



# HAGERTY MARINE HURRICANE SAFE PLAN

Boat's Name		Length	Model	
Owner's Name		Phone Day:	Night:	
Address		City	State	Zip
Alternate/Caretaker's Name (when you are not available)		Phone Day:	Night:	
Address		City	State	Zip
Has boat keys? Yes <input type="checkbox"/> No <input type="checkbox"/>	Access to hurricane equipment? Yes <input type="checkbox"/> No <input type="checkbox"/>	Boat's Current Location		Slip #
Marina Name/Address				

## EQUIPMENT INFORMATION

All equipment needed aboard to prepare boat?	Y	N	Number of Each	All equipment needed will be stripped from the boat?	Y	N
Extra Lines	<input type="checkbox"/>	<input type="checkbox"/>	_____	Electronics	<input type="checkbox"/>	<input type="checkbox"/>
Chafe Protectors	<input type="checkbox"/>	<input type="checkbox"/>	_____	Dinghy	<input type="checkbox"/>	<input type="checkbox"/>
Fenders	<input type="checkbox"/>	<input type="checkbox"/>	_____	Outboard/Fuel	<input type="checkbox"/>	<input type="checkbox"/>
Anchors	<input type="checkbox"/>	<input type="checkbox"/>	_____	Sails	<input type="checkbox"/>	<input type="checkbox"/>
Swivels	<input type="checkbox"/>	<input type="checkbox"/>	_____	Bimini	<input type="checkbox"/>	<input type="checkbox"/>
Shackles	<input type="checkbox"/>	<input type="checkbox"/>	_____	Galley Fuel	<input type="checkbox"/>	<input type="checkbox"/>
Duct Tape	<input type="checkbox"/>	<input type="checkbox"/>	_____	Ship's Papers	<input type="checkbox"/>	<input type="checkbox"/>
Plugs (exhaust ports)	<input type="checkbox"/>	<input type="checkbox"/>	_____	Personal Effects	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	_____	Other _____	<input type="checkbox"/>	<input type="checkbox"/>

## HURRICANE LOCATION INFORMATION

If at Dock: Slip #	Marina Name/Address		
If at a Hurricane Hole: Travel time by water from present location	Are there any bridges? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, will they open prior to hurricane? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Has owner of surrounding land been notified? Yes <input type="checkbox"/> No <input type="checkbox"/>	How will the skipper get ashore?		
Type of Bottom	Depth	Additional Anchors Needed: # _____ Size(s) _____ Type(s) _____	
Additional Lines: # _____ Length _____ Size _____	Additional Chains: # _____ Length _____ Size _____	Chafe Gear: _____ Swivel: _____ Shackle: _____	
If at a Mooring/Anchorage: Has mooring been inspected within the last six months? Yes <input type="checkbox"/> No <input type="checkbox"/>	How will the skipper get ashore?		
Type of Bottom	Depth	Additional Anchors Needed: # _____ Size(s) _____ Type(s) _____	
Additional Lines: # _____ Length _____ Size _____	Additional Chains: # _____ Length _____ Size _____	Chafe Gear: _____ Swivel: _____ Shackle: _____	
If Stored Ashore: Blocking adequate for storm conditions? Yes <input type="checkbox"/> No <input type="checkbox"/>	Diagram of Proposed Hurricane Docking/Mooring Arrangement (use back if needed)		
What arrangements have been made for hauling?			
Storage Location			
Marina/Property Owner	Phone		

Please use this worksheet to create a custom plan to fit your own circumstances. Make sure you provide copies to your designated alternates/caretakers as well as your marina owner/manager.