



Waterway Analysis & Management System
Questionnaire for Alaskan Waters

Name/Company: _____

Phone: _____

Contact Person: _____

Name of Vessel(s): _____

Please use back of page if additional space is needed

1. **User Type:** Pleasure Commercial Pilot Licensed Unlicensed

2. **Vessel Type:** Motor Sail Ferry Fishing Tug/Barge Deep Draft

3. **Vessel Specifications:** *Length:* _____ *Beam:* _____ *Draft:* _____

Tonnage: _____ *Height of Eye:* _____ *# of Crew/Passengers:* _____

4. **What is your principle cargo?** (i.e. petroleum, dry goods, personnel)

5. **What principle berths do you use?** _____

6. **Total years of maritime experience:** _____

Years of maritime experience on this waterway: _____

7. **When do you transit this waterway?** Day Night Restricted Visibility

Year Round Seasonally (____ to ____)

8. **What are your principle methods of navigation:** Charts Gyro Compass GPS

Radar Magnetic Compass Radio Beacons LORAN Fathometer Searchlights

Other: _____

9. **Do you utilize Pilot services?** _____

10. **Does weather ever cause a problem to navigation, if so where and explain?**

10. **Are tides or currents ever a problem, if so where and explain?** _____

11. **When transiting, how much vessel traffic do you normally encounter?** _____

12. **What Aids to Navigations do you feel are the most useful?** (Buoys, Lights, Daybeacons) _____

13. **What Aids to Navigations do you feel are the least useful?**

14. **What do you feel is the most difficult or dangerous part of the waterway and why?** _____

15. **Have you experienced communication problems, if so where and explain?**

16. **Have you had problems with charts and pubs?**

17. **Do you know of any specific danger/safety problems/issues? (shoals, hazards to navigation, collisions)**

18. **Do you anchor or moor within any of the area of this questionnaire? If yes which ones?**
