

## DAILY FLOAT PLAN FOR MITA BOAT SKIPPERS

Please complete this form and leave it with a responsible person who can notify MITA or the US Coast Guard [as a last resort – in case of emergency] should you fail to return as scheduled.

If not returned by (time):		44 3 22224 1	
License Plate #:	Trailer Plate #:		
Auto Make/Model:			
Fuel Capacity:	HP:		
Number of Engines:			
Length:			
Color:			
Type of Boat:			
Passenger Name:	rnone:_		
Passenger Name:			
Passenger Name:			
Approximate Route (including interr	mediate destinations):		
Return Location:			
Expected Return Date and Time:			
Departure Location:			
Departure Date and Time:			
Phone:			
Address:			