

PleasureCraft Condition Report



Inspection and Report must be completed by an independent, suitably qualified Surveyor, Shipwright or Boatbuilder, with any costs being met by the Purchaser/Owner

General Details

Client Name	_____	Email	_____
Phone	_____	Address	_____
Inspection Date	_____		
Inspection Place	_____	Slipped for Inspection?	yes ~ no (Please circle)
Vessel Name	_____	Vessel Type	_____
		Design and Model	_____
Approximate Dimension (m):		Builder	_____
Length	_____	Beam	_____
		Draft	_____
Engine	Make	Model	_____
	Year	Hours	_____
		Construction Materials:	
		Hull	_____
		Deck	_____
		Cabin	_____

Code for each applicable section: G = good; S = serviceable; R = requires attention; / = not applicable

Hull Condition

	Code	Comments
<i>Exterior - underwater</i>		
Hull	_____	_____
Keel	_____	_____
Keel Join	_____	_____
Antifoul Condition	_____	_____
Rudder/s	_____	_____
Shaft/s	_____	_____
Propeller/s	_____	_____
Skin Fittings	_____	_____
<i>Exterior - topsides</i>		
Hull	_____	_____
Boarding Platform	_____	_____
Hull/Deck Join	_____	_____
Bollard / cleats	_____	_____
Stanchions - safety lines	_____	_____
Windlass	_____	_____
Cockpit Area	_____	_____

Exterior - cabin

Windows and screens

Exterior - other

Flying Bridge

Canopies & Canvas

Interior - shell

Overall Watertightness

- boundary doors

- hatches

- windows

- yacht companionway

Bulkheads

Guard Rails

Scantlings
(structural members)

Keel bolts - fastenings

Skin fittings/ sea cocks /
valves

Bilge Condition

Interior - cabin

Toilet arrangement

Basin & shower

Mast step

Sides - top

Interior - other

Deck head

Side & Fore decks

Electrical / Electronics & Comms Gear

	Code	Comments
Navigation Lights	_____	_____
Wiring - Condition	_____	_____
Batteries - Condition	_____	_____
Batteries - Security	_____	_____
Burglar Alarm	_____	_____
Operating Instruments	_____	_____
Auto Pilot	_____	_____
VHF/s	_____	_____
SSB	_____	_____
GPS	_____	_____
Plotter	_____	_____
Radar	_____	_____
Depth Sounder	_____	_____
EPIRB	_____	_____

Mechanical Condition

	Code	Comments
Engine Installation	_____	_____
Engine beds	_____	_____
Engine controls	_____	_____
Drive train/s	_____	_____
Exhaust/s	_____	_____
Fuel lines filters	_____	_____
Fuel shut off valves	_____	_____
Fuel tanks filters	_____	_____
Fuel tank vents	_____	_____
Domestic Plumbing	_____	_____
Holding Tanks	_____	_____
Bilge pumps - Adequate	_____	_____
- Discharges	_____	_____
- Float Switches	_____	_____
Steering Gear	_____	_____
Emergency Tiller	_____	_____

LPG

	Code	Comments
Installation to NZ Standards	_____	_____

Safety Equipment

	Code	Comments
Anchor & warp	_____	_____
Spare Anchor & warp	_____	_____
Flares - current to	_____	_____
Fire Extinguishers	_____	_____
- type / current to	_____	_____
- adequate for the vessel?	_____	_____
Fire Extinguisher fixed system	_____	_____
Lifejackets	_____	_____
Life Buoys	_____	_____
Safety harness	_____	_____
Life raft	_____	_____
Dinghy / tender	_____	_____
Outboard	_____	_____
Charts, Navigational & course-plotting materials	_____	_____

Mast Spars Sails Rigging

	Code	Comments
Mast/s year installed	_____	_____
Boom/s	_____	_____
Mast step	_____	_____
Standing rigging	_____	_____
Running rigging	_____	_____
Chain plates	_____	_____
Sheet winches	_____	_____
Sails	_____	_____

Note: inspection of above items is limited to a visual from the deck.

Date rigger last inspected mast, spars and rigging: ____ / ____ / ____

Vessel Stability

Are you aware of any Stability Tests which have been undertaken:

- on this vessel? **yes ~ no**

- on this vessel design? **yes ~ no**

Comment: _____

Vessel Alterations

Has the vessel been altered since it was built? **yes ~ no**

If yes, were the alterations carried out in accordance with the requirements of a naval architect? **yes ~ no**

Vessel Operating Limit

Do you consider the vessel to be in a safe and seaworthy condition for use up to 200 nautical miles from the North or South Islands of New Zealand? **yes ~ no**

If no, please provide comments in the section below and advise what you consider the limit should be: _____ nautical miles.

Other Comments / Signature

This report is not classed as a Full Condition Survey and is purely for underwriting purposes. We accept that all care has been taken but no responsibility is accepted for latent or other defects.

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Any comments or recommendations you wish to make?

Company: _____ Name: _____

Date: _____ Qualifications: _____

Phone: _____ Email: _____

Signed: _____