact wording of radio call: _____ _____ _____	
	Possible correlating incidents: _____ _____	
	DFs OBTAINED	
B. INITIAL ACTION _____ 1. Attempt to correlate w/ other SAR incidents. _____ 2. For all uncorrelated mayday cases, immediately review recorded transmissions. _____ 3. Evaluate emergency phase. _____ 4. Plot and evaluate any DFs obtained by CG units or other vesels. _____ 5. Determine which hi-sites and local antennas picked up the distress in order to isolate the signal. _____ 6. If the call is suspected to be a hoax, replay the call to each level up the SAR chain of command. The final level of review is SC. If the general consensus remains that the call is in fact a probable hoax, no further action is required. _____ 7. Issue UMIB. _____ 8. Brief SC. _____ 9. Alert local authorities.	SITE/LOCATION _____ _____ _____	BEARING (T / M) _____ _____ _____
	HI SITES, LOCAL ANTENNA, AND OTHER UNITS RECEIVING THE TRANSMISSION	
C. PLANNING/ OPERATIONS _____ 1. Launch appropriate resources when there is sufficient info to establish a reasonable search area. _____ 2. Formulate search plan.	SITE/LOCATION _____ STRENGTH (strong, medium, weak) _____ _____ _____ _____	
	VESSEL/EQUIPMENT	
	<input type="checkbox"/> Document/Official # _____ <input type="checkbox"/> State Reg. # _____ Communications Equipment: <input type="checkbox"/> VHF-FM <input type="checkbox"/> HF <input type="checkbox"/> Other: _____ <input type="checkbox"/> Cellular #: _____ Frequencies: Usage: Prominent Features: Hull Material _____ Cause of incident: _____	Homeport: _____ Flag: _____ Navigation Equipment: <input type="checkbox"/> LORAN <input type="checkbox"/> GPS <input type="checkbox"/> Radar <input type="checkbox"/> Fathometer <input type="checkbox"/> Other: _____ Survival Equipment: <input type="checkbox"/> EPIRB Class/Type: _____ <input type="checkbox"/> VDS/Flares <input type="checkbox"/> Flashlight <input type="checkbox"/> Raft/Lifeboat <input type="checkbox"/> Dinghy/Skiff <input type="checkbox"/> Food/Water <input type="checkbox"/> Foul Wx Gear
PEOPLE		
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DMB Type: _____ Freq: _____		
Time: _____ Position: _____ N _____ W	Relocated _____ N _____ W	
D. MISSION CONCLUSION _____ 1. Close the case upon confirmed mission outcome, or request ACTSUS after appropriate action. _____ 2. Req ACTSUS if additional info indicating a prob hoax becomes available. _____ 3. Dealert SRUs. _____ 4. CX UMIB. _____ 5. Debrief. _____ 6. Case administration.		

DISABLED VESSEL

<u>PROCEDURES</u>	ADDITIONAL INFORMATION																																																
<p>A. AWARENESS ___ 1. Fill out the INITIAL SAR Checksheet. ___ 2. Fill out the DISABLED VSL Checksheet. ___ 3. Assume or designate SMC.</p> <p>B. INITIAL ACTION ___ 1. Instruct persons to don PFDs. ___ 2. Evaluate emergency phase. ___ 3. If Non-Emergency SAR, follow Maritime SAR Assistance Policy, General Salvage Policy. ___ 4. If vessel accepts commercial assistance, monitor until assistance arrives; if the vessel accepts Good Samaritan assistance, monitor until the vessel is safely moored or anchored. Otherwise, continue with these procedures. ___ 5. Issue UMIB if appropriate for the situation. ___ 6. Dispatch SRU(s). ___ 7. Consider instructing vessel to anchor. If unable to anchor, compute drift of the vessel. ___ 8. If necessary, notify relatives the vessel has been delayed (use caution when doing this so as not to cause undue alarm). ___ 9. Establish Comms schedule. ___ 10. Instruct vsl to activate EPIRB if comms are lost. Record hexadecimal code of 406 EPIRB. ___ 11. Brief SC.</p> <p>C. PLANNING/ OPERATIONS ___ 1. Formulate search plan. ___ 2. First SRU on scene deploy a DMB. Record DMB information on this checksheet. ___ 3. If vsl not located: ___ Double-check validity of initial position. ___ Commence PRECOMS. ___ Evaluate case and analyze all possible scenarios. ___ 4. Dispatch additional SRUs. ___ 5. Develop future searches. ___ 6. Notify MSO if appropriate.</p> <p>D. MISSION CONCLUSION ___ 1. Close the case or request ACTSUS. ___ 2. Dealert SRUs. ___ 3. CX UMIB. ___ 4. Debrief. ___ 5. Case administration.</p>	<p>Are there any other vessels in the area? _____ _____</p> <p>Is the vessel experiencing any icing conditions? _____</p> <hr/> <p style="text-align: center;">VESSEL/EQUIPMENT</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"><input type="checkbox"/> Document/Official #</td> <td style="width: 50%; padding: 2px;">Homeport:</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> State Reg. #</td> <td style="padding: 2px;">Flag:</td> </tr> <tr> <td style="padding: 2px;">Communications Equipment: <input type="checkbox"/> VHF-FM <input type="checkbox"/> HF <input type="checkbox"/> Other: _____ <input type="checkbox"/> Cellular #: _____ Frequencies:</td> <td style="padding: 2px;">Navigation Equipment: <input type="checkbox"/> LORAN <input type="checkbox"/> GPS <input type="checkbox"/> Radar <input type="checkbox"/> Fathometer <input type="checkbox"/> Other:</td> </tr> <tr> <td style="padding: 2px;">Usage: Prominent Features: Hull Material:</td> <td style="padding: 2px;">Survival Equipment: <input type="checkbox"/> EPIRB Class/Type: _____ <input type="checkbox"/> VDS/Flares <input type="checkbox"/> Flashlight <input type="checkbox"/> Raft/Lifeboat <input type="checkbox"/> Dinghy/Skiff <input type="checkbox"/> Food/Water <input type="checkbox"/> Foul Wx Gear</td> </tr> <tr> <td style="padding: 2px;">Cause of incident:</td> <td></td> </tr> </table> <hr/> <p style="text-align: center;">PEOPLE</p> <table border="1" style="width: 100%; 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MEDICO/MEDEVAC AND DIVE INCIDENTS

