

## LUMCON Small Boat Use Form

(Please Print)

Name _____	Billing Address _____
Organization _____	_____
Department _____	_____
Telephone _____	_____
Fax number _____	PO#, Grant, or Billing Code _____

Departure Time _____	Boat Used _____
Return Time _____	Date Used _____
Total Running Hours _____	Fuel Used _____

(Attach Receipts if fuel was charged to a LUMCON credit card or account.)

Equipment	Number Taken	Number Returned	I _____
Life Jackets	_____	_____	represent the organization indicated above and will accept responsibility for the repair or replacement of the equipment listed, lost or damaged due to my neglect.
Flare Canister	_____	_____	
Tool Kit	_____	_____	
Paddle	_____	_____	
First Aid Kit	_____	_____	
Push Pole	_____	_____	
Marine Radio	_____	_____	
Fire Extinguisher	_____	_____	
Throw Cushion	_____	_____	Comments (Please note equipment damaged or lost, and any problems encountered with the boat during your trip.)
			_____
			_____
			_____

<b>Boat Charges</b>			
_____ (\$ _____/day)	\$ _____	Boat Driver(s) _____	
_____ (\$ _____/day)	\$ _____	Cleaning Fee (if returned dirty) \$ _____	
_____ (\$ _____/day)	\$ _____	Trailer Fee \$ _____	
Fuel & Oil \$ _____		Total Charges \$ _____	

LUMCON small boats are available (at reduced rates) for education trips, students and LUMCON member researchers conducting unsponsored research. These uses must be requested of the Marine Operations Office and are subject to approval by the Executive Director. If your requested vessel activities qualify and you wish to be considered for an exemption from paying the full rate for the vessel, please sign below.

Signature \_\_\_\_\_ Date \_\_\_\_\_