

**ACAPT ACCREDITATION APPLICATION**  
**Policies and Procedures for Accreditation**

*(Revised 2017)*

1. ACAPT applicants are not required to be members of C-PORT.
2. Applicant must complete all information required on the application and return the forms and supporting documentation to C-PORT for consideration. C-PORT will review the application and notify applicant of approval or disapproval.
3. An Exemption from a requirement of ACAPT certification may be considered provided the request is made in writing prior to completion of the ACAPT checklist. The Chairman of C-PORT in collaboration with the C-PORT Standards and Education Committee will review the exemption request. The request for exemption must include a discussion of the item for which the exemption is requested, why that requirement cannot be met, what alternate equipment the applicant has that will meet the requirement, and justification for allowing the exemption. If the exemption is denied, an appeal may be made to the C-PORT Board of Directors. A majority vote of the directors on allowing or not allowing an exemption to the ACAPT requirements is final.
4. Applicant attests that all vessels are in compliance with minimum vessel standards set by USCG.
5. Applicant must submit proof of enrollment for all captains in a random drug-testing program approved by US Coast Guard.
6. Applicant must request that a Certificate of Insurance be sent directly to C-PORT.
7. Applicant will arrange for inspection of the vessel by an accredited marine surveyor of the applicant's choice. All costs are the responsibility of the applicant.
8. Surveyor will submit the ACAPT Accreditation Equipment Inspection Form(s) directly to C-PORT.

**After completion of the application:**

1. Check that all signature lines and initial lines are dated and signed.
2. Confirm all sections of the application have been properly completed.
3. Enclose any additional pages that may have been used.
4. Contact your insurance broker/agent to have a Certificate of Insurance with cancellation notification clause mailed directly to C-PORT or emailed to [tcardone@cport.us](mailto:tcardone@cport.us).
5. Enclose a copy of certificate of enrollment of captains in a random drug testing program.
6. Return this entire application with a check for \$65 per vessel (member of C-PORT) or \$85 per vessel (non-C-PORT member) made out to **C-PORT** and mail the package (no faxes) to:

**C-PORT**  
**3640-B3 North Federal Highway #136**  
**Lighthouse Point, FL 33064**

Your application will not be reviewed until all paperwork is received, including the vessel equipment checklists to be mailed directly to C-PORT by the surveyor.

For the status of your application or questions on ACAPT equipment or standards requirements, call C-PORT at (954) 261-2012 or email [tcardone@cport.us](mailto:tcardone@cport.us).

*Visit our website at [www.cport.us](http://www.cport.us) for additional information.*

**ACAPT ACCREDITATION COMPANY INFORMATION**

*(To be completed by Applicant)*

Company Name \_\_\_\_\_ Year Firm Started: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**Company Vessels:**

Vessel Name \_\_\_\_\_ Make \_\_\_\_\_ Length \_\_\_\_\_ Eng Type \_\_\_\_\_ Eng HP \_\_\_\_\_ Fuel \_\_\_\_\_

Documentation or Registration Number, as appropriate: \_\_\_\_\_

Vessel Name \_\_\_\_\_ Make \_\_\_\_\_ Length \_\_\_\_\_ Eng Type \_\_\_\_\_ Eng HP \_\_\_\_\_ Fuel \_\_\_\_\_

Documentation or Registration Number, as appropriate: \_\_\_\_\_

Vessel Name \_\_\_\_\_ Make \_\_\_\_\_ Length \_\_\_\_\_ Eng Type \_\_\_\_\_ Eng HP \_\_\_\_\_ Fuel \_\_\_\_\_

Documentation or Registration Number, as appropriate: \_\_\_\_\_

*(Please attach separate sheet for additional vessels.)*

**Company Credentialed Captains**

Verification of all current captains licenses is required. If a paper license, the document number is found on the upper left corner. If the passport style credential, the document number is found on the inside front cover on the right side.

Captain Name: \_\_\_\_\_ Document Number \_\_\_\_\_ Exp Date \_\_\_\_\_

Captain Name: \_\_\_\_\_ Document Number \_\_\_\_\_ Exp Date \_\_\_\_\_

Captain Name: \_\_\_\_\_ Document Number \_\_\_\_\_ Exp Date \_\_\_\_\_

*(Please attach separate sheet for additional captains.)*

**Company Towing and Salvors Liability Insurance Policy**

Insurance/Broker Company Name \_\_\_\_\_

Towing, Collision, and Salvors Liability, and Jones Act Coverage amount at least \$1,000,000 P&I is required. If no Jones Act P&I included, explain:

\_\_\_\_\_  
\_\_\_\_\_

***Cancellation Notification Clause provided to C-PORT:***

I certify that my insurance Broker was contacted and requested to mail a Certificate of Insurance with Cancellation Notification Clause directly to C-PORT. \_\_\_\_\_ *(Initial and Date)*

**ACAPT ACCREDITATION COMPANY INFORMATION, continued**

*(To be completed by Applicant)*

**Random Drug Testing Program Administrator**

Program must be US Coast Guard approved and found to be in compliance with 49 CFR 40 and 46 CFR 16. Applicant must submit a copy of registration with the drug testing program for all captains. A summary sheet from the Program Administrator is acceptable.

