

## FLOAT PLAN FOR BOWDOIN COLLEGE VESSELS

Department/Group:

Date of Trip:

Trip Coordinator:

Phone:

Shore Contact:

Phone:

Vessel:

Operator:

Cell:

Passengers/Cell:

1

2

3

4

5

6

7

8

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Planned Activity:

Weather Report:

Conditions on the Plan:

Estimated Time of Departure:

Destination:

Estimated Time of Return:

**\*\*\*FOR SECURITY USE ONLY\*\*\***

Plan Received and Approved:

Day/Time:

Notice of Departure Received

Day/Time:

Notice of Return Received:

Day/Time:

Submit Completed Float plan 24hrs prior to departure to Clinton Thompson

([c.thompson@bowdoin.edu](mailto:c.thompson@bowdoin.edu))

Boat Operator must call Bowdoin Security prior to departure and immediately upon return

**207-725-3314**