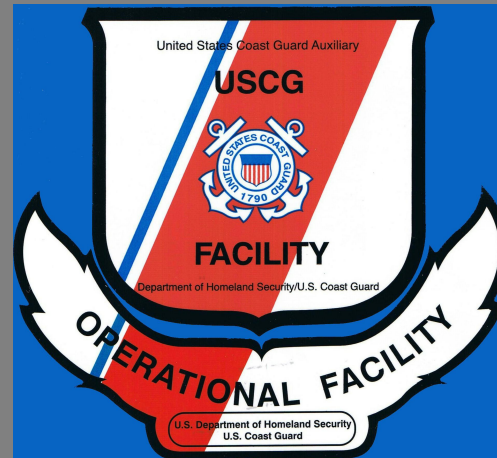




**United States Coast Guard Auxiliary**  
District 11 Northern Region  
Serving Northern California, Nevada, Utah



# Operational Facility Review



Prepared by  
Mike Lauro DSO-VE 11NR  
The D11NR Vessel Examiners Save Lives!

# Operational Facility Decal



# VSC Decal



# Introduction

- This module will present you with the forms and tips necessary to conduct an Auxiliary OPFAC (Operational Facility) inspection, the 1<sup>st</sup> step to be able to apply for Coast Guard patrol orders.
- This module will also highlight the important items while doing the inspection.

# Topics of Discussion

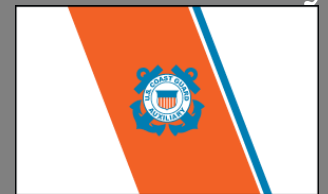
- FORMS- the ANSC 7003 for boats & ANSC 7008 for PWC's.
- Highlight important items within each section on the ANSC forms.
- Disciplinary action for “coffee table” inspection!

# OPFAC Inspections- (Operational Facility)

- Operational Facility Inspections must be performed by a currently certified USCG Auxiliary Vessel Examiner and accepted by DIRAUX.
- A member may fly the BLUE ensign after being examined for a VSC or after an OPFAC facility inspection.



- The orange and white operational ensign may only be flown by a facility which is under CG orders



- As of April 1<sup>st</sup> 2009, there are no more NON-OPERATION facility inspections.

# OPFAC Inspection Forms (Operational Facility)

- ANSC form 7003 outlines requirements for an OPFAC inspections on motorboats and motor vessels.
  - It's a 5 page multi-section form (containing instructions)
  - It requires the signatures of the Owner, VE, & DIRAUX
  - Upon successful completion of inspection no decal is affixed to facility. Decal will be sent from DIRAUX after final approval.
- The Coast Guard MUST inspect commercial motor vessels OVER 65 feet in length

# OPFAC Inspection Forms-continued

- ANSC Form 7008 outlines requirements for PWC OPFAC (PWC's can only be offered for use)
  - It is a 4 page multi-section form (containing instructions)
  - It also requires the signatures of the Owner, VE, & DIRAUX
  - Upon successful completion of inspection no decal is affixed to facility. Decal will be sent from DIRAUX after final approval.