<p style="text-align: center;"><u>PROCEDURES</u></p> <p>A. AWARENESS ____ 1. Fill out the INITIAL SAR CHECKSHEET ____ 2. Fill out the MEDICO/MEDEVAC CHECKSHEET. ____ 3. Assume or designate SMC.</p> <p>B. INITIAL ACTION ____ 1. Evaluate emergency phase. ____ 2. Issue UMIB. ____ 3. Dispatch SRU(s). ____ 4. Brief SC/Flight Surgeon. ____ 5. Alert local authorities.</p> <p>C. PLANNING/ OPERATIONS ____ 1. If dive emergency, obtain recommendation and location of hyperbaric chamber from D.A.N. via SC. ____ 2. Brief Flt Surgeon on D.A.N.'s recommendation ____ 3. Pass Flt Surgeon/ DAN treatment recommendation to persons attending the patient. ____ 4. Notify hospital or recompression chamber. ____ 5. Direct vessel to head towards rendezvous point or nearest port. ____ 6. Run AMVER SURPIC to locate assistance if necessary. ____ 7. Notify vessel's agent/ owner, U.S. Customs, INS. ____ 8. Ntfy MSO/COTP.</p> <p>D. MISSION CONCLUSION ____ 1. Close the case or request ACTSUS. ____ 2. Dealert SRUs. ____ 3. CX UMIB. ____ 4. Debrief. ____ 5. Case administration.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">PATIENT INFORMATION</td> </tr> <tr> <td>Name _____ Age _____ Sex _____ Nationality _____ Type of injury (symptoms and location): _____ When/how injury occurred: _____ _____ Medications administered (amount and type): _____ _____ Previous medical history (including medications): _____</td> </tr> <tr> <td style="text-align: center;">PATIENT VITAL SIGNS</td> </tr> <tr> <td>Temp: _____ Airway: OBSTRUCTED GURGLING OPEN B/P (Wrist/Neck): _____ Resp: SHALLOW NORMAL DEEP NONE* Pulse: NORMAL WEAK POUNDING NONE* * IF NO PULSE/RESP, IS CPR BEING CONDUCTED? Y / N HOW LONG? _____</td> </tr> <tr> <td>Conscious Y N Ambulatory: Y N Eyes: Dilated Y N Convulsions: Y N Signs of shock: Y N Reactive Y N Vomiting: Y N Bleeding: Y N Equal Y N Tingling Limbs: Y N Paralysis: Y N</td> </tr> <tr> <td>Skin cond: DRY NML CLAMMY Skin color: BLANCHED YLW NML BLUE RED</td> </tr> <tr> <td>First aid kit: Y N Treatment given: _____ Medical personnel: DR RN EMT OTHER _____</td> </tr> <tr> <td style="text-align: center;">ADDITIONAL INFORMATION FOR DIVING ACCIDENTS</td> </tr> <tr> <td>Time of accident: _____ Patient's Height: _____ Weight: _____ Total dives today: _____ Interval between dives: _____ Dive depth: _____ FT/M Dive duration: _____ Decompression: _____ Dives in last 24 HRS? Y / N If YES, when? _____ Dive depth: _____ FT/M Dive duration: _____ Decompression: _____</td> </tr> <tr> <td>If diver trapped: Amount of air left in diver's tank? _____ Depth: _____ Experience of the trapped diver: _____ Equipment available: _____ Nature of object trapping diver: _____ Actions being taken to free diver: _____ Any divers and equipment in area to rescue diver: _____</td> </tr> <tr> <td style="text-align: center;">MISC INFORMATION</td> </tr> <tr> <td>Vsl LPOC/Date: _____ Vsl NPOC/ETA: _____ Communications: VHF-FM MF/HF CELLULAR Freq/Number: _____ O/S WX – Wind: _____ / _____ Seas: _____ / _____ Vis: _____ Sea temp: _____</td> </tr> <tr> <td style="text-align: center;">ADDITIONAL INFORMATION</td> </tr> </table>	PATIENT INFORMATION	Name _____ Age _____ Sex _____ Nationality _____ Type of injury (symptoms and location): _____ When/how injury occurred: _____ _____ Medications administered (amount and type): _____ _____ Previous medical history (including medications): _____	PATIENT VITAL SIGNS	Temp: _____ Airway: OBSTRUCTED GURGLING OPEN B/P (Wrist/Neck): _____ Resp: SHALLOW NORMAL DEEP NONE* Pulse: NORMAL WEAK POUNDING NONE* * IF NO PULSE/RESP, IS CPR BEING CONDUCTED? Y / N HOW LONG? _____	Conscious Y N Ambulatory: Y N Eyes: Dilated Y N Convulsions: Y N Signs of shock: Y N Reactive Y N Vomiting: Y N Bleeding: Y N Equal Y N Tingling Limbs: Y N Paralysis: Y N	Skin cond: DRY NML CLAMMY Skin color: BLANCHED YLW NML BLUE RED	First aid kit: Y N Treatment given: _____ Medical personnel: DR RN EMT OTHER _____	ADDITIONAL INFORMATION FOR DIVING ACCIDENTS	Time of accident: _____ Patient's Height: _____ Weight: _____ Total dives today: _____ Interval between dives: _____ Dive depth: _____ FT/M Dive duration: _____ Decompression: _____ Dives in last 24 HRS? Y / N If YES, when? _____ Dive depth: _____ FT/M Dive duration: _____ Decompression: _____	If diver trapped: Amount of air left in diver's tank? _____ Depth: _____ Experience of the trapped diver: _____ Equipment available: _____ Nature of object trapping diver: _____ Actions being taken to free diver: _____ Any divers and equipment in area to rescue diver: _____	MISC INFORMATION	Vsl LPOC/Date: _____ Vsl NPOC/ETA: _____ Communications: VHF-FM MF/HF CELLULAR Freq/Number: _____ O/S WX – Wind: _____ / _____ Seas: _____ / _____ Vis: _____ Sea temp: _____	ADDITIONAL INFORMATION
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ADDITIONAL INFORMATION														

VESSEL TAKING ON WATER OR VESSEL FIRE

PROCEDURES	ADDITIONAL INFORMATION																						
<p>A. AWARENESS ___ 1. Fill out the INITIAL SAR Check-sheet ___ 2. Fill out the VSL TAKING ON WATER/FIRE checksheet. ___ 3. Assume or designate SMC.</p> <p>B. INITIAL ACTION ___ 1. Have persons don PFDs. ___ 2. Evaluate emergency phase. ___ 3. Issue UMIB. ___ 4. Dispatch SRU(s). ___ 5. Instruct vsl to activate EPIRB if comms are lost. Record the EPIRB's hex code if time permits. ___ 6. Establish a comms schedule. ___ 7. Brief SC. ___ 8. Alert local authorities.</p> <p>C. PLANNING/ OPERATIONS ___ 1. Formulate search plan. ___ 2. First SRU on scene deploy a DMB. Record DMB information on this checksheet. ___ 3. Debrief survivors. ___ 4. If the vessel is not located: ___ Double-check validity of initial psn. ___ Commence PRECOMS. ___ Evaluate case and analyze all possible scenarios. ___ 5. Dispatch additional SRUs. ___ 6. Develop future searches. ___ Alert SRUs for next search. ___ Have local authorities do land search if any possibility that the persons could have gone ashore in a remote area. ___ Consult survival table info. ___ Analyze all possible scenarios. ___ 7. If the vessel is located: ___ Provide immediate assistance. ___ Tow or escort vessel to nearest safe port if assistance is still necessary. ___ 8. Mark wreck and issue NTM if vsl sinks. ___ 9. Notify appropriate MSO/ COTP.</p> <p>D. MISSION CONCLUSION ___ 1. Close the case or request ACTSUS. ___ 2. Dealert SRUs. ___ 3. CX UMIB. ___ 4. Debrief. ___ 5. Case administration.</p>	<p>Are there any other vessels in the area? _____ Rate of flooding: _____ Are there any pumps onboard? _____ Can they keep up with the flooding? _____ Where/Why is the vessel flooding: _____ If a commercial vsl, type/amount of cargo: _____ Is the vessel experiencing any Icing Conditions? _____</p> <p style="text-align: center;">VESSEL/EQUIPMENT</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"><input type="checkbox"/> Document/Official #</td> <td style="width: 50%; border: none;">Homeport: _____</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> State Reg. #</td> <td style="border: none;">Flag: _____</td> </tr> <tr> <td style="border: none;">Communications Equipment: <input type="checkbox"/> VHF-FM <input type="checkbox"/> HF <input type="checkbox"/> Other: _____ <input type="checkbox"/> Cellular #: _____ Frequencies: _____</td> <td style="border: none;">Navigation Equipment: <input type="checkbox"/> LORAN <input type="checkbox"/> GPS <input type="checkbox"/> Radar <input type="checkbox"/> Fathometer <input type="checkbox"/> Other: _____</td> </tr> <tr> <td style="border: none;">Usage: Prominent Features: Hull Material:</td> <td style="border: none;">Survival Equipment: <input type="checkbox"/> EPIRB Class/Type: _____ <input type="checkbox"/> VDS/Flares <input type="checkbox"/> Flashlight <input type="checkbox"/> Raft/Lifeboat <input type="checkbox"/> Dinghy/Skiff <input type="checkbox"/> Food/Water <input type="checkbox"/> Foul Wx Gear</td> </tr> <tr> <td style="border: none;">Cause of incident:</td> <td style="border: none;"></td> </tr> </table> <p style="text-align: center;">PEOPLE</p> <table style="width: 100%; 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Position: _____ N	_____ N																						
_____ W	_____ W																						

