



# Coastal Voyage Form

Complete this form and fax to RCCNZ.

NAME OF VESSEL \_\_\_\_\_

SKIPPERS NAME \_\_\_\_\_

## DEPARTURE DETAILS

Date of Departure: \_\_\_\_\_

Port of Departure: \_\_\_\_\_

ETA: \_\_\_\_\_

Next Port: \_\_\_\_\_

If details change, ensure you advise Maritime Radio.

## REGISTRATION DETAILS

Registration Number or call sign: \_\_\_\_\_

Port Registered: \_\_\_\_\_

Sail No: \_\_\_\_\_

Home Port: \_\_\_\_\_

Date Registered: \_\_\_\_\_

## STRUCTURE

Rig: \_\_\_\_\_

Design: \_\_\_\_\_

Construction Material: \_\_\_\_\_

Length: \_\_\_\_\_

Beam: \_\_\_\_\_

Draught: \_\_\_\_\_

Masts: \_\_\_\_\_

Weight: \_\_\_\_\_

Other Identifying Features: \_\_\_\_\_

## COLOURS

Deckhouse: \_\_\_\_\_

Deck: \_\_\_\_\_

Hull (below w/line): \_\_\_\_\_

Sails: \_\_\_\_\_

Hull (above w/line): \_\_\_\_\_

Mast: \_\_\_\_\_

## PROVISIONS

Engine HP: \_\_\_\_\_

Fuel Capacity: \_\_\_\_\_

Passage Speed: \_\_\_\_\_

Fresh Water: \_\_\_\_\_

Food for \_\_\_\_\_ days

## NAVIGATION AND COMMUNICATIONS

Cellphone Number: \_\_\_\_\_

(Tick)

SSB

Radar

VHF

GPS

HAM

Hand held VHF

Call sign: \_\_\_\_\_

Proposed Radio Watch Schedule, Frequencies: \_\_\_\_\_

Inmarsat No.: \_\_\_\_\_

With whom: \_\_\_\_\_

MMSI No.: \_\_\_\_\_

## EMERGENCY EQUIPMENT

Flares (tick): \_\_\_\_\_

Parachute

Handheld

Smoke

Radar Reflector: Y/N

EPIRB: Make: \_\_\_\_\_

Frequency: \_\_\_\_\_

121.5/243

406

Life Raft: Y/N

Capacity: \_\_\_\_\_

Dinghy: Y/N

## PERSONNEL DETAILS

	NAME	DATE OF BIRTH	NEXT OF KIN TEL NO.
1 <sup>st</sup> Contact		N/A	
Master	_____	_____	_____
Crew	_____	_____	_____
Crew	_____	_____	_____
Crew	_____	_____	_____
Crew	_____	_____	_____
Crew	_____	_____	_____
Crew	_____	_____	_____

Fax completed form to RCCNZ on +64 4 577 8038.

Until your vessel is reported overdue or a distress call is received, no action will be taken. HAVE A SAFE VOYAGE.