**Clear Form**

<b>DEPARTMENT OF HOMELAND SECURITY U.S.C.G AUXILIARY ANSC 7003 Rev 01-11</b>	<b>VESSEL FACILITY INSPECTION AND OFFER FOR USE FORM</b> (See instructions and Privacy Act Statement on page 3)	<input type="checkbox"/> INITIAL (NEW) REPORT <input type="checkbox"/> REINSPECTION (REOFFER) <input type="checkbox"/> CHANGE							
<b>SECTION I - OWNER DATA- Completed by owner</b>									
OWNER'S MEMBER ID NUMBER 	OWNER'S LAST NAME, FIRST NAME, MIDDLE INITIAL	TYPE OF OWNERSHIP (Check One) ALL OWNERS MUST SIGN SECTION III <input type="checkbox"/> SOLE <input type="checkbox"/> AUX UNIT <input type="checkbox"/> GOVT <input type="checkbox"/> MULTIPLE <input type="checkbox"/> CORPORATE							
CO-OWNER'S MEMBER ID NUMBER	CO-OWNER'S LAST NAME, FIRST NAME, MIDDLE INITIAL								
<b>SECTION II - FACILITY DATA- Completed by owner</b>									
REGISTRATION OR DOC NUMBER	HULL IDENTIFICATION NO.	FACILITY'S NAME	FACILITY NO.						
VESSEL LOCATION		ZIP CODE	LATITUDE						
MANUFACTURER	MODEL	YEAR	LONGITUDE						
TYPE POWER	NO. ENGINES	HP EACH ENGINE	TYPE VESSEL						
TYPE FUEL	FUEL CAPACITY	IF THIS FACILITY REPLACES ONE CURRENTLY RECORDED, ENTER OLD FACILITY NUMBER HERE →							
CELL PHONE #	DSC MMSI NUMBER	<input type="checkbox"/> Night OPS <input type="checkbox"/> Trailerable <input type="checkbox"/> Head <input type="checkbox"/> Range <input type="checkbox"/> Heater							
ENGINE 1:	MANUFACTURER	MODEL	YEAR						
ENGINE 2:	SERIAL #	FUEL CONSUMPTION							
GENSET:	ECONOMICAL		CRUISE						
K.W.Capacity		Facility Availability							
<input type="checkbox"/> All <input type="checkbox"/> Weeknights <input type="checkbox"/> Weekends									
<input type="checkbox"/> Compass <input type="checkbox"/> Radio Direction Finder (RDF Type) <input type="checkbox"/> Depth Finder <input type="checkbox"/> Radar <input type="checkbox"/> GPS/DGPS <input type="checkbox"/> Other (Add details in remarks below)									
<input type="checkbox"/> MF/HF SSB Output _____ Channels _____ <input type="checkbox"/> VHF-FM Output _____ Channels _____ <input type="checkbox"/> VHF-AM Output _____ Channels _____									
Other Special Equipment - Remarks:									
VALUE -HULL	VALUE - MACHINERY	VALUE - ELECTRONICS	VALUE - OTHER EQUIPMENT						
TOTAL VALUE OF VESSEL									
<b>SECTION III - OWNER STATEMENTS, UNIT AND SIGNATURE - Completed by owner</b>									
<input type="checkbox"/> The above facility is offered for use as an operational facility until withdrawn, in accordance with the applicable laws and regulations that are in effect at the time the facility is accepted, used, and released, subject to conditions and limitations determined by the order issuing authority. I (we) agree to notify DIRAUX of any changes to this facility or equipment and state that all listed equipment will be on board the facility when underway under orders.									
<input type="checkbox"/> I (we) certify all entries in Sections I thru III are correct and current.									
<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="padding: 2px;">District</td> <td style="padding: 2px;">Division</td> <td style="padding: 2px;">Flotilla</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>				District	Division	Flotilla			
District	Division	Flotilla							
Signature of Owner		Signature of Co-Owner							
Date		Date							
I understand that trailered Auxiliary facilities (tow vehicle and trailer) must comply with state vehicular laws and the manufacturer's recommendations for vehicle hitch and trailer assembly in regards to the tongue and gross weight of the trailer load. (All facility owners must initial)									
Owner(s) Initials									
<b>SECTION IV - USCGAUX VE's ENDORSEMENT - Completed by USCGAUX VE</b>									
I have inspected the vessel above as an operational facility and certify that it meets all requirements as such. It was inspected for use on <input type="checkbox"/> Sole State Waters <input type="checkbox"/> Inland Navigable Waters <input type="checkbox"/> Coastal/Offshore Waters <input type="checkbox"/> All Waters.									
INSP DATE _____		VE's Member ID _____							
VE's Name _____		VE's Unit _____							
VE's Signature _____									
<b>SECTION V - ACCEPTANCE - Completed by DIRAUX</b>									
This facility is accepted as an operational facility as indicated above.									
Authorized Signature _____		Date _____							

- 7003 –Page 1
- This form used for facility and Operational facility inspections on Motorboats and Pleasure motor vessels.
- This page may be filled out by the owner on the computer prior to the inspection.