Program Administrator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Applicant's Chosen Surveyor**

Important: Instruct the surveyor to mail the inspection checklists directly to C-PORT.

Name and Company: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

***I hereby certify the information in this application to be true. I confirm these vessels meet the minimum vessel standards set by US Coast Guard regulation; applicant complies with all applicable federal, state and local laws and regulations and adheres to the operational standards set forth herein:***

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Applicant Printed Name:** \_\_\_\_\_

**Applicant Title:** \_\_\_\_\_

**ACAPT PROFESSIONAL OPERATIONAL STANDARDS**

*(Signature of Applicant Required)*

***Applicant adheres to the following professional standards:***

1. Company and company representatives will conduct business practices in full compliance with all applicable federal and state laws and regulations.
2. Company maintains 24-hour response availability during local boating season.
3. Company maintains a backup vessel arrangement if the company operates with only one vessel.
4. Company and company representatives will not use deceptive or misleading statements relating to estimated time of arrival on scene.
5. Company and company representatives will not unlawfully transmit by radiotelephone for the purpose of disrupting or interfering with the radiotelephone communications of others. Towing/salvage provider will not “key the mike” or “step” on transmissions of boaters or other providers. Towing/salvage provider will not intervene in communication between boaters and another towing company specifically contacted by the boater.
6. Company and company representatives will endeavor to communicate rates and any grounding surcharges prior to commencing work, and obtain customer’s signature on final invoice.
7. Company and company representatives shall not post-date invoices for towing or salvage services.
8. Company and company representatives shall not use deceptive or misleading advertising language and methods.
9. Company and company representatives shall conduct all business dealings with members of the public in a fair, consistent, professional, and ethical manner.
10. Company and company representatives will apply all standards and business practices without regard to a customer’s insurance coverage.
11. Company and company representatives shall use his or her best efforts to cooperate with all available resources to prevent damage or loss to life or property.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Applicant Printed Name:** \_\_\_\_\_

**ACAPT ACCREDITATION INITIAL INSPECTION**  
**REQUIREMENTS FOR COASTAL, BAYS, AND SOUNDS VESSELS- (To be completed by Surveyor)**

Company Name: \_\_\_\_\_ Vessel Name: \_\_\_\_\_ Size: \_\_\_\_\_

**U.S. COAST GUARD SAFETY EQUIPMENT REQUIRED OF ALL VESSELS BY REGULATION:**

- Fuel tank installation with appropriate vent/screen/filter
- Backfire flame arrester (gasoline inboard engines only)
- Engine compartment ventilation appropriate for engine type
- Navigation lights
- Sound producing device and/or bell
- Fire extinguishers as required by regulations plus one 5# additional
- Distress signals (3 day/night flares minimum within expiration date)
- Garbage disposal and Oil pollution placards (*vessels 26' or more in length*)
- USCG approved throwable floatation device
- AIS (Automatic Identification System) Class A (*vessels more than 26' and over 600 HP*)

**EQUIPMENT REQUIRED FOR ACCREDITATION:**

- PFDs – One crew Type 3 or better. Four adult and 2 children Type 2 or better
- Communications – Two VHF Radios and alternate such as cell phone, handheld VHF, company radio, etc.
- Tow Line - Minimum 300-feet of floating, 10,000lb breaking strength (600-feet recommended)
- Tow Post – Installed and construction and condition appears adequate for the vessel considering propulsion, size of vessel, and intended use. Inspection of welds, fasteners, backing plates show no signs of failure.
- Dewatering Capacity – Minimum 3000gph from any power source (6,000gph recommended)
- Lighting – Appropriate COLREGS lights
- Spotlight – Minimum 50,000 candle power
- Tools – Knife to cut towline  - Tools to change own plugs, belts, filters
- Boat Hook  - Jump start system
- Compass  - Binoculars
- Fenders or equivalent  - Flashlight
- First Aid kit for five persons
- Ground Tackle – Anchor, chain, and rode sized appropriately for the vessel and area of operations
- GPS – Marine type, Installed or portable
- Charts – Paper or electronic
- Damage Control – Material for stemming and stopping leaks and flooding
- Spare Equipment – Belts, filters, and plugs appropriate for the vessel
- Red/Yellow Safety Lights – (Authorized to meet USCG requirements)
- Recommended Equipment:***
- RADAR
- RADAR Reflector
- Exposure Suit – Appropriate for number of crew
- EPIRB and/or PLB
- Loud Hailer
- Radio Direction Finder
- SSB – If normally operating outside VHF range
- Drogue
- Spare Line – 100 total feet

*I certify that this vessel meets the requirements for accreditation as a Coastal, Bays, and Sounds Vessel.*

Marine Surveyor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Marine Surveyor Printed Name: \_\_\_\_\_

