



III OPERATOR APPLICATION

Skipper Qualification Guidelines:

M/Y Endeavor LLC has a responsibility to the Owners and it is a requirement of our insurance that a responsible operator is operating this vessel and have adequate experience to safely captain the yacht. Our criteria are as follows:

1. Experience skippering a similar size and type of vessel.
2. Recent boating experience
3. Experience on tidal waters

The following resume will help us evaluate your qualifications to act as skipper of Endeavor. Please thoroughly complete and mail it back to us.

New Owners will most likely be 'moving up' from a smaller boat, and may, or may not, have recent experience. As an Owner they will have the most desirable qualities – a proper attitude, a wish to be professional and a pride of ownership. They will have a willingness to improve their knowledge and skills. They will attend boating classes, such as those offered by the Power Squadron, US Coast Guard, and the State test, and other groups. I will make myself available when possible. Ed Peerens (our landlord) has offered to spend some time with new owners too. Other skippers in Anacortes will be identified. We will have a written exam covering "rules of the road," safety at sea and emergencies, maintenance, and vessel operation. I, or outside licensed skippers are required by the insurance company to "sign off" on any operators.

Charterer's Name _____ e-mail _____ Boat M/Y Endeavor Date _____
 Address _____ City/State/Zip _____
 Phone # (home): _____ (work) _____ Cell phone: _____

How many years have you been actively operating a vessel? _____ How many days per year? _____

Please list the last vessels that you have previously owned or bareboat chartered. Indicate number of engines.

Size	Single or Twin Screw	Location	When	Charter Co. or ?	Skipper	Crew
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Please list any other vessels that you have owned When # of Days Per Year Owned Skipped

Please list any formal training in boating or navigation below.

Type of Course	Location	When	Vessel Used	# of Days	Certification Received
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Please indicate your experience and working knowledge of the following:

Anchoring/Docking	# of Times	Navigation	Type of Boating
<input type="checkbox"/> Picking up a mooring	_____	<input type="checkbox"/> Reading Nautical Charts	<input type="checkbox"/> Power – Size _____
<input type="checkbox"/> Bow anchor operation	_____	<input type="checkbox"/> Plotting	<input type="checkbox"/> Single Screw
<input type="checkbox"/> Double bow anchor	_____	<input type="checkbox"/> Pilotage	<input type="checkbox"/> Twin Screw
<input type="checkbox"/> Bow and stern anchor	_____	<input type="checkbox"/> Dead Reckoning	
<input type="checkbox"/> Docking alongside	_____	<input type="checkbox"/> Reading Tide Tables	<input type="checkbox"/> Sail – length _____
<input type="checkbox"/> Reading tides & current	_____		
<input type="checkbox"/> Giving crew instruction	_____		

Charterer's Signature: _____ Date: _____

Please add any additional details or experiences on back of this sheet.