UNREPORTED AND OVERDUE VESSEL

<p><u>PROCEDURES</u></p> <p>A. AWARENESS ___ 1. Fill out the INITIAL SAR CHECKSHEET. ___ 2. Fill out the Overdue Vessel CHECKSHEET. ___ 3. Assume or designate SMC.</p> <p>B. INITIAL ACTION ___ 1. Evaluate the emergency phase. Consider: ___ Wx (past, present, predicted). ___ POB's health, age. ___ Commitments of POB. ___ Number of hours overdue. ___ Size, type of vessel. ___ Size of area involved. ___ Comms capability. ___ Expertise level of operator/crew. ___ 2. Issue UMIB. ___ 3. Brief SC. ___ 4. Commence Pre/ExComms.</p> <p>C. PLANNING/ OPERATIONS ___ 1. Dispatch SRUs if appropriate. ___ 2. Develope SAP. ___ 3. Seek additional information from persons who may be aware of vessel's situation. ___ 4. Designate one POC for the NOK. Keep NOK informed of progress. ___ 5. Continue to analyze all possible scenarios.</p> <p>D. MISSION CONCLUSION ___ 1. Close the case or request ACTSUS. ___ 2. Dealert SRUs. ___ 3. CX UMIB. ___ 4. Debrief. ___ 5. Case administration.</p>	<p>Complete both sides of this checksheet. One of the following might be reason to immediately launch an asset: Sig Hrs Overdue, Medical Concerns, Commitments, WX History, Age of POB</p> <hr/> <p>VSL LPOC: _____ Date / Time: _____ Did R/S confirm departure: Y / N</p> <p>VSL NPOC: _____ Date / Time: _____ Did R/S confirm non-arrival: Y / N</p> <p>Intended Route: _____</p> <p>POB: Adults: _____ Children: _____ HRS OVERDUE: _____</p> <p>Have they taken this trip before: Y / N UNK Do they usually stop over anywhere: Y / N UNK Do they have a habit of being late: Y / N UNK</p> <p>Last comms DTG: _____ Method: (VHF, L/L, etc.): _____</p> <p>Intentions at last comms: _____</p>				
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UNREPORTED AND OVERDUE VESSEL

<p>SURVIVAL EQUIPMENT::</p> <p>PFD's: Y N UNK Flares: Y N UNK Flashlight: Y N UNK Dye: Y N UNK Mirror: Y N UNK Smoke Marker Y N UNK Smoker Y N UNK Spotlight: Y N UNK AUX elec pwr: Y N UNK Radar Reflector: Y N UNK Drogue: Y N UNK Anchor: Y N UNK Anchor Line: Y N UNK Food: Y N UNK Water: Y N UNK Raft: Y N UNK Description: Dinghy: Y N UNK Description:</p>	<p>OPERATOR:</p> <p>Address:</p> <p>Phone:</p> <p>POC/NOK:</p> <p>Phone:</p> <p>Experience w/ boat: Y / N Experience in area: Y / N Swimmer: Good Fair Poor Non Clothing: Desc: HT: WT: Eyes: Hair: Race: Age: Health: Good Fair Poor Unk Commitments:</p>
<p>VEHICLE:</p> <p>Make: _____ Model: _____ Licence NR: _____ Color: _____ Trailer Lic: _____ Color: _____</p> <hr style="border-top: 1px dotted black;"/> <p>Second Vehicle:</p> <p>Licence NR: _____ Color: _____ Trailer Lic: _____ Color: _____</p>	<p>PASSENGER:</p> <p>Address:</p> <p>Phone:</p> <p>POC/NOK:</p> <p>Phone:</p> <p>Experience w/ boat: Y / N Experience in area: Y / N Swimmer: Good Fair Poor Non Clothing: Desc: HT: WT: Eyes: Hair: Race: Age: Health: Good Fair Poor Unk Commitments:</p>
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P.I.W.

<u>PROCEDURES</u>	PIW INFORMATION																												
<p>A. AWARENESS</p> <p>___ 1. Fill out the INITIAL SAR Checksheet.</p> <p>___ 2. Fill out the PIW Checksheet.</p> <p>___ 3. Req R/S remain o/s to vector SRUs.</p> <p>___ 4. Assume or designate SMC.</p> <p>B. INITIAL ACTION</p> <p>___ 1. Evaluate emergency phase.</p> <p>___ 2. Issue UMIB.</p> <p>___ 3. Dispatch quickest SRU(s).</p> <p>___ 4. Brief SC.</p> <p>___ 5. Alert local authorities.</p> <p>C. PLANNING/ OPERATIONS</p> <p>___ 1. Formulate search plan.</p> <p>___ 2. First SRU on scene deploy a DMB.</p> <p>___ 3. Dispatch additional SRUs.</p> <p>___ 4. Establish communications w/ family/NOK.</p> <p>___ 5. Develop future searches.</p> <p>___ Alert SRUs for next search.</p> <p>___ Have local authorities do land search.</p> <p>___ Consult survival table information.</p> <p>___ Analyze all possible scenarios.</p> <p>___ 6. If PIW is located:</p> <p>___ If alive, conduct MEDEVAC.</p> <p>___ Notify next of kin.</p> <p>___ If deceased, arrange recovery and turn body over to local authorities.</p> <p>___ Arrange for notification of next of kin IAW paragraph XXX.</p> <p>___ If there is any doubt, ensure that first aid and revival attempts continue until delivery to the nearest medical facility.</p> <p>D. MISSION CONCLUSION</p> <p>___ 1. Close the case or request ACTSUS.</p> <p>___ 2. Dealert SRUs and all individuals or offices notified of the case.</p> <p>___ 3. CX UMIB.</p> <p>___ 4. Debrief.</p> <p>___ 5. Case administration.</p>	<p>What were the circumstances? _____</p> <p>Is there any question that it was a person in the water? Describe what was sighted. _____</p> <p>PIW name: _____ Age: _____ Sex: M / F Weight: _____</p> <p>PIW health: _____ Nationality: _____</p> <p>Determine water temperature: _____</p> <hr/> <p style="text-align: center;">VESSEL/EQUIPMENT</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><input type="checkbox"/> Document/Official #</td> <td style="width: 50%;">Homeport: _____</td> </tr> <tr> <td><input type="checkbox"/> State Reg. #</td> <td>Flag: _____</td> </tr> <tr> <td>Communications Equipment: <input type="checkbox"/> VHF-FM <input type="checkbox"/> HF <input type="checkbox"/> Other: _____ <input type="checkbox"/> Cellular #: _____</td> <td>Navigation Equipment: <input type="checkbox"/> LORAN <input type="checkbox"/> GPS <input type="checkbox"/> Radar <input type="checkbox"/> Fathometer <input type="checkbox"/> Other: _____</td> </tr> <tr> <td>Usage: Prominent Features: Hull Material:</td> <td>Survival Equipment: <input type="checkbox"/> EPIRB Class/Type: _____ <input type="checkbox"/> VDS/Flares <input type="checkbox"/> Flashlight <input type="checkbox"/> Raft/Lifeboat <input type="checkbox"/> Dinghy/Skiff <input type="checkbox"/> Food/Water <input type="checkbox"/> Foul Wx Gear</td> </tr> <tr> <td>Cause of incident: _____</td> <td></td> </tr> </table> <hr/> <p style="text-align: center;">PEOPLE</p> <table border="1" style="width: 100%; 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CAPSIZED VESSEL

