

**Municipal Boat Patrol  
 U.S. Coast Guard Annual Report**

Form 8700-330 (R 3/14)

**Due December 1**

**Notice:** Use of this form is necessary for all municipal boat patrol annual audits performed by Department of Natural Resources staff. Personal information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].

Patrol Name	County	Year
-------------	--------	------

<b>Total</b>	<b>Total</b>
Patrol Officers (full time) _____	Compliance/Safety Inspections _____
Patrol Officers (part time) _____	Search & Rescue Cases _____
Boat hours worked (annual) _____	Persons Assisted _____
On-the-water hours worked _____	Vessels Assisted _____
(This is a subset of Total Patrol Hours)	Patrol Boats _____

	# of Citations/ Arrests	# of Warnings	
Wearable PFDs	_____	_____	Patrol Boats with LE Radio _____
Type IV PFDs	_____	_____	Squads used only for boat patrol activities _____
Fire Extinguishers	_____	_____	Media Contacts _____
Visual Distress Signals	_____	_____	Public Service Announcements Released _____
Sound Producing Devices	_____	_____	

			<b>Training Report</b>	<b>Number of Attending Officers</b>
BUI/OUI	_____	_____	New Boat Officer	_____
Careless/Negligent/Reckless Operation	_____	_____	Accident Investigation	_____
Navigation Rules	_____	_____	BUI/OWI/Drug Recognition	_____
Mandatory PFD Wear	_____	_____	_____	_____
Registration/Numbering Violations	_____	_____	_____	_____
All Other Violations	_____	_____	_____	_____
<b>Total</b>	<input style="width: 80px; height: 20px;" type="text"/>	<input style="width: 80px; height: 20px;" type="text"/>		

I hereby certify the information on this form is true and correct.

Report Prepared By (Print)	Signature	Date Signed
----------------------------	-----------	-------------

