



**BOAT SAFETY SC**  
Go Boating - Stay Safe

## BSS Examination information form

### Customer contact information

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_   
Mobile Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

### Boat location

Address \_\_\_\_\_  
\_\_\_\_\_   
Postcode \_\_\_\_\_  
What-three-words location \_\_\_\_\_

### Boat details

Year of manufacture: \_\_\_\_\_  
Reg. or index No. \_\_\_\_\_  
Make: \_\_\_\_\_ Model: \_\_\_\_\_  
Length (m) \_\_\_\_\_ Beam (m): \_\_\_\_\_

Hull material: \_\_\_\_\_ Hull Colour: \_\_\_\_\_  
Superstructure material: \_\_\_\_\_ Colour: \_\_\_\_\_  
CIN/HIN/WIN: \_\_\_\_\_  
No. of boat engines: \_\_\_\_\_ Engine fuel: \_\_\_\_\_  
Engine type: \_\_\_\_\_ inboard or ourboard \_\_\_\_\_  
Engine makes: \_\_\_\_\_ Engine model: \_\_\_\_\_  
Engine Rating(s): \_\_\_\_\_  
Designed No. of Persons: \_\_\_\_\_

## Boats internal fixtures

Solid fuel appliances : \_\_\_\_\_  
\_\_\_\_\_

Installed LPG system? \_\_\_\_\_ Yes/No \_\_\_\_\_

LPG Appliances: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Electrical DC power? \_\_\_\_\_ Yes/No \_\_\_\_\_

Electrical AC power? \_\_\_\_\_ Yes/No \_\_\_\_\_

Toilet &/or holding-tank with overboard discharge? \_\_\_\_\_ Yes/No \_\_\_\_\_

Boat status (legality notes) GSIUR status? In scope / out of scope RCD status?

Is the boat used solely or primarily by any one for domestic or residential purposes?