

Idaho Boat Inspection Report

Kootenai County, Idaho

DATE: _____ TIME: _____ Body of Water/Location _____

TYPE CONTACT: ☐ Observed/Reported Violation ☐ Random ☐ Ramp/Shore ☐ Request

VESSEL INFO

REGISTRATION# _____ HIN: / / / / / / / / / / / /

Make _____ Model _____ Color _____ Length _____

☐ INB ☐ I/O ☐ OB ☐ Jet ☐ Sail ☐ Electric ☐ Manual

CONTACT INFO

FIRST NAME: _____ LAST NAME: _____ ☐ owner ☐ operator

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ DOB: _____ DL/SSN: _____

YES	NO	N/A
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			Registration Numbers (Properly Displayed)
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			Registration Stickers (Valid/Properly Displayed)
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			Certificate of Registration Valid/Onboard
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			Required Lights (Night Only)
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			Personal Flotation Devices (Wearable)
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			Personal Flotation Device (Type IV)
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			Personal Flotation Device (Mandatory Wear)
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			Fire extinguisher(s)
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			Flame arrestor USCG approved/properly installed
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			Ventilation (Engine and Fuel Tank Compartments)
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			Sound Producing Device
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			Ski Warning Flag
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			Noise Testing
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			Idaho Invasive Species Sticker
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			Engine Cut Off Switch Used
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			Boat Safety Course Taken
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Other Safety Equipment Onboard: _____

Persons on Board: Adult _____ Children _____ Alcohol Observed Onboard ☐ Yes ☐ No

COMMENTS: _____

Sticker Issued: ☐ Yes ☐ No

Warning: ☐ Yes ☐ No

Citation: ☐ Yes ☐ No

Cited For: _____ Citation # _____

Deputy Name: _____ ID # _____

NO