

Recreational boat or craft

1 Reporter details

required *

Fill in your details as the person reporting the accident or incident

* Name

* Preferred contact 1

* Preferred contact 2

Email address

Address

* Your role during this accident or incident

- | | | |
|--|---|---|
| <input type="radio"/> skipper / master | <input type="radio"/> crew | <input type="radio"/> owner of vessel / craft |
| <input type="radio"/> driver | <input type="radio"/> operational manager | <input type="radio"/> principal |
| <input type="radio"/> guide | <input type="radio"/> operational staff | <input type="radio"/> passenger |
| <input type="radio"/> trip leader | <input type="radio"/> volunteer | <input type="radio"/> witness |
| <input type="radio"/> paddler | <input type="radio"/> health & safety advisor / officer | <input type="radio"/> other |

2 Boat / craft details

Provide details about the boat (if applicable / known)

Name

MSA / MNZ number

Overall length (m)

Category

<input type="radio"/> dinghy (motorised)	<input type="radio"/> inflatable	<input type="radio"/> rigid inflatable boat (RIB)
<input type="radio"/> dinghy (paddle)	<input type="radio"/> launch	<input type="radio"/> waka ama
<input type="radio"/> jet ski (PWC)	<input type="radio"/> power boat / jet boat	<input type="radio"/> windsurfer / sailboard
<input type="radio"/> kayak / canoe	<input type="radio"/> raft	<input type="radio"/> yacht (sailboard)

3 Crew and owner information

Who was the skipper / driver of the boat / craft?

you

Your date of birth:

someone else

Their name

Their phone number

Their address

Who is the owner of the boat / craft?

you

someone else

Owner name / company name

Owner phone number

Owner address

4 Time and location information

Date of incident

Time of incident

Where did the accident or incident take place?

- at sea
- in harbour
- at berth / marina / boat ramp
- a river
- a lake

Region

- | | | |
|-------------------------------------|-----------------------------------|---------------------------------------|
| <input type="radio"/> Northland | <input type="radio"/> Taranaki | <input type="radio"/> Canterbury |
| <input type="radio"/> Auckland | <input type="radio"/> Manawatu | <input type="radio"/> Otago |
| <input type="radio"/> Waikato | <input type="radio"/> Wellington | <input type="radio"/> Southland |
| <input type="radio"/> Bay of Plenty | <input type="radio"/> Tasman | <input type="radio"/> Chatham Islands |
| <input type="radio"/> Gisborne | <input type="radio"/> Marlborough | |
| <input type="radio"/> Hawke's Bay | <input type="radio"/> West Coast | |

Location in this region

5 Environmental conditions

Provide information about conditions around the scene of the accident or incident

Visibility good fair poor

Other factors affecting visibility

- | | | |
|---------------------------------|---------------------------------------|------------------------------------|
| <input type="radio"/> sunstrike | <input type="radio"/> snow | <input type="radio"/> dust storm |
| <input type="radio"/> fog | <input type="radio"/> change of light | <input type="radio"/> smoke |
| <input type="radio"/> rain | <input type="radio"/> dark | <input type="radio"/> hail / sleet |

Fill in information below if your accident or incident occurred on a lake or at sea

Describe the state of the waters

- | | |
|--|---|
| <input type="radio"/> N/A | <input type="radio"/> 5 rough (2–4m waves) |
| <input type="radio"/> 0 calm (glassy) (no waves) | <input type="radio"/> 6 very rough (4–6m waves) |
| <input type="radio"/> 1 calm (rippled) (0–0.25m waves) | <input type="radio"/> 7 high (6–9m waves) |
| <input type="radio"/> 2 smooth (0.25–0.5m waves) | <input type="radio"/> 8 very high (9–14m waves) |
| <input type="radio"/> 3 slight (0.5–1m waves) | <input type="radio"/> 9 phenomenal (over 14m waves) |
| <input type="radio"/> 4 moderate (1–2m waves) | |

Wind force (knots)

- | | | |
|------------------------------------|---|---|
| <input type="radio"/> none | <input type="radio"/> moderate (11–27) | <input type="radio"/> gale (34–39) |
| <input type="radio"/> light (4–10) | <input type="radio"/> near gale (28–33) | <input type="radio"/> strong gale (over 40) |

Fill in information below if your accident or incident occurred on a river

Describe the river flow

- | | |
|-------------------------------|-----------------------------|
| <input type="radio"/> low | <input type="radio"/> high |
| <input type="radio"/> average | <input type="radio"/> flood |

Other river characteristics

- | | | |
|---------------------------------|-----------------------------------|---|
| <input type="radio"/> fast flow | <input type="radio"/> rocky rapid | <input type="radio"/> deep single channel |
| <input type="radio"/> braided | <input type="radio"/> drop pool | |

River flow
(cumecs)

River grade at scene

 1 2 3 4 5 6

6 Event details

* Choose an event that best describes what happened (choose as many as apply)

- | | | |
|---|--|---|
| <input type="radio"/> chemical or harmful substance spill | <input type="radio"/> flip / overturn | <input type="radio"/> person overboard |
| <input type="radio"/> collision | <input type="radio"/> flooded | <input type="radio"/> propeller entangled |
| <input type="radio"/> contact | <input type="radio"/> gear / items shifting | <input type="radio"/> propulsion failure |
| <input type="radio"/> electrical power failure | <input type="radio"/> grounding | <input type="radio"/> spin |
| <input type="radio"/> emergency dumping | <input type="radio"/> hit submerged object | <input type="radio"/> steering gear failure |
| <input type="radio"/> entrapment | <input type="radio"/> in hydraulic | <input type="radio"/> structural failure |
| <input type="radio"/> equipment failure | <input type="radio"/> mooring line failure | <input type="radio"/> touch |
| <input type="radio"/> explosion | <input type="radio"/> near miss / close quarters | |
| <input type="radio"/> fire | <input type="radio"/> oil spill | |

Was another boat/craft involved?

no

yes

Name (if known)

Other distinguishing
features of the
boat/craft

Boat / craft category

- | | | |
|--|---|---|
| <input type="radio"/> cargo ship | <input type="radio"/> fishing boat | <input type="radio"/> rigid inflatable boat (RIB) |
| <input type="radio"/> dinghy (motorised) | <input type="radio"/> kayak/canoe | <input type="radio"/> waka ama |
| <input type="radio"/> dinghy (paddle) | <input type="radio"/> inflatable | <input type="radio"/> water taxi |
| <input type="radio"/> jet ski (PWC) | <input type="radio"/> launch | <input type="radio"/> windsurfer / sailboard |
| <input type="radio"/> ferry (small) | <input type="radio"/> power boat / jet boat | <input type="radio"/> yacht (sail) |
| <input type="radio"/> ferry (large) | <input type="radio"/> raft | |

* Your description of the events that took place

A large, empty rectangular box with a thin black border, intended for writing a description of events.

If you need to write more, attach a blank sheet with details of what happened

7 Injury information

Were there any injuries? yes no

If yes, how many?

For each person injured, you must fill out a copy of the injury form

Once completed

Fax to:
Maritime New Zealand's Rescue Coordination Centre (RCCNZ)
+64 4 577 8038



Or

Post to:
Maritime New Zealand
Attention Accidents and Investigations
Accident Reports
PO Box 27006
Wellington 6141