**Annual Paddlecraft Inspection Checklist**

Oregon State University – Small Boat Program (sources: USCG, OSMB, SBSA, USDOI, Boat-Ed, ACA)

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| **Personnel Information:** | **Vessel Information:** |
| Owner/Operator Name: | Year/Make/Model: |
| Location of Inspection: | Length/Beam: |
|   | Yes | No | N/A | Watercraft Type: |
| Operator OSU boating authorization:  |   |   |   | Area of Operations: River, Lake, Estuary, Coastal |
| Call Sign / Name: |   |   |   |  |
| OSU Vessel Info Form on file: |   |   |   |  |
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| **Vessel Safety Check:** |   |   |   |  |   |   |   |
|   | Yes | No | N/A |   | Yes | No | N/A |
| 1. Personal flotation devices (PFD) |   |   |   | 18. Communication device |   |   |   |
| 2. Sound Device (whistle or air horn) |   |   |   | 19. Dewatering device |   |   |   |
| 3. Visual distress signals (VDS) -if on federal waters after dark |   |   |   | 20. Anchor and line for area |   |   |   |
| 4. Waterways Access Permit (if >10’) |   |   |   | 21. First aid kit |   |   |   |
| 5. Navigation lights (if out at night) |   |   |   |  |   |   |   |
| 6. State and local requirements |   |   |   | **23. DISCUSSION ITEMS:** |   |   |   |
| 7. **In water check**: Free of leaks |   |   |   | a. Float plan use / collection |   |   |   |
| 1. Hull
 |   |   |   | b. Accident reporting |   |   |   |
| 1. Through fittings
 |   |   |   | c. Offshore operations |   |   |   |
| 1. Gaskets
 |   |   |   | d. Navigation aids/charts/GPS |   |   |   |
| 1. Hatch covers
 |   |   |   | e. Survival Equipment |   |   |   |
| 12. **Out of water check:** Free of |   |   |   | f. Weather, flow, hazards check |   |   |   |
| 1. Oxidation (aluminum) - sand
 |   |   |   | g. Planned science gear and tasks |   |   |   |
| 1. Rock wear / weak spots
 |   |   |   | h. Tools, spares |   |   |   |
| 1. Dry rot / wet rot (wood)
 |   |   |   | i. Local Knowledge  |   |   |   |
| 1. Clean Hull
 |   |   |   | j. Logbook |   |   |   |
| 1. Patch cracks or holes
 |   |   |   |  |   |   |   |
| 1. UV inhibitor (if recommended)
 |   |   |   |  |   |   |   |
| 8. Tighten screws |   |   |   |  |   |   |   |
| 9. Lines in good condition |   |   |   |  |   |   |   |
| 10. Grab handles  |   |   |   |  |   |   |   |
| 11. Floatation bags hold air (kayaks) |   |   |   |  |   |   |   |
| 12. **Paddle check:** Free of  |   |   |   |  |   |   |   |
| 1. Breaks / dents
 |   |   |   |  |   |   |   |
| 1. Weak points
 |   |   |   |  |   |   |   |
|  |  |  |  |  |  |  |  |
| **Boat Trailer:** |   |   |   |
|   | Yes | No | N/A |
| 24. Registered with DMV if combined weight >1,800lbs? |   |   |   |
| 25. Hitch correct size and non-binding? |   |   |   |
| 26. Safety Chains and hooks adequate for weight? |   |   |   |
| 27. Safety chains adequate length to cradle tongue? |   |   |   |
| 28. Are all lights operational? |   |   |   |
| 29. Are tires in good condition (adequate tread, free of dry rot, inflation, date codes) |   |   |   |
| 30. Wheel bearings lubricated and proper torque on wheel nut? |   |   |   |
| 31. Bearing caps properly installed and functional? |   |   |   |
| 32. Bearing seals watertight? |   |   |   |
| 33. Are brakes working properly? |   |   |   |
| 34. Master cylinder checked for proper fluid level, any leaks in lines? |   |   |   |
| 35. Trailer tongue weight proper for boat? |   |   |   |
| 36. Rollers and/or bunks in good condition? |   |   |   |
| 37. Is the boat secured at the bow and stern? |   |   |   |
| 38. Proper suspension system for boat and load? |   |   |   |
|  |   |   |   |
|  |  |  |  |  |  |  |  |
| **Tow Vehicle:** |   |   |   |
|   | Yes | No | N/A |
| 40. Adequate weight and power to tow load? |   |   |   |
| 41. Is the hitch properly rated for weight of boat? |   |   |   |
| 42. Is the hitch properly secured to the frame (not bumper)? |   |   |   |
| 43. Is the remote breaking mechanism properly adjusted? |   |   |   |
| 44. Does tow vehicle have adequate mirrors for size of load? |   |   |   |
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| **Notes:** |  |  |  |  |  |  |  |
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| Printed Name of Examiner: |
| Date of Exam:  |
| Phone Number:  |