



J.N. ALLINSON ASSOCIATES, INC.
Independent Marine Consultants
 222-2 University Blvd. N.
 Jacksonville, Florida 32211-7534
 USA

SAMS® Accredited Marine Surveyor Since 1998
 Designation Yachts & Small Craft
 Level III Certified Infrared Thermographer
 Level I Airborne Ultrasound
 Telephone/ +001-904-721-2177
 Fax: +001-954-337-0550
 Website: WWW.ALLINSON.COM
 Email: jna2@allinson.com

The check list below can be used to help prepare for the
 Marine Survey Condition and Value Process

Download form, complete in Adobe, save it, then email it to jna2@allinson.com

Preparation Tasks	Yes	No	Comments
Survey Permission from Owner or Agent	<input type="checkbox"/>	<input type="checkbox"/>	
Boat Yard Notified	<input type="checkbox"/>	<input type="checkbox"/>	
Boat Hauling Arranged	<input type="checkbox"/>	<input type="checkbox"/>	
Boat Bottom Cleaning Arranged	<input type="checkbox"/>	<input type="checkbox"/>	
Boat Blocking for Survey Arranged	<input type="checkbox"/>	<input type="checkbox"/>	
vDC power available for testing systems	<input type="checkbox"/>	<input type="checkbox"/>	
vAC power available for testing systems	<input type="checkbox"/>	<input type="checkbox"/>	
All electronics installed	<input type="checkbox"/>	<input type="checkbox"/>	
All items for valuation onboard	<input type="checkbox"/>	<input type="checkbox"/>	
All items not included for valuation removed	<input type="checkbox"/>	<input type="checkbox"/>	
Engine (s) ready ... note they should be ready for a "cold start" at time of survey.	<input type="checkbox"/>	<input type="checkbox"/>	
Potable water systems ready for survey	<input type="checkbox"/>	<input type="checkbox"/>	
Toilets ready for survey	<input type="checkbox"/>	<input type="checkbox"/>	
Bilges clean and dry	<input type="checkbox"/>	<input type="checkbox"/>	
Bilge pumps ready for survey	<input type="checkbox"/>	<input type="checkbox"/>	
Bilge covers removed for survey	<input type="checkbox"/>	<input type="checkbox"/>	
Electrical Panels open for survey	<input type="checkbox"/>	<input type="checkbox"/>	
Cabinets and lockers clear of gear	<input type="checkbox"/>	<input type="checkbox"/>	
Vessel Safety Tasks	Yes	No	Comments
USCG Vessel Safety Check Document	<input type="checkbox"/>	<input type="checkbox"/>	
USCG required equipment onboard	<input type="checkbox"/>	<input type="checkbox"/>	
State Issued Vessel Registration or USCG Documentation Papers onboard	<input type="checkbox"/>	<input type="checkbox"/>	
Proof of Insurance	<input type="checkbox"/>	<input type="checkbox"/>	
Equipment Manuals	<input type="checkbox"/>	<input type="checkbox"/>	
Service Records	<input type="checkbox"/>	<input type="checkbox"/>	
Personal Floatation Device(s) onboard	<input type="checkbox"/>	<input type="checkbox"/>	
Throwable Flotation Device onboard	<input type="checkbox"/>	<input type="checkbox"/>	
Sound Producing Device onboard	<input type="checkbox"/>	<input type="checkbox"/>	
Bell for vessels over 40' onboard	<input type="checkbox"/>	<input type="checkbox"/>	
Fire Extinguisher(s) charged, mounted, tagged	<input type="checkbox"/>	<input type="checkbox"/>	
Backfire Flame Control gasoline engines	<input type="checkbox"/>	<input type="checkbox"/>	
Ventilation (blowers for gasoline engines)	<input type="checkbox"/>	<input type="checkbox"/>	
Marine Sanitation Devices	<input type="checkbox"/>	<input type="checkbox"/>	
Posted Marine Pollution Placard	<input type="checkbox"/>	<input type="checkbox"/>	
Posted No Oil Pollution Placard	<input type="checkbox"/>	<input type="checkbox"/>	
Waste Management Plan for documented vessels over 40'	<input type="checkbox"/>	<input type="checkbox"/>	
Single Sideband Radio License posted	<input type="checkbox"/>	<input type="checkbox"/>	
Single Sideband Operators license posted	<input type="checkbox"/>	<input type="checkbox"/>	
Navigation Lights operational	<input type="checkbox"/>	<input type="checkbox"/>	
Visual Distress Signals (flares within expiration date)	<input type="checkbox"/>	<input type="checkbox"/>	
Other Services Required	Yes	No	Comments
Sea Trial Needed	<input type="checkbox"/>	<input type="checkbox"/>	
Delivery Captain	<input type="checkbox"/>	<input type="checkbox"/>	
Captain for Sea Trial	<input type="checkbox"/>	<input type="checkbox"/>	
Oil Analysis	<input type="checkbox"/>	<input type="checkbox"/>	
Galvanic Corrosion Testing	<input type="checkbox"/>	<input type="checkbox"/>	
Infrared Thermal Imaging Testing	<input type="checkbox"/>	<input type="checkbox"/>	
Hull thickness gauging	<input type="checkbox"/>	<input type="checkbox"/>	
Aerial View Photography	<input type="checkbox"/>	<input type="checkbox"/>	
Airborne Ultrasound leak testing	<input type="checkbox"/>	<input type="checkbox"/>	
Systems Maintenance & Operations manual	<input type="checkbox"/>	<input type="checkbox"/>	



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REQUEST QUOTE FOR SERVICES

Download form, Use Adobe to complete as much as possible, save form, then email to jna2@allinson.com

Client Name		Owner Name	
Address Line 1		Address Line 1	
Address Line 2		Address Line 2	
City		City	
State		State	
Zip code		Zip code	
Country		Country	
Telephone Number		Telephone Number	
Email Contact		Email Contact	
Vessel Location		Requested Date for Survey	
Country		Vessel Hailing Port	
Internet Listing for Vessel		Vessel Make	
Vessel Builder		Vessel Model	
Hull Identification Number		Vessel Model Year	
State Registration Number		Fuel <input type="checkbox"/> Gasoline <input type="checkbox"/> Diesel	
USCG Official Number		Hull Material <input type="checkbox"/> Fiberglass <input type="checkbox"/> Steel <input type="checkbox"/> Aluminum <input type="checkbox"/> Wood	
		Engine(s) Type <input type="checkbox"/> Inboard <input type="checkbox"/> Outboard	
Client Name		Owner Name	
Address Line 1		Address Line 1	
Address Line 2		Address Line 2	
City		City	
State		State	
Zip code		Zip code	
Country		Country	
Telephone Number		Telephone Number	
Email Contact		Email Contact	
Reason for Survey: <input type="checkbox"/> Damage Assessment <input type="checkbox"/> Prepurchase C&V <input type="checkbox"/> Insurance C&V <input type="checkbox"/> Appraisal <input type="checkbox"/> Commissioning <input type="checkbox"/> Pre Delivery <input type="checkbox"/> Trip Survey	Payment Method <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Bank Wire <input type="checkbox"/> Credit Card <input type="checkbox"/> Pay Pal Budget for Services:		