

Safety Checklist

Pre-Departure (Complete before you leave port)							
Were you informed of the general safety procedures for the vessel?						Yes / No	
Were alarm signals demonstrated for each type of emergency?						Yes / No	
Did you examine escape routes from accommodations and work areas?						Yes / No	
Where is your muster station in case of an emergency?							
Who is the person in charge of medical treatment?							
Were you shown the location of radios and provided with instructions for use?						Yes / No	
Were you shown the location of navigation equipment and provided with instructions on use?						Yes / No	
Survival craft		Capacity (#persons)	Last inspection date	Location	Float free?	Hydrostatic release	
						Present	Attach properly
Model					Y / N	Y / N	Y / N
Model					Y / N	Y / N	Y / N
Was there adequate life raft capacity for all on board? Yes / No							
Was survival craft packed with a SOLAS kit? A / B / Other / No							
EPIRBs		Battery expire date	Location		Category I / II	Float free?	
Model						Y / N	
Model						Y / N	
Check if Present or Absent			Present	Absent	Unknown		
Station bill						In main areas/corridors? Yes / No	
Fire extinguishers							
First aid equipment							
High water alarm							
Watertight doors							
			Do they close properly? Yes / No				
Distress flares		#	Expired?	Location			
Parachute			Y / N				
Smoke			Y / N				
Hand			Y / N				
			Y / N				
Were there adequate PFDs for all on board? Yes / No							
Drills (Complete post-trip)							
	Fire	Man overboard	Abandon ship	Flooding	Other?		
Performed?	Y / N	Y / N	Y / N	Y / N			
Date							
If drills were performed, did you participate in drills? Yes / No							
Other Comments:							