<u>PROCEDURES</u>	ADDITIONAL INFORMATION																								
<p>A. AWARENESS ___ 1. Fill out INITIAL SAR Check-sheet ___ 2. Fill out the CAPSIZED VESSEL checksheet. ___ 3. Assume or designate SMC. ___ 4. If possibility of PIW, or survivors trapped in the hull, continue. If not, treat as a PIW and/or pollution/ salvage case.</p> <p>B. INITIAL ACTION ___ 1. Evaluate emergency phase. ___ 2. Issue UMIB. ___ 3. Dispatch SRU(s). ___ 4. Arrange for rescue divers. ___ 5. Brief SC.</p> <p>C. PLANNING/ OPERATIONS ___ 1. SRU shall: a. Obtain vessel's name/Doc/Reg number. b. Interview survivors to determine where trapped persons might be in the hull. c. Stabilize the vessel. d. Attempt to communicate through hull. e. Estimate the minutes of air remaining. f. If appropriate equipment on scene, inject air under the vsl so it bubbles up inside. Do not put the hose into the air pocket unless it has a check valve or is connected to a source of air pressure. g. Attach a line w/ a marker buoy and strobe light to the hull in case it sinks. h. Keep survivors in the capsized hull aware of intentions. ___ 2. If divers cannot respond or do not locate survivors: a. Tow the vsl carefully to shore, keeping the craft stabilized in the inverted position. Once the vessel is on the beach, right it, or cut holes in the hull to free the survivors. Do not cut into the hull of a powered vessel with a gas cutting torch; you could ignite fuel fumes. Before doing any cutting, locate the fuel tanks; do not cut into them. b. Only as a last resort, attempt to right the vessel in deep water. If it is necessary, tell the survivors in the capsized hull what will take place and advise them to try and escape as the vessel rights. ___ 3. Notify appropriate MSO/ COTP. ___ 4. Issue BNM if vsl blocking channel.</p> <p>DMISSION CONCLUSION ___ 1. Close the case or request ACTSUS. ___ 2. Dealert SRUs. ___ 3. CX UMIB. ___ 4. Debrief. ___ 5. Case administration</p>	<p>Are there any People In the Water? _____ Any possibility that there are survivors trapped in the hull? _____</p> <p style="text-align: center;">VESSEL/EQUIPMENT</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"><input type="checkbox"/> Document/Official #</td> <td style="width: 50%; padding: 2px;">Homeport: _____</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> State Reg. #</td> <td style="padding: 2px;">Flag: _____</td> </tr> <tr> <td style="padding: 2px;">Communications Equipment: <input type="checkbox"/> VHF-FM <input type="checkbox"/> HF <input type="checkbox"/> Other: _____ <input type="checkbox"/> Cellular #: _____ Frequencies: _____</td> <td style="padding: 2px;">Navigation Equipment: <input type="checkbox"/> LORAN <input type="checkbox"/> GPS <input type="checkbox"/> Radar <input type="checkbox"/> Fathometer <input type="checkbox"/> Other: _____</td> </tr> <tr> <td style="padding: 2px;">Usage: Prominent Features: Hull Material:</td> <td style="padding: 2px;">Survival Equipment: <input type="checkbox"/> EPIRB Class/Type: _____ <input type="checkbox"/> VDS/Flares <input type="checkbox"/> Flashlight <input type="checkbox"/> Raft/Lifeboat <input type="checkbox"/> Dinghy/Skiff <input type="checkbox"/> Food/Water <input type="checkbox"/> Foul Wx Gear</td> </tr> <tr> <td style="padding: 2px;">Cause of incident:</td> <td></td> </tr> </table> <p style="text-align: center;">PEOPLE</p> <table border="1" style="width: 100%; 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VESSEL GROUNDING

<u>PROCEDURES</u>	PRIMARY INFORMATION																						
<p>A. AWARENESS</p> <p>___ 1. Fill out the INITIAL SAR Checksheet.</p> <p>___ 2. Fill out the GROUNDING checksheet.</p> <p>___ 3. Assume or designate SMC.</p> <p>___ 4. Determine assistance required. MEDEVAC?</p> <p>___ PIW?</p> <p>___ T.O.W.?</p> <p>___ VSL Fire? (refer to appropriate checksheet).</p> <p>B. INITIAL ACTION</p> <p>___ 1. Have all POB don PFDs.</p> <p>___ 2. Evaluate emergency phase.</p> <p>___ 3. Issue UMIB or MARB.</p> <p>___ 4. Dispatch SRU(s) if appropriate.</p> <p>___ 5. Establish a communications schedule.</p> <p>___ 6. Instruct vsl to activate EPIRB if comms are lost. Record the EPIRB's hex code if time permits.</p> <p>___ 7. If situation warrants, Instruct vsl to: ___ deploy liferaft, ___ break out flares, ___ plug fuel vents if it's possible there is a threat of the vessel breaking up or sinking. ___ Anchor to maintain position. ___ Take soundings.</p> <p>___ 8. Brief SC.</p> <p>C. PLANNING/ OPERATIONS</p> <p>___ 1. Notify local authorities to assist as needed.</p> <p>___ 2. Remove POB if necessary.</p> <p>___ 3. Have SRU evaluate situation; consider C.G. salvage policy. Refloat vsl only after considering specific factors listed in section xxx.</p> <p>___ 4. Monitor commercial salvage.</p> <p>___ 5. Notify appropriate MSO/ COTP.</p> <p>___ 6. Ensure ATON check conducted.</p> <p>___ 7. Issue BNM if vsl blocking channel.</p> <p>___ 8. Monitor pollution safeguards.</p> <p>D. MISSION CONCLUSION</p> <p>___ 1. Close the case or request ACTSUS.</p> <p>___ 2 Dealert SRUs.</p> <p>___ 3. CX UMIB or MARB.</p> <p>___ 4. Debrief.</p> <p>___ 5. Case administration.</p>	<p>Are you taking on water? Y / N</p> <p>If YES: What part of vessel? _____ How fast? _____ GPM</p> <p>Are there any injuires or people in the water? Y / N</p> <p>Is there any pollution as a result of the grounding? Y / N</p> <p>If YES: Type of material: _____ Estimated quantity: _____</p> <p>What type of bottom: MUD SAND ROCK OTHER: _____</p> <p>What is the state of the tidal current? Direction: _____ Rate: _____</p> <p>Type of fuel O/B: _____ Quantity of fuel: _____</p> <p>Type of cargo O/B: _____ Quantity of cargo: _____</p> <hr/> <p style="text-align: center;">OTHER INFORMATION</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Vessel Description:</td> <td style="width: 50%; border: none;">Owner:</td> </tr> <tr> <td style="border: none;">Name: _____</td> <td style="border: none;">Name: _____</td> </tr> <tr> <td style="border: none;">Homeport: _____</td> <td style="border: none;">Address: _____</td> </tr> <tr> <td style="border: none;">Type: PWR SPEED SAIL MERCHANT</td> <td style="border: none;">Telephone: _____</td> </tr> <tr> <td style="border: none;">Reg/Doc #: _____</td> <td style="border: none;">Has owner been ntfed? Y./N.....</td> </tr> <tr> <td style="border: none;">Length: ___ -- ___ FT / M</td> <td style="border: none;">Type: _____</td> </tr> <tr> <td style="border: none;">Make: _____</td> <td style="border: none;">Draft: _____</td> </tr> <tr> <td style="border: none;">Hull Color: _____</td> <td style="border: none;">Hull Material: _____</td> </tr> <tr> <td style="border: none;">S/S Color: _____</td> <td style="border: none;">Trim Color: _____</td> </tr> <tr> <td style="border: none;">Rudder movement: Y / N</td> <td style="border: none;">Wheel movement: Y / N</td> </tr> <tr> <td colspan="2" style="border: none;">Propulsion: I/B O/B I/O SINGLE TWIN</td> </tr> </table> <hr/> <p style="text-align: center;">ADDITIONAL INFORMATION</p> <p>O/S Weather: Wind: ___ / ___ T/M Seas: ___ / ___ FT/M</p> <p>Vis: ___ NM Sea temp: _____</p> <p>Weather forecast: _____ Next low tide: _____</p> <p style="text-align: right;">Next high tide: _____</p>	Vessel Description:	Owner:	Name: _____	Name: _____	Homeport: _____	Address: _____	Type: PWR SPEED SAIL MERCHANT	Telephone: _____	Reg/Doc #: _____	Has owner been ntfed? Y./N.....	Length: ___ -- ___ FT / M	Type: _____	Make: _____	Draft: _____	Hull Color: _____	Hull Material: _____	S/S Color: _____	Trim Color: _____	Rudder movement: Y / N	Wheel movement: Y / N	Propulsion: I/B O/B I/O SINGLE TWIN	
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VESSEL COLLISION

