

CATEGORY 7	MONOHULLS & MULTIHULLS	Short races in sheltered waters in daylight hours only with effective rescue availability
DATE OF AUDIT ____ / ____ / ____	SAIL NO:	BOAT NAME:

Compliance Form valid until 30th June next from the date of this form, or ____ / ____ / ____ whichever is the earlier.
 Subject to spot checks Regulation 2.02.2

OWNER DETAILS

OWNER/S NAME:			
OWNER/S YA NO:		OWNER/S CLUB	

BOAT DETAILS

LOA:		DISPL (tonnes):	
HULL MATERIAL:		HULL COLOUR:	
DECK MATERIAL:		DECK COLOUR:	
MAX CREW:		DISTINGUISHING MARKS:	
RMS (MARITIME) HULL REGISTRATION NO:			
RMS (MARITIME) STICKER ISSUED	YES	NO	

DECLARATION BY OWNER/PERSON IN CHARGE

I have read and understand my obligations as Owner/Person in Charge set out in the YA Special Regulations 2013-2017 in particular 1.02.1,1.02.2, 1.02.3- Owners Responsibility and 2.03.1(a)- Function of equipment. I understand that this audit is carried out only as a guide to Owners/Persons in Charge and Race Organising Authorities. An Auditor/Inspector does not limit or reduce the complete and unlimited responsibility of the Owner or Person in Charge as defined in regulations 1.02.1, 1.02.2 and 1.02.3- Owner's Responsibility and 2.03.1.

I undertake that all of the boat's equipment as specified in the YA Special Regulations 2013-2017 will remain on the boat and continue to be in good working order and repair for the duration of each and every race.

Items designated with a shaded box are for Owner/Person in Charge to ensure compliance when racing and must also be initialised by the Owner/Person in Charge.

Signed by Owner/Person in Charge **Date**

EQUIPMENT AUDITOR DECLARATION

I have checked the equipment in accordance with 2.02.2 summarised in the following list for the above mentioned boat and the equipment listed was found to be on board at the time and date of this Audit.

Audited by (print name):	Signed by Equipment Auditor:
YA No:	Date:

OUTSTANDING ITEMS - The Equipment listed over the page was complete except for the following items

Equipment Outstanding	Re-Inspected by	YA Auditor No.	Date