Previous edition is obsolete

**COPY 1 - MEMBER**

**SECTION VI REQUIREMENTS FOR AN AUXILIARY FACILITY - Completed by USCGAUX VE**

OK	N	A	ITEM	OK	NA	ITEM
			1. Certificate of Compliance			36. Auxiliary engine (sailboat only)
			2. CG Capacity Plate			37. Blanket
			3. Registration / Documentation			38. Binoculars
			4. Hull Identification Number (HIN)			39. Boat hook
			5. Numbering - State or CG Documentation			40. Boarding ladder (or other means of boarding)
			6. First Aid Kit			41. Depth sounder, leadline, sounding pole
			7. Lantern - flashlight			42. Bilge Pump or other dewatering device
			8. * Loud hailer/megaphone			43. Fire extinguishers (mounted, minimum)
			9. Marine Sanitation Device (MSD)			44. Extra fire extinguisher
			10. MARPOL Trash Placard			45. * Kicker (skiff) hook
			11. Pollution Placard			46. Knife (3" blade minimum)
			12. Navigation lights			47. Personal Flotation Device (PFD) (speed rated if required)
			13. Search light			48. PFD (2 over legal requirements - speed rated not required)
			14. Sound producing device			49. Visual Distress Signals (VDS) Inland
			15. Bell (See Instructions)			50. Visual Distress Signals (VDS) International
			16. Ventilation			51. * Portable pump or means of dewatering
			17. RPM Table (or a means of determining speed)			52. Spare Navigation light bulbs
			18. Navigation Rules - COMDTINST M.16672.2(series)			53. Stern and bow cleats thru hull w/back plates
			19. CG Auxiliary Ensign			54. Tools for emergency repairs
			20. National Ensign			55. Watch or clock
			21. Patrol Signboards and Patrol Ensign			56. Comms capability per Operations Policy Manual
			22. SAR Incident Auxiliary Report (CG-4612) at least 1			57. * Satisfactory radio check on required frequencies
			23. Towline and bridle (appropriate size / length)			58. Electrical systems
			24. Heaving lines plus sufficient mooring lines			59. Fuel system
			25. * Tide tables (local)			60. Backfire Flame Arrester
			26. Compass			61. Galley / Heating systems
			27. Deviation Table			62. Overall vessel condition
			28. * Light List for area (current)			63. State requirements
			29. Navigation plotting instruments			64. Inspector viewed Reg/Doc papers for ownership
			30. * Search pattern plotting guide			65. Attached Assent & Authorization form for multiple owners
			31. Charts of operating area			66. Attached authorization for corporate offer for use
			32. Adequate fenders			67. Attached info requirements for corp. owned facilities
			33. Alternate propulsion			68. Additional items required by District Commander
			34. Anchor & Anchor Line			
			35. * Extra anchor and anchor line			

**SECTION VII OPERATION OF AN AUXILIARY FACILITY BY A NON-OWNER - Completed by Owner**

When I am on board as a crewmember I authorize the following Coxswains to operate my facility under orders.

Name	Member Number	District	Division	Flotilla

When I am not on board as a crewmember I authorize the following Coxswains to operate my facility under orders.

Name	Member Number	District	Division	Flotilla

Attach additional sheets as necessary if you have more than two persons who may operate your facility. If permitted in your district, you may designate all operators in your district to operate your facility while you are onboard by entering "ALL" in the name field.

Owner's Initials for Section VII

COPY 1 - MEMBER

- 7003-Page 2
- This form used to check off items as they are inspected.
- This MUST be filled out during the inspection while on site!

# Section I- 7003

To be completed by the Owner

- Owner's and Co-Owner's Member Number
- Type of Ownership-husband and wife are placed in the "SOLE" box

# Section II- 7003

Completed by Owner

- Blue wedge, get information from website or drop down menu.
- Be sure to enter all information about the facility
- Important items: Registration number, HID, Latitude, Longitude
- Enter the city and state where vessel is located or berthed.

## Section III- 7003

- Completed by Owner
- Owner Statements, Unit & Signature
- Be sure to sign
- Be sure to initial if trailerable
- Indicate District, Division & Flotilla
- On **Form 7003** in Section III & Section VII you need to make sure the owners put their initials on the form on the initial line.

# Section IV- 7003

- Completed by VE after the inspection has been done.
- Date, VE member number, VE Unit (District, Division, Flotilla)
- Op Facility 7003/7008 is mailed to DIRAUX
- Record mission on ANSC-7038 include member name in COMMENTS section.

## Section VI - 7003

- Requirements for an Auxiliary facility.
- Same as required for a VSC with some additional items required:
- Mounted fire extinguisher(s), Anchor & Anchor line, RPM table
- National Ensign plus items 32-39

## Section VII - 7003

- Complete this section for an Operational facility
- Extra fire extinguisher does not have to be mounted.
- Be sure to check for items required for Operational facility.