PROCEDURES	ADDITIONAL INFORMATION																			
<p>A. AWARENESS</p> <p>___ 1. Fill out the INITIAL SAR Check-sheet.</p> <p>___ 2. Fill out the VESSEL COLLISION checksheet.</p> <p>___ 3. Assume or designate SMC.</p> <p>B. INITIAL ACTION</p> <p>___ 1. Instruct persons to don PFDs.</p> <p>___ 2. Evaluate emergency phase.</p> <p>___ 3. Issue UMIB.</p> <p>___ 4. Dispatch SRU(s).</p> <p>___ 5. Contact local authorities.</p> <p>___ 6. If injuries, people missing, fire, or flooding, refer to appropriate checksheet.</p> <p>___ 7. Notify cognizant MSO.</p> <p>___ 8. Establish communication sched.</p> <p>___ 9. Brief SC.</p> <p>C. PLANNING/ OPERATIONS</p> <p>___ 1. The SRU shall:</p> <p>a. Obtain identification of all witnesses.</p> <p>b. Record on scene weather.</p> <p>c. If alcohol/drugs involved, treat as BWI situation. Coordinate with appropriate MSO if licensed operator or U.S. documented vessel involved.</p> <p>d. Determine pollution threat.</p> <p>___ 2. Ensure ATON check conducted.</p> <p>___ 3. Notify appropriate MSO/ COTP.</p> <p>D. MISSION CONCLUSION</p> <p>___ 1. Close the case or request ACTSUS.</p> <p>___ 2. Dealert SRUs.</p> <p>___ 3. CX UMIB.</p> <p>___ 4. Debrief.</p> <p>___ 5. 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ABANDONED, ADRIFT VESSEL

<u>PROCEDURES</u>	ADDITIONAL INFORMATION
<p>A. AWARENESS ____ 1. Fill out the INITIAL SAR Check-sheet. ____ 2. Fill out the ABANDONED, ADRIFT Check-sheet. ____ 3. Assume or designate SMC.</p> <p>B. INITIAL ACTION ____ 1. Evaluate emergency phase based on the information gathered using the ABANDONED, ADRIFT Check-sheet. ____ 2. Ask reporting source to stay on scene to vector SRUs to the correct location. ____ 3. Issue UMIB. ____ 4. Dispatch SRUs. ____ 5. Attempt to determine ownership by: (a) using vessel numbers, name, etc., (b) contacting local marina operators or other people familiar with the waterfront in the vicinity where the boat was located, (c) examining the items found onboard for items of personal identification. ____ 6. Unless established that a distress does not exist, proceed utilizing procedures established for PIW or CAPSIZED VESSEL cases. ____ 7. Brief SC.</p> <p>C. PLANNING/ OPERATIONS ____ 1. If the vessel poses a hazard to navigation, issue a local Notice to Mariners Broadcast. ____ 2. Tow the vessel to a safe location if it can be done without hazarding the vessel or C.G. crew.</p> <p>D. MISSION CONCLUSION ____ 1. Close the case or request ACTSUS. ____ 2. Dealert SRUs and all individuals or offices notified of the case. ____ 3. CX UMIB. ____ 4. Debrief. ____ 5. Case administration.</p>	<p>Did anyone see the vessel operating in the area? Y / N _____</p> <p>Was it occupied? Y / N _____</p> <p>How much and what type marine growth is on the hull? _____</p> <p>Is there a motor or means of propulsion? _____</p> <p>Were the keys in the ignition? Y / N _____</p> <p>Is there fishing or camping gear onboard which could have been carried or used on a recent trip? Y / N _____</p> <p>Is there emergency equipment (PFDs, flares, radio, EPIRB) on board? Y / N _____</p> <p>Does the vessel have parted or cut lines attached? Y / N _____</p> <p>Are fenders rigged? Y / N _____</p> <p>Is the anchor set or is there evidence that the anchor line was cut or parted? Y / N _____</p> <p>Is there debris in the area? Y / N _____</p> <p>How far offshore is the boat? _____</p> <p>Other damage? _____</p> <p>Reports of overdue or unreported vessels in the same area? Y / N _____</p>
VESSEL/EQUIPMENT	
[] Document/Official #	Homeport:
[] State Reg. #	Flag:
OWNER	
Name: _____	
Address: _____	
Phone: _____	
ADDITIONAL COMMENTS	

