



United States Coast Guard Auxiliary

District 11 Northern Region
Serving Northern California, Nevada, Utah



Operational Facility Review



Prepared by
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Operational Facility Decal



VSC Decal



Introduction

- This module will present you with the forms and tips necessary to conduct an Auxiliary facility inspection, the 1st step to be able to apply for Coast Guard patrol orders.
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- 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.
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- Disciplinary action for “coffee table” inspection!

Facility & OPFAC Inspections

Operational Facility Inspections must be performed by a currently certified

A member may fly the BLUE ensign after being examined for a VSC

As of April 1st 2009, there are no more NON-OPERATION facility inspections

Facility & OPFAC Inspections

- ANSC form 7003 outlines requirements for an OPFAC inspections on motorboats and motor vessels.
-
- The Coast Guard MUST inspect commercial motor vessels OVER 65 feet in length
-
- ANSC form 7008 outlines requirements for PWC OPFAC (PWC's can only be offered for use)
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DEPARTMENT OF HOMELAND SECURITY U.S.C.G. AUXILIARY ANSC 7003 (Rev 01-05)		VESSEL FACILITY INSPECTION AND OFFER FOR USE FORM (See instructions and Privacy Act Statement on page 3)		<input type="checkbox"/> INITIAL (NEW) REPORT <input type="checkbox"/> REINSPECTION (REOFFER) <input type="checkbox"/> CHANGE	
SECTION I OWNER DATA - Completed by owner					
OWNER'S MEMBER ID NUMBER		OWNER'S LAST NAME, FIRST NAME, MIDDLE INITIAL		TYPE OF OWNERSHIP (Check one) All owners must sign Section III	
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"/> GOV'T <input type="checkbox"/> MULTIPLE <input type="checkbox"/> CORPORATE	
SECTION II FACILITY DATA - Completed by owner					
REGISTRATION OR DOC. NO.		HULL IDENTIFICATION NO.		FACILITY'S NAME	
VESSEL LOCATION		ZIP CODE		LATTITUDE	
MANUFACTURER		MODEL		YEAR	
TYPE POWER		NO. ENGINES		HP EACH ENG	
TYPE FUEL		FUEL CAPACITY		IF THIS FACILITY REPLACES ONE CURRENTLY RECORDED, ENTER OLD FACILITY NUMBER HERE →	
CELL PHONE #		DSC NUMBER		<input type="checkbox"/> Night OPS <input type="checkbox"/> Trailerable <input type="checkbox"/> Head <input type="checkbox"/> Range <input type="checkbox"/> Heater	
MANUFACTURER		MODEL		YEAR	
ENGINE 1:		SERIAL #		SPEED IN KNOTS	
ENGINE 2:		SERIAL #		GALLONS PER HOUR	
GENSET:		SERIAL #		K.W. CAPACITY	
<input type="checkbox"/> Compass <input type="checkbox"/> Radio Direction Finder (RDF Type _____) <input type="checkbox"/> Depth Finder <input type="checkbox"/> Radar <input type="checkbox"/> Lorán <input type="checkbox"/> GPS/DGPS					
<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		TOTAL VALUE OF VESSEL	
SECTION III OWNER STATEMENTS, UNIT AND SIGNATURE - Completed by owner					
<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"/> The above is not offered for use as an operational facility.					
<input type="checkbox"/> I (we) certify all entries in Sections I thru III are correct and current.					
Signature of Owner		Date		Signature of Co-Owner	
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					
SECTION IV USCGAUX VE's ENDORSEMENT - Completed by USCGAUX VE					
I have inspected the vessel above as an <input type="checkbox"/> operational <input type="checkbox"/> non-operational facility and certify that it meets all requirements as such. It was inspected for use on <input type="checkbox"/> Inland Protected Waters <input type="checkbox"/> Coastal/Offshore Waters <input type="checkbox"/> All Waters.					
INSP DATE		VE's Member ID		VE's Unit	
VE's Name			VE's Signature		
SECTION V ACCEPTANCE - Completed by DIRAUX for Operational, DCO for Non-Operational					
This facility is accepted at the inspection level indicated above.					
Authorized Signature				Date	

- 7003 –Page 1
- This form used for facility and Operational facility inspections on Motorboats and Pleasure motor vessels

SECTION VI REQUIREMENTS FOR AN AUXILIARY FACILITY (Non Operational) - Completed by USCGAUX VE

