

## ANNUAL SMALL BOAT EVALUATION

### For Class A and 1 Non-Motorized Boats or with Portable Outboard Motors

#### Instructions

**Annual Small Boat Evaluation (ASBE)** is an inspection conducted by Vessel Operations Coordinator (VOC), Commanding Officer (CO), or designee(s). Inspect all boats annually.

- Use this ASBE checklist for non-motorized vessels and simple class A and I boats with portable outboard motors. Evaluators must use the checklists during the inspection, and if required add additional fields to meet specific vessel configurations. Evaluators are responsible for all information contained within the ASBE outline
- The ASBE outline and checklist are based on NAO 209-125, The NOAA Small Boat Standards and Procedures Manual (SBSPM), 46 CFR, 33 CFR, NFPA 302, MARPOL, ABYC standards and recommendations, United States Coast Guard (USCG) inspection criteria, and standard marine survey practices.
- Some items may not apply to all boats. Evaluators are responsible for determining applicability. Consult the SBSPM for equipment carriage requirements. Installed equipment in excess of requirements must be maintained to inspection standards.
- The evaluator or surveyor and the VOC sign the completed evaluation checklists, reports, records of findings, and recommendations. The VOC retains the completed evaluations and forwards to his/her approving official as defined by the LOSBO. The VOC must upload the signed copy to the Vessel Inventory Management database.
- Contact your VPC or LOSBO for additional information or assistance.
- Contact the SBP - Darel.S.McCormick@noaa.gov (206-553-7916) or Jeff.Kingrey@noaa.gov (206-553-2648) for technical guidance.

#### Inspection Type

**Annual Small Boat Evaluation (ASBE)**

#### Vessel Information

NAME OF VESSEL		VESSEL OWNER	
VESSEL PRIMARY OPERATING AREA		VESSEL MISSION / PRIMARY USE	
NOAA HULL REGISTRATION NUMBER	HULL MATERIAL	HULL TYPE	
YEAR VESSEL BUILT	VESSEL MANUFACTURER	VESSEL MODEL	
YEAR ENGINE(S) BUILT	ENGINE(S) MAKE	ENGINE(S) MODEL	
TOTAL HORSEPOWER	FUEL TYPE	FUEL CAPACITY _____ Gallons	AC/DC POWER
LENGTH OVERALL (LOA) Feet _____ Inches _____	VESSEL BEAM Feet _____ Inches _____	VESSEL DRAFT Feet _____ Inches _____	VESSEL DISPLACEMENT _____ Gross Tonnage

#### Vessel Evaluation

EVALUATOR NAME	EVALUATION LOCATION	PRIOR EVALUATION DATE	EVALUATION DATE		
<b>Task 1 – Required Documentation</b>		Satisfactory	Unsatisfactory	Not Applicable	<b>Comments</b>
<b>Class A, I, and II</b>					
<b>1.1</b>	Records of previous inspections and examinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>1.2</b>	Stability log <b><u>VESSELS</u></b> (Note any newly installed equipment and/or <b>REQUIRED FOR ALL NOAA</b> )	<input type="checkbox"/>	<input type="checkbox"/>		

modifications)					
NOAA Form 57-19-05 (6/2017) Page 2 of 4		U.S. DEPARTMENT OF COMMERCE NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION			
<b>ANNUAL SMALL BOAT EVALUATION/SMALL BOAT EXAMINATION</b>					
NAME of VESSEL		EVALUATION LOCATION		EVALUATION DATE	
<b>Task 1 – Required Documentation (continued)</b>		Satisfactory	Unsatisfactory	Not Applicable	<b>Comments</b>
1.3	Risk assessment – <b>REQUIRED FOR ALL NOAA VESSELS</b>	<input type="checkbox"/>	<input type="checkbox"/>		
1.4	Operator’s manual – <b>REQUIRED FOR ALL NOAA VESSELS</b>	<input type="checkbox"/>	<input type="checkbox"/>		
1.5	Records of vessel drills – <b>REQUIRED FOR ALL NOAA VESSELS</b>	<input type="checkbox"/>	<input type="checkbox"/>		
1.6	Records of operator certification – <b>REQUIRED FOR ALL NOAA VESSELS</b>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>Task 2 – Stability</b>		Satisfactory	Unsatisfactory	Not Applicable	<b>Comments</b>
2.1	Vessel operating in compliance with SBSPM Section 9, “Stability, Design and Construction Considerations”	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.2	Boat with capacity placards operating within labeled capacity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Task 3 – Life Saving and Emergency Equipment</b>		Satisfactory	Unsatisfactory	Not Applicable	<b>Comments</b>
3.1	Personal flotation devices (PFDs) (number, type, condition, spare carbon dioxide cartridges, re-arm kits)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.2	Visual distress signals (number, type, condition, USCG approved)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.3	First-Aid kits (adequate, all items within expiration date, properly stowed, labeled)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.4	EPIRB/PEPIRB (registration, battery, hydro release, test)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.5	Secondary means of communication as required: Cell/satellite phone (check battery, test, operate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.6	Emergency sound signal (condition, audible at 0.5 nm)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.7	Ring buoy/cushion (condition)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Task 4 – Navigation and Electronic Equipment</b>		Satisfactory	Unsatisfactory	Not Applicable	<b>Comments</b>
4.1	Very high frequency (VHF) radio (number, type, DSC, test, battery)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.2	Navigation lights (conform to current USCG Navigation Rules)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.3	Global positioning system (GPS) (test operate, check accuracy)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.4	Chart/chartlet (covers operations area, current and corrected)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.5	Magnetic compass (electronic or magnetic)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Task 5 – Ground Tackle (optional)</b>		Satisfactory	Unsatisfactory	Not Applicable	<b>Comments</b>
5.1	Anchor (anchor and rode condition, sufficient for operations)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.2	Bits, chocks, cleats (not broken or corroded)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## ANNUAL SMALL BOAT EVALUATION/SMALL BOAT EXAMINATION