BRIDGE ALLISION/ CASUALTY

<u>PROCEDURES</u>	INITIAL ALLISION INFORMATION
<p>A. AWARENESS</p> <p>___ 1. Obtain initial information.</p> <p>___ 2. Evaluate the incident.</p> <p>___ a. If SAR exists, assign emergency phase. Complete the INITIAL SAR CHECK-SHEET and the appropriate incident-specific checksheet, in addition to completing the following procedures.</p> <p>___ b. If there has been damage to the bridge structure, notify the police or railway immediately to secure the bridge until a safety determination can be made.</p> <p>___ c. Determine if there are any hazards to navigation.</p> <p>B. INITIAL ACTION</p> <p>___ 1. Issue a Notice to Mariners if vsl is blocking the channel.</p> <p>___ 2. Brief SC who will notify CAA and C.G. Command Center and D1(m), (obr) as appropriate.</p> <p>___ 3. Notify the appropriate MSO..</p> <p>C. PLANNING/ OPERATIONS</p> <p>___ 1. Notify the following non-C.G. resources:</p> <p>___ Governing Agency.</p> <p>___ Railroad Company.</p> <p>___ State Emergency Services.</p> <p>___ State/Local Police.</p> <p>___ Federal Railroad Authority.</p> <p>___ State Highway Department.</p> <p>___ 2. Ensure marine inspectors direct drug/ alcohol testing.</p> <p>___ 3. If major case, monitor progress of commercial salvage.</p> <p>___ 4. Monitor pollution response, if applicable.</p> <p>___ 5. Ensure ATON check conducted</p> <p>D. MISSION CONCLUSION</p> <p>___ 1. Close the case or request ACTSUS.</p> <p>___ 2. Dealert SRUs and all individuals or offices notified of the case.</p> <p>___ 3. CX UMIB/BNM.</p> <p>___ 4. Debrief.</p> <p>___ 5. Case administration.</p>	<p>Name of Vessel: _____</p> <p>Name of Bridge: _____</p> <p>Location: _____</p> <p>Are there any people missing (PIW case)? _____</p> <p>Are there any injured persons (MEDEVAC case)? _____</p> <p>Condition of the vessel involved (Vsl T.O.W., DISABLED, Aground case)? _____</p> <p style="text-align: center;">SUPPLEMENTAL VESSEL INFORMATION FOR ALLISIONS</p> <p>[] Document/Official # _____</p> <p>[] State Reg. # _____</p> <p>Homeport: _____</p> <p>Commercial Vessel? Y / N Flag: _____</p> <p>Amount of fuel on board: _____</p> <p>Master hold a C.G. License? Y / N</p> <p>Reported cause of the allision: _____</p> <p>Pollution threat? Y / N</p> <p>Vsl cargo: _____</p> <p>Vsl owner: _____ IPN: _____</p> <p>Agent: _____ IPN: _____</p> <p>Operator: _____ IPN: _____</p> <p>Class Society: _____ IPN: _____</p> <p>O/S WX: VIS: _____ WIND: _____ / _____</p> <p>PRECIP: _____</p> <p style="text-align: center;">BRIDGE INFORMATION</p> <p>Damage to bridge or nature of casualty: _____</p> <p>_____</p> <p>Waterway: _____ Mile marker: _____</p> <p>Waterway usage: _____</p> <p>Responsible agency: _____</p> <p>Bridge position: Stuck Open / Stuck Closed _____</p> <p>Is any maritime traffic delayed as a result? Y / N If yes, record details: _____</p> <p>_____</p> <p>If a scheduled outage, reason for outage: _____</p> <p>_____</p> <p>Was scheduled outage previously authorized by D1(obr)? Y / N If yes, record the details: _____</p> <p>_____</p>

BRIDGE ALLISION/ CASUALTY

SC will brief D1(obr) if one of the bridges or waterways listed below is affected. Only brief recreational waterways from APR-OCT. In addition to the bridges/waterways listed below, brief (obr) if bridge repairs on any bridge are not being conducted in a timely manner or if excessive maritime traffic is being impacted. Brief one of the following personnel (listed in order of preference):

- a. Mr. Gary Kassof
- b. Mr. Joe Arca
- c. Mr. John McDonald

Mr. McDonald is primary for bridges in ME, NH, MA, and
--

Commercial Waterways

Arthur Kill
Acushnet River
Blynman Canal
Charles River
Chelsea Creek
Connecticut River
Danvers River
East River
Eel Pond
Fore River (ME)
Fort Point Channel
Gowanus Canal
Hackensack River
Harlem River
Hudson River (to Albany)
Hutchinson River
Jamaica Bay
Kill Van Kull
Lagoon Pond
Mill Basin
Mill River (CT)
Mystic River (CT)
New York Harbor
Niantic River
Norwalk River
Newark Bay
Newtown Creek
Passaic River
Piscataqua River
Quinnipiac River
Raritan River
Reynolds Channel
Saugus River
Tauton River
Thames River
Weymouth Fore River

Recreational Waterways (APR-OCT)

Apponagansett
Cheesequake Creek (NJ)
Housatanic River
Kennebec River
Lake Champlain
Manchester Harbor
Matawan River
Mianus River
Mystic River (MA)
Pequonnock River
Quantuck Canal
Quoque Canal
Reserved Channel
Saugatuck River
Shrewsbury River
West Bay

Digital Selective Calling (DSC)

Radio Call	Frequency:	Type of Comms:	Original	Relay					
Time:	Date:	UCN:	Initials:						
<p style="text-align: center;"><u>PROCEDURES</u></p> <p>A. AWARENESS ___ 1. Fill out the DSC checksheet.</p> <p>B. INITIAL ACTION ___ 1. Acknowledge the call within 2.75 minutes. ___ 2. Monitor the corresponding voice frequency. ___ 3. Establish voice comms. ___ 4. Notify the default SMC. ___ 5. D1 may delegate SMC to a Group or Activity when position is known and comms are established. ___ 6. Forward to appropriate RCC. ___ 7. Determine which Group will handle voice communications.</p> <p>C. PLANNING/OPERATIONS ___ 1. Research available databases to determine identity of the vessel. ___ 2. Establish comms to verify distress. Send TELEX or EASYLINK message to the vsl for amplifying info. ___ 3. If comms not established, contact vsl owner. If unable to reach owner, continue to step c.(4). _b. If vsl cannot be identified, continue to step c.(4).. ___ 4. If distress alert does not have a position or has an invalid position, contact the vessel, owner, or agent. ___ 5. If distress exists, or may exist, launch SRU(s) to assist (a/c, cutter, AMVER). _a. Complete the appropriate incident-specific checksheet and follow associated procedures once the type of distress is determined. ___ 6. Issue a Safetynet UMIB (all psns) or NAVTEX UMIB (psn within 200 nm only). ___ 7. Record on scene weather. ___ 8. If false alert, send False Alert Feedback Rpt msg to the vessel. ___ 9. If false alert, req vsl sends a cx msg for their DSC distress alert. _a. If rcvd, fax it to CAMSLANT. _b. If vsl refuses, ntfy LANTAREA.</p> <p>D. MISSION CONCLUSION ___ 1. Close the case or request ACTSUS. ___ 2. Dealert SRUs. ___ 3. CX UMIB. ___ 4. Debrief. ___ 5. Case administration.</p>		1. Position:							
		2. Description of Vessel							
		Name of Vessel: _____							
		MMSI: _____ Call Sign: _____							
		Type: _____							
		Length: _____ Color: _____							
		Contact Number: _____							
		Flag: _____ At anchor?: Y / N							
		Medical Personnel on board:							
		<table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Doctor</td> <td style="width: 25%;">Nurse</td> <td style="width: 25%;">Paramedic</td> <td style="width: 25%;">EMT</td> </tr> </table>			Doctor	Nurse	Paramedic	EMT	
		Doctor	Nurse	Paramedic	EMT				
		<i>Have all persons aboard the vessel put on Personal Flotation Devices</i>							
		3. Nature of Distress (if PIW complete additional PIW box below)							
		Date/Time Distress Message Sent: _____							
		Means of Communication: RADIO VOX _____ SITOR _____							
		INMARSAT _____ TELEX _____							
		4. Number of Persons Aboard:							
		ADULTS: _____ CHILDREN: _____ TOTAL: _____							
		<i>Health or medical concerns?</i>							
		** NOTIFY VESSEL OF COAST GUARD ACTIONS AT THIS TIME **							
Persons in the Water									
NUMBER:	Confirmed?	Description:	PFD? Exp Suit? Light?						
Time:									
Complete all of the above before shifting frequency; complete below before hanging up the phone									
Additional Vessel Information									
Last Port of Call:									
Next Port of Call:									
Shipping Agent:									
Shipping Agent contact number:									
About the Reporting Source									
Name of Reporting Source:									
Name of Reporting Source Vessel:									
Call back number (with area code): _____									
Is this a cell phone number? Y / N									
About the On Scene Weather									
Wind:	Seas:	Swells:	Visibility: Ceiling:						

