



**DEPARTMENT OF PUBLIC SAFETY
EMERGENCY ASSISTANCE OFFICE
STATE OF POHNPEI**

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Float Plan

Planned Departure				Planned Return			
Date:		Time:		Date:		Time:	
Departure Location:				Return to location:			
Destination or Planned route of trip:							
When should your friend/family member call to tell Public Safety you are overdue?							
Persons on board		Age	M/F	Clothing colors	Medical Problems?	Can swim?	
1.							
2.							
3.							
4.							
5.							
6.							

Vessel type: <input type="checkbox"/> Power <input type="checkbox"/> Row <input type="checkbox"/> Sail		Color of sail	
Amount of fuel on board	Bimini/Sun Cover Color		Outboard Color
Vessel Name		Vessel Owner Name/Contact #s	
Length	Draft	Hull Material	
Hull Color	Interior of Hull Color		
Signal Devices	EPIRB	Radio: (VHF/SSB)	
Cell Phones on board/numbers			

Food and Water on board:	<ul style="list-style-type: none"> • _____ • _____ • _____ • _____
Other items on board:	<ul style="list-style-type: none"> • _____ • _____ • _____ • _____ • _____