NAME of VESSEL	EVALUATION LOCATION			EVALUATION DATE
<b>Task 6 – Hull, Deck, Fittings and Watertight Integrity</b>	Satisfactory	Unsatisfactory	Not Applicable	<b>Comments</b>
<b>6.1</b> Scuppers, free ports (unobstructed, performance)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>6.2</b> Interior structure (no corrosion, broken welds, or deformation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>6.3</b> Metal hulls (corrosion, pitting, deformation, fractures)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>6.4</b> Rigid-hulled inflatable boats (RHIBs) (collar condition, chamber integrity)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>6.5</b> Fiberglass hulls (delamination, blistering, moisture, cracks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>6.6</b> Deck openings and thru-hulls (gasket and seals)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

<b>Task 7 – Portable Outboard Engine (&lt;40hp)</b>	Satisfactory	Unsatisfactory	Not Applicable	<b>Comments</b>
<b>7.1</b> General condition (damage, excessive oil, dirt, corrosion)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>7.2</b> Belts and filters (condition, filters replaced annually, dated)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>7.3</b> Oil (condition, level, test if needed)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>7.4</b> Propeller/lower unit (general condition, damage)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>7.5</b> Engine horsepower within limits listed on capacity plate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>7.6</b> Throttle has noticeable detent when shifted into neutral, start in gear protection, engine kill lanyards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>7.7</b> Operational test (all gears and speeds)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>7.8</b> Tanks, hose condition, fittings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>7.9</b> Flexible non-metallic hoses (approved type)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>7.10</b> Fuel gauging (appropriate method)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>7.11</b> Vents (operate properly)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

<b>Task 8 – Bilge System</b>	Satisfactory	Unsatisfactory	Not Applicable	<b>Comments</b>
<b>Class I and II only</b>				
<b>8.1</b> All standing water drains to bilge suction pipes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>8.2</b> Bilge pumps installed in accordance with ABYC H-22	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>8.3</b> Batteries (condition, damage, corrosion, ventilated)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>8.4</b> Battery terminals (connections secure, covered)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>8.5</b> Battery trays (resistant to electrolyte, condition)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

<b>Task 9 – Paddlecraft/Inflatable Specific Items</b>		Satisfactory	Unsatisfactory	Not Applicable	Comments
<b>9.1</b>	Inflatable Hull Condition - 8 Hour Inflation Test (check each chamber with PSI gauge for PSI loss, look listen and feel for air leaks over entire hull)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

NOAA Form 57-19-05  
(6/2017) Page 4 of 4

U.S. DEPARTMENT OF COMMERCE  
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION

## ANNUAL SMALL BOAT EVALUATION/SMALL BOAT EXAMINATION

NAME of VESSEL		EVALUATION LOCATION			EVALUATION DATE
<b>Task 9 – Paddlecraft/Inflatable Specific Items (cont.)</b>		Satisfactory	Unsatisfactory	Not Applicable	Comments
<b>9.2</b>	Paddle Condition (including condition of PFD attachable bungie)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>9.3</b>	Removable Seat Condition (if seats are removable, do they securely attach to paddle craft per manufacturers recommendations?)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>9.4</b>	Inflation valve condition (do valves operate as designed, leak?)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>9.5</b>	Equipment Bag Inventory (all required items are present, intact, and are not expired)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>9.6</b>	Equipment Bag Integrity (check for rips and tears, if using a dry bag check waterproof condition)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>9.7</b>	Pump Integrity (does pump adequately inflate vessel to manufacturer's recommended PSI)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>9.8</b>	Pump Valve Adaptors (does pump have required valve adaptors and can be inflated solo)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>9.9</b>	Bailing Device Condition (if using a mechanical device)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>9.10</b>	Patch Kit Available and Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

<b>Task 10 – Markings</b>		Satisfactory	Unsatisfactory	Not Applicable	Comments
<b>10.1</b>	Boat is marked in accordance with SBSPM Section 13 "Visual Identification and Registration"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

<b>Task 11 – Validation</b>				
<b>11.1</b>	EVALUATOR NAME	SIGNATURE		DATE
<b>11.2</b>	VOC/CO NAME	SIGNATURE		DATE
<b>11.3</b>	LOSBO NAME	SIGNATURE		DATE

**Comments: List all Category 1 deficiencies in the space below using the VIB 01-10 as a reference.**