DISORIENTED VESSEL

PROCEDURES	ADDITIONAL INFORMATION																						
<p>A. AWARENESS ___ 1. Fill out the INITIAL SAR Check-sheet. ___ 2. Fill out the DISORIENTED VSL Check-sheet. ___ 3. Assume or designate SMC.</p> <p>B. INITIAL ACTION ___ 1. Instruct persons to don PFDs. ___ 2. Evaluate emergency phase. ___ 3. Attempt to determine possible locations of the vessel. Consider departure and destination information, courses and speeds steered, landmarks, buoys, and vessels presently observed, as well as those observed during the voyage. Also consider any sounds (vessels, landmarks, nav aids, etc.) heard. ___ 4. Advise the vessel of your plans. ___ 5. If vsl rqsts a course to steer, light characteristics, or the I.D. of a light based on their evaluation, refer to responses in the detailed procedures on p.XX. ___ 6. Issue UMIB or MARB if warranted.</p> <p>C. PLANNING/ OPERATIONS ___ 1. Dispatch a SRU to DF and locate the vessel.. ___ 2. Initiate a search for the vessel. ___ 3. Instruct the vsl to activate EPIRB to provide position information, after discussing this option with SC. ___ 4. Consider advising the vsl to anchor to prevent them from going aground ___ 5. Establish a commsched. ___ 6. Instruct the vessel to activate the EPIRB if comms are lost. Record the hexadecimal code if a 406 MHZ EPIRB.</p> <p>D. MISSION CONCLUSION ___ 1. Close the case or request ACTSUS. ___ 2. Dealert SRU. ___ 3. CX UMIB. ___ 4. Debrief. ___ 5. Case administration.</p>	<p>Are there any other vessels in the area? _____</p> <p>Is the vessel experiencing any Icing Conditions? _____</p> <p>Landmarks and ATON the vessel can see: _____ _____</p> <p>Depth of water at the vessel: _____ Trackline of the vessel since time of departure: _____</p> <hr/> <p style="text-align: center;">VESSEL/EQUIPMENT</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><input type="checkbox"/> Document/Official #</td> <td style="width: 50%;">Homeport:</td> </tr> <tr> <td><input type="checkbox"/> State Reg. #</td> <td>Flag:</td> </tr> <tr> <td>Communications Equipment: <input type="checkbox"/> VHF-FM <input type="checkbox"/> HF <input type="checkbox"/> Other: _____ <input type="checkbox"/> Cellular #: _____ Frequencies:</td> <td>Navigation Equipment: <input type="checkbox"/> LORAN <input type="checkbox"/> GPS <input type="checkbox"/> Radar <input type="checkbox"/> Fathometer <input type="checkbox"/> Other:</td> </tr> <tr> <td>Usage: Prominent Features: Hull Material:</td> <td>Survival Equipment: <input type="checkbox"/> EPIRB Class/Type: _____ <input type="checkbox"/> VDS/Flares <input type="checkbox"/> Flashlight <input type="checkbox"/> Raft/Lifeboat <input type="checkbox"/> Dinghy/Skiff <input type="checkbox"/> Food/Water <input type="checkbox"/> Foul Wx Gear</td> </tr> </table> <hr/> <p style="text-align: center;">PEOPLE</p> <table border="1" style="width: 100%; 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VESSEL BESET BY WEATHER

<u>PROCEDURES</u>	ADDITIONAL INFORMATION																																														
<p>A. AWARENESS ___ 1. Fill out the INITIAL SAR Checksheet ___ 2. Fill out the VSL BESET BY WX checksheet. ___ 3. Assume or designate SMC. ___ 4. Determine assistance required. In some cases encouragement will help overcome a crisis of confidence. However, if the vessel requests assistance, proceed with SAR actions. The mariner may be too fatigued to help themselves.</p> <p>B. INITIAL ACTION ___ 1. Check forecasted weather. If a front has a leading or trailing edge, maybe the vessel could steer out of the storm system. ___ 2. Evaluate emergency phase. ___ 3. Instruct persons to don PFDs. ___ 4. Issue UMIB. ___ 5. Establish comms sched. Inform the vessel that a missed commskd will result in an immediate search. ___ 6. Instruct vsl to activate EPIRB if comms are lost or situation turns into distress. ___ 7. Record EPIRB type and hex code. ___ 8. Brief SC.</p> <p>C. PLANNING/ OPERATIONS ___ 1. Dispatch SRUs. ___ 2. Develop SAP. ___ 3. Deploy DMB if vsl not located. ___ 4. If the vessel is not located: ___ Double-check validity of initial psn. ___ Commence PRECOMS. ___ Evaluate case and analyze all possible scenarios. ___ 5. Dispatch additional SRUs. ___ 6. Develop future searches. ___ Alert SRUs for next search. ___ Have local authorities do land search if any possibility that the persons could have gone ashore in a remote area. ___ Consult survival table information. ___ Analyze all possible scenarios. ___ 7. On scene evaluation. ___ 8. Notify the appropriate MSO/COTP.</p> <p>D. MISSION CONCLUSION ___ 9. Close the case or request ACTSUS. ___ 10. Dealert SRUs. ___ 11. CX UMIB. ___ 12. Debrief. ___ 13. Case administration.</p>	<p>How long has the vessel been in the storm system? _____</p> <p>What storm tactics are being used by the vessel, and what storm tactics are available? _____</p> <p>_____</p> <p>Is the vessel experiencing icing conditions? _____</p> <hr/> <p style="text-align: center;">VESSEL/EQUIPMENT</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><input type="checkbox"/> Document/Official #</td> <td style="width: 50%;">Homeport:</td> </tr> <tr> <td><input type="checkbox"/> State Reg. #</td> <td>Flag:</td> </tr> <tr> <td>Communications Equipment: <input type="checkbox"/> VHF-FM <input type="checkbox"/> HF <input type="checkbox"/> Other: _____ <input type="checkbox"/> Cellular #: _____ Frequencies:</td> <td>Navigation Equipment: <input type="checkbox"/> LORAN <input type="checkbox"/> GPS <input type="checkbox"/> Radar <input type="checkbox"/> Fathometer <input type="checkbox"/> Other:</td> </tr> <tr> <td>Usage: Prominent Features: Hull Material:</td> <td>Survival Equipment: <input type="checkbox"/> EPIRB Class/Type: _____ <input type="checkbox"/> VDS/Flares <input type="checkbox"/> Flashlight <input type="checkbox"/> Raft/Lifeboat <input type="checkbox"/> Dinghy/Skiff <input type="checkbox"/> Food/Water <input type="checkbox"/> Foul Wx Gear</td> </tr> <tr> <td>Cause of incident:</td> <td></td> </tr> </table> <hr/> <p style="text-align: center;">PEOPLE</p> <table border="1" style="width: 100%; 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AIRCRAFT EMERGENCIES