## Section VIII - 7003

- Fill this section out if the facility is going to be operated by a non-owner of the facility.
- Attach an extra sheet to add to the list of names if necessary.
- Be sure owner initials

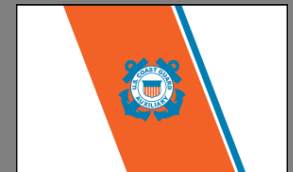
# Reminders

- Operational Facilities must have two Life Jackets over the legal requirement, and 1 extra fire extinguisher



# PWC FACILITY INSPECTION

- You will use ANSC 7008 for the inspection on a PWC
- A PWC can only be offered for use.
- It can only be an Operational facility and will fly the Operational Ensign while under orders.



- It may also be examined for a VSC and fly the BLUE ensign.



- Section I thru V on 7008 is the same as I thru V on 7003

DEPARTMENT OF HOMELAND SECURITY U.S.C.G. AUXILIARY ANSC 7008 (Rev 01-05)		<b>PWC FACILITY INSPECTION AND OFFER FOR USE FORM</b> (See instructions and Privacy Act Statement on separate sheet)				<input type="checkbox"/> INITIAL (NEW) REPORT <input type="checkbox"/> REINSPECTION (REOFFER) <input type="checkbox"/> CHANGE	
<b>SECTION I OWNER DATA - Completed by owner</b>							
OWNER'S MEMBER ID NUMBER		OWNER'S LAST NAME, FIRST NAME, MIDDLE INITIAL			TYPE OF OWNERSHIP (Check one) <small>All owners must sign Section III</small>		
CO-OWNER'S MEMBER ID NUMBER		CO-OWNER'S LAST NAME, FIRST NAME, MIDDLE INITIAL			<input type="checkbox"/> SOLE <input type="checkbox"/> AUX UNIT <input type="checkbox"/> GOVT <input type="checkbox"/> MULTIPLE <input type="checkbox"/> CORPORATE		
<b>SECTION II FACILITY DATA - Completed by owner</b>							
REGISTRATION		HULL IDENTIFICATION NO.		FACILITY'S NAME		FACILITY NO.	
VESSEL LOCATION			ZIP CODE	LATITUDE 00°00. N	LONGITUDE 000°00. W		
MANUFACTURER	MODEL	YEAR	LENGTH	BEAM	DRAFT	IF THIS FACILITY REPLACES ONE CURRENTLY RECORDED, ENTER OLD FACILITY NUMBER HERE →	
CELL PHONE #	DSC NUMBER		HORSEPOWER	FUEL CAPACITY	PWC TYPE		
ENGINE MANUFACTURER	MODEL	YEAR	SERIAL #	FUEL CONSUMPTION	ECONOMICAL	CRUISE	
				Speed in Knots			
				Gallons per Hour			
<input type="checkbox"/> TRAILERABLE <input type="checkbox"/> GPS/DGPS <input type="checkbox"/> VHF-FM   Output: _____ Channels: _____							
OTHER SPECIAL EQUIPMENT - REMARKS:							
Value - Hull		Value - Machinery		Value - Electronics		Value - Other Equipment	
<b>SECTION III OWNER STATEMENT, UNIT AND SIGNATURE - Completed by owner</b>							
<input type="checkbox"/> The above facility is offered for use as an operational facility until withdrawn, in accordance with the applicable laws and regulations that are in effect at the time the facility is accepted, used, and released, subject to conditions and limitations determined by the order issuing authority. I (we) agree to notify DIRAUX of any changes to this facility or equipment and state that all of this equipment will be on board the facility when underway under orders.							
<input type="checkbox"/> I (we) certify all entries in Sections I thru III are correct and current.							
				District   Division   Flotilla 			
Signature of Owner		Date		Signature of Co-Owner		Date	
I understand that trailered Auxiliary facilities (tow vehicle and trailer) must comply with state vehicular laws and the manufacturer's recommendations for vehicle hitch and trailer assembly in regards to the tongue and gross weight of the trailer load. (All facility owners must initial)							
Owner(s) Initials _____							
<b>SECTION IV USCGAUX VE'S ENDORSEMENT - Completed by USCGAUX VE</b>							
I have inspected the vessel above as PWC facility and certify that it meets all requirements as such.							
INSP DATE _____ VE's Member ID				VE's UNIT			
				District   Division   Flotilla 			
VE's Name _____				VE's Signature _____			
<b>SECTION V ACCEPTANCE - Completed by DIRAUX</b>							
This facility is accepted as a PWC Facility of the U. S. Coast Guard Auxiliary.							
DIRAUX Signature _____				Date _____			

