

Waldringfield Sailing Club

Incident Report Form

This form is to be used to report any contact with a moored boat within the Waldringfield anchorage.

Date: _____ Time: _____

Conditions (wind/tide etc):

Your Name _____

Name of moored boat _____

Location of moored boat (mooring number if known) _____

Nature/description of contact _____

What part of the moored boat was impacted? _____

Description of any visible damage _____

Name of any witness _____ Phone Number _____

Were you the skipper of the moving boat? Yes/No

If No, skippers name if known or Name/number/other identifying features of the craft

Have you contacted the owner of the moored boat? Yes/No

If No, please notify a flag officer or the secretary of WSC (confirm who) _____

Form completed by _____ Sign _____

Contact Telephone Number _____