

NOAA COOPERATIVE CHART UPDATING PROGRAM

US DEPARTMENT OF COMMERCE

This report is authorized by law (33 U.S.C. 883b. Reorg. Plan No. 2 of 1965, 79 Stat. 1318. Reorg. Plan No. 4 of 1974, 84 Stat. 2090). It is

used to prepare uniform and accurate observed chart correction reports that help maintain up-to-date nautical charts. While you are not required to respond, your cooperation is needed to make the results of this survey comprehensive, accurate, and time

District	Division	Flotilla

For DSO use only:	REPORT NUMBER	
	District	Number
AUX		

Member Number	Trans Code 06E	Last Name	First Name and Initial	Type of Update X SMALL CRAFT FACILITY
Street Address (For Chart Order)		City	State	ZIP Code
		Member E-MAIL ADDRESS		

SC Facility Name and SCF Ref. Number		
SCF Street Address		
City	State	ZIP

Telephone Number availability during business hours	SC Chart No.	Hor. Datum	SC Chart Name	Date	Edition
Geographic Location					
Latitude: dd-mm-ss.ss N		Longitude: ddd-mm-ss.ss W		Locating Method Used	EPE / HDOP
Date of Investigation	Time of Investigation	Facility Availability	When the SCF is seasonal: Opens on: Closes on:	Daily Hours of Operation	Days of Operation

Telephone Number		
Name or Title of POC - Person of Contact		
E-mail Address of POC - Person of Contact.		

Access to the Facility by land:	Hours on project	hrs	Distance traveled	Miles
--	------------------	-----	-------------------	-------

<input type="checkbox"/> New	<input type="checkbox"/> Discontinue	YES
	<input type="checkbox"/> Change	NO
<input checked="" type="checkbox"/>	Is this a public facility?	
<input checked="" type="checkbox"/>	Approach Depth at Datum	
<input checked="" type="checkbox"/>	Alongside Depth at Datum	
<input checked="" type="checkbox"/>	Berths (Transients) (Number)	
<input checked="" type="checkbox"/>	Moorings (Transients) (Number)	

Comments

Electricity (Transients) (Note AMPs in comments)	
Launching Ramp	Surfaced Natural
Repairs	Hull Motor Radio
Lift	Capacity in Tons
Boat Rental	Canoe
	Row
	Motor
	Charter
	House Sail
Food (If nearby, indicate distance in comments)	
Lodging (If nearby, indicate distance in comments)	
Camping (If nearby, indicate distance in comments)	
Toilets	
Showers	
Laundry (If nearby, indicate distance in comments)	
<input checked="" type="checkbox"/>	Pump Out Station
Winter Boat Storage	Wet Dry Inside

Recommendation:	Attachments to this report:
	a. Business Card / Letterhead of Owner / Manager
	b. Brochure for the SC Facility
	c. Chartlet(s)
	d. Backup data from Internet about facility.
	e. Photographs
	f.
	g.
	NOAA Chart Order

Nautical Charts Sales	
Water	
Ice	
Groceries (If nearby, indicate distance in comments)	
Hardware (If nearby, indicate distance in comments)	
Bait	
Tackle	
<input checked="" type="checkbox"/>	Diesel Oil
<input checked="" type="checkbox"/>	Gasoline
VHF Channel monitored	CH
Towing (Provide instructions in comments.)	

Date submitted	Sign this report here	Quantity	Chart Number	Chart Name
		1		

Member Number	Last Name	First Name and Initial	E-mail Address	DISTRICT	DIV	FLOT	Points %