- 7008-Page 1
- This form is used to do a facility inspection on a PWC.
- It has to be offered for use

Previous edition is obsolete

**COPY 1 - MEMBER**

7R7.08RB

OK		N/A		Item		OK		N/A		Item	
		1.		Numbering				8.		Backfire Flame Arrester	
		2.		Registration / Documentation				9.		Fuel system	
		3.		Sound Producing Device				10.		Dewatering device	
		4.		Personal Flotation Device (PFD)				11.		Overall vessel condition	
		5.		Fire Extinguisher (minimum)				12.		Electrical systems	
		6.		Visual Distress Signal (VDS) (if required)				13.		State requirements	
		7.		Ventilation				14.		Certificate of Compliance	
								15.		Hull Identification Number (HIN)	
<b>SECTION VII REQUIREMENTS FOR A PWC FACILITY - Completed by USCGAUX VE</b>											
OK		N/A		Item		OK		N/A		Item	
		1.		Meets all requirements of Section VI				17.		Hat or Helmet	
		2.		Portable waterproof VHF-FM radio				18.		Gloves with non-slip palms	
		3.		Satisfactory radio check on required frequencies				19.		Foot protection	
		4.		Safety Lanyard (kill switch) & spare				20.		Spare spark plugs	
		5.		Flashlight				21.		Rescue throw bag or rescue heaving line (minimum 50 feet)	
		6.		PFD, Impact rated for max speed of PWC				22.		Towline (minimum 30 feet)	
		7.		CG Auxiliary or Patrol Ensign (optional)				23.		PWC Tool Kit	
		8.		First Aid Kit				24.		Inspector viewed Registration papers for ownership	
		9.		Visual Distress Signal (VDS) (if required)				25.		Attached Assent & Authorization form for multiple owners	
		10.		Knife (3" blade minimum)				26.		Attach info requirements for corp. owned facilities	
		11.		Watch				27.		Attached authorization for corporate offer for use	
		12.		Throwable PFD (Type IV)				28.		Fire extinguisher (mounted)	
		13.		Sponges (2)							
		14.		Emergency Survival Blanket							
		15.		Mooring Lines (2)							
		16.		Goggles or Sun Glasses							
<b>SECTION VIII OPERATION OF AN AUXILIARY FACILITY BY A NON-OWNER - Completed by Owner</b>											
<input type="checkbox"/> When I am on board as a crewmember I authorize the following PWC Operator(s) to operate my facility under orders.											
Name		Member Number				District		Division		Flotilla	
<input type="checkbox"/> When I am not on board I authorize the following PWC Operator(s) to operate my facility under orders.											
Name		Member Number				District		Division		Flotilla	
<input type="checkbox"/> I choose not to have anyone operate my vessel other than myself.											
<b>Owner(s) Initials for Section VIII</b>						Attach additional sheets as necessary if you have more than two persons who may operate your facility. You may designate groups of people ie: all PWC Operators in a district, division or flotilla. Instead of entering a name, enter ALL, then district, division and/or flotilla numbers, as applicable.					

- 7008-Page 2
- This page used to check off items as they are inspected

# Section VI

- This section is almost the same as you would do for a VSC on any vessel.
- Exceptions=Dewatering device and fire extinguisher are required.
- Item 6 – Visual Distress Signals:  
Federal requirement

# Section VII

Must meet all the requirements of Section VI including:

- *As of 2/09, item #12 a throw-able PFD is **not** required.*
- VHF-FM radio, VDS, Sponges, First Aid Kit, Hat, gloves, foot protection
- *As of 2/09, item # 20 a spare spark plug is required for only for 2-stroke engines, 50' heaving line, Towline (minimum 30'),*
- Goggles or Sun Glasses

# Section VIII

- Operation of an Auxiliary Facility by a Non-Owner.
- Same as required on ANSC 7003
- Attach an extra sheet to add to the list of names if necessary.
- Be sure owner(s) initial
- Must be a qualified PWC Operator



# Auxiliary Operational Facility & PWC/Facility

- These vessels must be some of the safest vessels afloat.
- Our Auxiliary facilities need to set the example for safety standards on a vessel.
- It is up to you, as a Vessel Examiner to be sure to take the extra time necessary to be sure that ALL Auxiliary facilities are the safest they can be.
- Disciplinary action for “coffee table” inspection!



End