

**MOFSC KEELBOAT EQUIPMENT COMPLIANCE FORM (2017 - 2018 Summer Season)
for Monohulls - Categories 6 and 6M**

BOAT NAME _____ OWNER _____ MAX CREW _____ Category _____

SAIL NO _____ CLUB _____ PEN NO _____ DPI REG NO _____ PHONES _____

**OWNERS: 1. Mark each item in either Cat 6 or Cat 6M column with a tick (OK, boat complies), a cross (Does NOT comply) or N/A for Not Applicable THEN
2. Register this form with your club/race organising authority. Clubs must retain a copy. It may be audited by an authorised Club Equipment Auditor at any time.**

PERSONAL EQUIPMENT	SR No	Cat 6	Cat 6M
Number PFD 1s (AS1512) OR AS4758 - 100 N Min, 150 N recommended, with retro tape & whistle	5.01.1(f)		
Number of PFD 2s (AS1499) OR AS4758 50 Newtons with retro tape and whistle	5.01.1(f)		
Owner's name & phone on privately owned PFDs	4.16.2		
Boat's name on those not privately owned	4.16.1		
Each PFD checked for serviceability	5.01.6 / 7		
DOCUMENTS & BOOKS			
Variable Ballast – Plan of plumbing system displayed	3.01.5		XXXXXX
Moveable Ballast - Operating diagram displayed	3.01.6		XXXXXX
Stability requirement conformity Based on _____	3.04 and App. B		XXXXXX
IRC Cert. if applicable – Expiry date _____			XXXXXX
Current Racing Rules of Sailing (Blue Book) ebook OK	4.10.3		
LOOSE BELOW			
2 stout ≥ 8 litre buckets with lanyards	3.20.9		
Paddles: if no engine & ≤ 5.5m – 2 oars or paddles	3.24.10		
Sail Numbers on all sails as required by RRS	4.01.1		
1 10 BE Fire Extinguishers if engine or naked flame	4.04.1(b)		XXXXXX
1 10 BE Fire extinguisher if LPG or petrol & 1 Fire Blanket if any form of cooking stove	4.04.1(c) 4.04.1(d)		XXXXXX XXXXXX
V Distress Sheet	4.27.1		
Flashlight: Water resistant & floating type	4.06.3		
PYROTECHNICS			
2 Red paras, 2 orange h/h or 1 orange can. – IN DATE	DoT		
ELECTRONICS			
25 Watt VHF Transceiver for Cat 6; 5 W for Cat 6M	3.25		
406 EPIRB registered in boat's name. Battery in life	4.18.3		XXXXXX
FIRST AID (numbers required shown in category col.)			
In waterproof container with contents listed on outside	4.07.8		
Soluble Aspirin (Disprin) for Cardiac emergencies	4.07.8	20	20
Disposable gloves	4.07.8	10	10

Crepe bandages 75mm x 1.5m	4.07.8	2	2
Low absorbent non adherent dressing (e.g. Melolin)	4.07.8	5	2
Band-aids or equivalent roll of bandaid	4.07.8	20	20
Normal saline (for washing) 30ml	4.07.8	2	2
Sunscreen 30+ SPF 250ml	4.07.8	1	1
Stainless Steel Scissors	4.07.8	1	1
CPR mask OR 6 Face shields	4.07.8	1	1
ENGINE & FUEL			
Engine: If fitted – installation secured & covered	3.24.1		XXXXXX
Engine: If fitted – starting battery if cannot be cranked	3.24.6		XXXXXX
Engine: If fitted – tank shutoff valve	3.24.8		XXXXXX
Engine: If fitted – fuel lines & tanks comply (pp230-231)	3.24.9		XXXXXX
BELOW DECK			
Ballast & any heavy equipment secured	2.03.2		
Galley stove – if fitted – securely fastened	3.17.2		XXXXXX
Gas – by professional if fitted, Turn Off Gas sign	3.17.4		XXXXXX
Bilge Pump – if fitted –Correct discharge & 25mm suction	3.20		
Anchor (see pp237- 238) with 5m chain & 45m rope	4.05.1		
Sharp knife in or near each cockpit, restrained	4.15.3		
Boats name on all loose equipment – including PFDs	4.16.1		
ABOVE DECK			
2 Exits, 1 forward of mast if carrying fuel	3.06.1(b)		XXXXXX
F/W Hatch opens outwards & All above water at 90°	3.07.1/2		XXXXXX
Cockpits – size, self-draining, drain sizes	3.08		
Lifelines – if fitted – comply with all clauses in 3.12	3.12		XXXXXX
Identification (name & club) also DPI OR Sail No on hull	3.28.1		
Lifebuoys: if carried – retro-reflective material fitted	4.17.1		XXXXXX
Equipment/Method of retrieving crew from the water	4.26.1		XXXXXX
All equipment on boat suitable for intended use	2.03.1		
MAN OVERBOARD DRILL - recommended			
Date of last MOB drill _____	6.01.2		
Number of current crew involved _____	6.01.2		

OWNER'S DECLARATION

I have read and understand my obligations as set out in the YA Special Regulations (2017-2020), in particular SR1.2 Life Saving Equipment. An audit cannot diminish this responsibility.
I undertake to maintain the boat and all its equipment in good order and condition as specified in the Special Regulations and train the crew in its use.

Signed _____ Person in Charge Date _____ Auditor _____ Date _____