

MEASUREMENT FORM











COMPETITOR DETAILS									
Name:					Race Number:				
Address:									
Post Code:					Class:				
Boat Name:				UIM Cockpit Number:					
Email:				Issue Date:					
Mobile:			Date Measured:						
Measurers Name:									
HULL									
CPA Number					HIN Number				
Builder			Year I	r Built					
Designer					Туре	3			
Deformable Pickles					Mater	terial			
Measured Length (m)				Beam	Beam (m)				
Head Clearance		5cm	10cm			· ,			
Cockpit Depth (m)			1		Cock	Cockpit Strength (N/M)			
Crashbox Licence Number					Crashbox Builder				
Restraints					Cano	ру			
Minimum Weight (kg)		Flotation			ation S	ystem			
Number of Crew		Crev			w Configuration				
Directional Control System		<u>'</u>			Drive System				
ENGINE									
Manufacturer					Туре	Туре			
Homologation Number					Year				
Number of Engines					Fuel				
ADDITIONAL CLASS									
Class					Race	Number			
Manufacturer					Туре	e			
Homologation Number					Year	ear			
Number of Engines					Fuel	uel			
Measurer's Signature:									
Competitor's Declaration:		I agree to be bound by the rules of the UIM and CPA in respect of boat measurement. I understand that non-compliance with any of the rules or regulations could result in disciplinary action by the CPA.							
Competitor's Signature:							Date:		
Measurement forms are valid for 10 years, at which time the owner must apply for a renewal.									

The Measurement Certificate fee is £10. Fees apply for new measurement certificates, renewals, replacements for loss or damaged certificates, and change of ownership.

A measurement certificate will be issued once this form has been completed, signed and sent to the CPA with payment by the competitor.