<p style="text-align: center;"><u>PROCEDURES</u></p> <p>A. AWARENESS ____ 1. Fill out the INITIAL SAR checksheet. ____ 2. Fill out the AIRCRAFT EMERG. checksheet. ____ 3. Assume or designate SMC.</p> <p>B. INITIAL ACTION ____ 1. Evaluate emergency phase. ____ 2. Dispatch SRUs. ____ 3. Issue UMIB. ____ 4. Confirm departure/non-arrival ____ 5. Provide escort aircraft if distress phase. ____ 6. Establish comms schedule. ____ 7. Brief SC. ____ 8. Check SARSAT hits in area.</p> <p>C. PLANNING/ OPERATIONS ____ 1. If a/c ditches in water, treat as a PIW case. ____ 2. Ensure that the ARTCC/FSS is conducting Pre/ExComms. Assist as capable. ____ 3. Evaluate weather along flight track. ____ 4. Confirm aircraft registration data through FAA. ____ 5. Obtain assistance from ARTCC (if a/c using IFR) or FSS (if a/c using VFR). ____ 6. Req NTAP from AFRCC. ____ 7. Formulate search plan. ____ 8. Dispatch SRUs.</p> <p>D. MISSION CONCLUSION ____ 1. Close the case or request ACTSUS. ____ 2. Dealert SRUs. ____ 3. CX UMIB. ____ 4. Debrief. ____ 5. Case administration.</p>	<p style="text-align: center;">NATURE OF DISTRESS</p> <p style="text-align: center;"><u>INFLIGHT EMERGENCY / DITCHED / OVERDUE</u></p> <hr/> <p style="text-align: center;">AIRCRAFT DATA (AFRCC/FAA can provide cross reference via tail number or name.)</p> <p>Tail Number: _____ Nationality: _____ MILITARY / CIVILIAN Type: _____ Description: _____ <small>(Wing configuration, # engines, etc.)</small> Color: _____ No. of POB: _____ Flight Plan Filed: Y / N Type: VFR / IFR None Required: Y / N Last Known Comms Frequencies: _____ Fuel Remaining: _____ Altitude _____ Survival Equipment: RAFT / LIFEJACKET(S) / EPIRB/ELT (Type: _____) / FLARES/ MIRROR / DYE / SPOTLIGHT / FLASHLIGHT / OTHER: _____ Parachutes: Y / N</p> <hr/> <p style="text-align: center;">POSITION</p> <p>Latitude/Longitude: _____ N _____ W Bearing/Range: _____ / _____ T / M From: _____ (nav. aid) Geographic Position: _____ Speed: _____ Course: _____ T / M Altitude: _____ FT / M O/S Weather: Winds: _____ / _____ Seas: _____ / _____ Vis: _____</p> <hr/> <p style="text-align: center;">ROUTE INFORMATION</p> <p>Departure from: _____ ETD: _____ Via: _____ ETA: _____ Via: _____ ETA: _____ Via: _____ ETA: _____ Destination: _____ ETA: _____ Alternate Destination: _____</p> <hr/> <p style="text-align: center;">PILOT/OWNER/PASSENGER INFORMATION</p> <p>Pilot Name: _____ Address: _____ Phone: _____</p> <p>Owner's Name: _____ Address: _____ Phone: _____</p> <p>Passenger Name: _____ Address: _____ Phone: _____</p> <p>Passenger Name: _____ Address: _____ Phone: _____</p>
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UNEXPLODED ORDNANCE

<u>PROCEDURES</u>	ADDITIONAL INFORMATION																		
<p>A. AWARENESS ___ 1. Fill out the INITIAL SAR Checksheet ___ 2. Assume or designate SMC.</p> <p>B. INITIAL ACTION ___ 1. Instruct persons to don PFDs. ___ 2. Evaluate emergency phase. ___ 3. Advise R/S not to touch, move, or take any actions that might cause the ordnance to detonate. ___ 4. Order vsl to remain at sea (fair WX) or proceed to safe lee where other vsls/people won't be threatened (heavy WX). If the ordnance is recovered in nets or dredges, advise vsl to: a. Not allow the item to remain alongside the vessel where wave action may cause contact with the hull. b. If the item is on board and suspended, and can continue to be safely suspended, stabilize the net with the guy lines to prevent movement. Keep the crew away from the area. c. If the item is not onboard and can be safely lowered into the water, do so. d. Depending on circumstances, including weather or nearby vessels, the crew can consider abandoning their vessel, until the ordnance is disposed of. ___ 5. Issue UMIB. ___ 6. Fill out the UNEXPLODED ORDNANCE checksheet. ___ 7. Brief SC who will brief an EOD. ___ 8. Notify appropriate MSO/COTP to establish a safety zone. ___ 9. Establish communication sched. ___ 10. Instruct vsl to activate EPIRB if comms are lost. Record the hexadecimal code.</p> <p>C. PLANNING/ OPERATIONS ___ 1. Notify the local fire and police departments. ___ 2. Dispatch SRUs to enforce safety zone. ___ 3. Provide transportation for EOD team to scene.</p> <p>D. MISSION CONCLUSION ___ 1. Close the case or request ACTSUS. ___ 2. Dealert SRUs. ___ 3. CX UMIB/safety zone. ___ 4. Debrief. ___ 5. Case administration.</p>	<p>Any other vessels in the area? _____</p> <p>Description of item (shape, diameter, length, weight, damage, color, markings): _____ _____</p> <p>Depth of water: _____ Nearest populated area: _____</p> <p>Person in charge at scene: _____</p> <p style="text-align: center;">VESSEL/EQUIPMENT</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"><input type="checkbox"/> Document/Official #</td> <td style="width: 50%; padding: 2px;">Homeport: _____</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> State Reg. #</td> <td style="padding: 2px;">Flag: _____</td> </tr> <tr> <td style="padding: 2px;">Communications Equipment: <input type="checkbox"/> VHF-FM <input type="checkbox"/> HF <input type="checkbox"/> Other: _____ <input type="checkbox"/> Cellular #: _____</td> <td style="padding: 2px;">Navigation Equipment: <input type="checkbox"/> LORAN <input type="checkbox"/> GPS <input type="checkbox"/> Radar <input type="checkbox"/> Fathometer <input type="checkbox"/> Other: _____</td> </tr> <tr> <td style="padding: 2px;">Usage: Prominent Features: Hull Material:</td> <td style="padding: 2px;">Survival Equipment: <input type="checkbox"/> EPIRB Class/Type: _____ <input type="checkbox"/> VDS/Flares <input type="checkbox"/> Flashlight <input type="checkbox"/> Raft/Lifeboat <input type="checkbox"/> Dinghy/Skiff <input type="checkbox"/> Food/Water <input type="checkbox"/> Foul Wx Gear</td> </tr> <tr> <td style="padding: 2px;">Cause of incident:</td> <td></td> </tr> </table> <p style="text-align: center;">PEOPLE</p> <table border="1" style="width: 100%; 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CIVILIAN SUBMERSIBLE INCIDENTS

<u>PROCEDURES</u>	ADDITIONAL INFORMATION	
<p>A. AWARENESS ___ 1. Fill out the INITIAL SAR CHECKSHEET. ___ 2. Fill out the CIVILIAN SUBMERSIBLE CHECKSHEET. ___ 3. Assume or designate SMC.</p> <p>B. INITIAL ACTION ___ 1. Evaluate the emergency phase. ___ 2. Issue UMIB. ___ 3. Dispatch SRU(s). Consider Atlantic Strike Team, WMEC, WLB, WPB, small boats. These units may fulfill roles as OSC, rescue platform, traffic control, aircraft guard, communications, logistics. ___ 4. Brief SC. ___ 5. Notify the Navy Command Center Duty Captain at the Pentagon: (703) 695-0231, via the LANTAREA command center. ___ If the incident involves a civilian submersible, request implementation of SUBMISS/SUBSUNK per the NAVSEA SUBMISS/SUBSUNK Bill for Submarines and Manned Noncombatant Submersibles, NAVSEAINST 4740.1 series. ___ 6. Keep CAA and Headquarters command centers updated on case.</p> <p>C. PLANNING/ OPERATIONS ___ 1. Determine if there are any other civilian submersibles available by contacting the National Undersea Research Program; Groton CT: (860) 405-9121, Silver Spring MD: (301) 713-2427. ___ 2. Develop SAP. ___ 3. Notify the appropriate MSO to establish a safety zone and dispatch personnel to scene. ___ 4. Notify the owner of the involved craft. ___ 5. Arrange commercial tug assistance.</p> <p>D. MISSION CONCLUSION ___ 1. Close the case or request ACTSUS. ___ 2. Dealert SRUs. ___ 3. CX UMIB. ___ 4. Debrief. ___ 5. Case administration.</p>	VESSEL/EQUIPMENT	
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