OK	N/A	Item	OK	N/A	Item
		1. Numbering			21. MARPOL Trash Placard
		2. Registration / Documentation			22. Pollution Placard
		3. Navigation lights			23. Navigation Rules (boats 12m - 39.4 feet - or longer)
		4. Sound producing device			24. CG Capacity Plate
		5. Bell (boats 12m [39.4 ft.] or longer)			25. Certificate of Compliance
		6. Personal Flotation Device (PFD)			26. Hull Identification Number (HIN)
		7. Fire extinguishers (mounted, minimum)			27. RPM Table (or a means of determining speed)
		8. Visual Distress Signals (VDS) Inland			28. National Ensign
		9. Visual Distress Signals (VDS) International			29. CG Auxiliary Ensign
		10. Ventilation			30. First Aid Kit
		11. Backfire Flame Arrester			31. Charts of operating area
		12. Fuel system			32. Compass
		13. Anchor & Anchor Line			33. Deviation Table
		14. Alternate propulsion			34. Tools for emergency repairs
		15. Dewatering device			35. Lantern - flashlight
		16. Overall vessel condition			36. Spare Navigation light bulbs
		17. Electrical systems			*37. Navigation plotting instruments
		18. Galley / Heating systems			38. Depth sounder, leadline, sounding pole
		19. State requirements			39. Boat hook
		20. Marine Sanitation Device (MSD)			

SECTION VII REQUIREMENTS FOR AN OPERATIONAL AUXILIARY FACILITY - Completed by USCGAUX VE

OK	N/A	Item	OK	N/A	Item
		1. Meets all requirements of Section VI			17. Boarding ladder (or other means of boarding)
		2. Comms capability per Operations Policy Manual			*18. Kicker (skiff) hook
		*3. Satisfactory radio check on required frequencies			19. Binoculars
		4. SAR Incident Auxiliary Report (CG-4612) at least 1			20. Blanket
		5. Auxiliary engine (sailboat only)			21. Adequate fenders
		6. PFD (2 over legal requirements)			22. Towline and bridle (appropriate size / length)
		7. Patrol Signboards and Patrol Ensign			23. Heaving lines plus sufficient mooring lines
		*8. Search pattern plotting guide			*24. Extra anchor and anchor line
		9. Stern and bow cleats thru hull w/back plates			25. Search light
		10. Knife (3" blade minimum)			*26. Loud hailer/megaphone
		11. Watch or clock			27. Inspector viewed Reg/Doc papers for ownership
		*12. Portable pump or means of dewatering			28. Attached Assent & Authorization form for multiple owners
		*13. Tide tables (local)			29. Attached info requirements for corp. owned facilities
		*14. Light List for area (current)			30. Attached authorization for corporate offer for use
		15. Navigation Rules, COMDTINST M 16672.2 (series)			31. Additional items required by District Commander
		16. Extra fire extinguisher			

SECTION VIII 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 I authorize the following Coxswains to operate my facility under orders.

Name	Member Number	District	Division	Flotilla

I choose not to have anyone operate my vessel other than myself.

Owner(s) Initials for Section VIII

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 coxswains in a district, division or flotilla. Instead of entering a name, enter ALL, then district, division and/or flotilla numbers, as applicable.

COPY 1 - MEMBER

■ 7003-Page 2

■ This form used to check off items as they are inspected

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 11 - 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
-

Section III- 7003

- Completed by Owner
-
- Owner Statements, Unit & Signature
-
- Be sure to sign
-
- Be sure to initial if trailerable
-
- Indicate District, Division & Flotilla

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.
- Completed by DIRAUX

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

PWC FACILITY INSPECTION

- You will use ANSC 7008 for the inspection on a PWC
- A PWC can only be offered for use. It has to be an Operational facility. 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)		PWC FACILITY INSPECTION AND OFFER FOR USE FORM (See instructions and Privacy Act Statement on separate sheet)				<input type="checkbox"/> INITIAL (NEW) REPORT <input type="checkbox"/> REINSPECTION (REOFFER) <input type="checkbox"/> CHANGE	
SECTION I OWNER DATA - Completed by owner							
OWNER'S MEMBER ID NUMBER 		OWNER'S LAST NAME, FIRST NAME, MIDDLE INITIAL 				TYPE OF OWNERSHIP (Check one) All owners must sign Section III	
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"/> GOV'T <input type="checkbox"/> MULTIPLE <input type="checkbox"/> CORPORATE	
SECTION II FACILITY DATA - Completed by owner							
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 #		DISC 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	
SECTION III OWNER STATEMENT, UNIT AND SIGNATURE - Completed by owner							
<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)							
SECTION IV USCGAUX VE'S ENDORSEMENT - Completed by USCGAUX VE							
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 _____			
SECTION V ACCEPTANCE - Completed by DIRAUX							
This facility is accepted as a PWC Facility of the U. S. Coast Guard Auxiliary.							
DIRAUX Signature _____				Date _____			

Previous edition is obsolete

COPY 1 - MEMBER

7R7.05RB

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

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)	
SECTION VII REQUIREMENTS FOR A PWC FACILITY - Completed by USCGAUX VE											
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 Auxillary 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							
SECTION VIII OPERATION OF AN AUXILIARY FACILITY BY A NON-OWNER - Completed by Owner											
<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.											
Owner(s) Initials for Section VIII				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 facilities 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