

**NOS-USCG AUXILIARY CHART UPDATING PROGRAM
USCG AUXILIARY NATIONAL DIVISION CHIEF AIDS TO NAVIGATION**

ADOPT-A-CHART PROGRAM

APPLICATION FOR FLOTILLA PARTICIPATION

District: _____ **Division:** _____ **FLOTILLA:** _____ **Date:** _____

Only flotillas may apply for participation in this program. A requirement for participation is that an applying flotilla's executive committee reviews the proposed long-term commitment involved and votes affirmatively on it. Has this been done? _____

CHART (S) REQUESTED FOR ADOPTION:

Chart Number	Whole Chart or Part Of Chart	If part of a chart is to be adopted, a copy of the chart with the proposed area outlined should be attached to this application or the LAT/LONG of the four corners of area selected.
	Whole	

HOW MANY BOATS AVAILABLE ANNUALLY FOR USE IN AAC PROGRAM? -----↓ _____

HOW MANY FLOTILLA MEMBERS AVAILABLE ANNUALLY FOR PARTICIPATION IN AAC
PROGRAM? -----↓ _____

FC SIGNATURE: _____ ID # _____
Print name and sign name

FC ADDRESS: _____

TELEPHONE _____ E-MAIL: _____
NUMBER: _____

SEND CHART _____ ID
TO: _____ # _____

ADDRESS: _____

TELEPHONE _____ E-MAIL: _____
NUMBER: _____

Flotilla Commander's, Send this "Application for Flotilla Participation" to your DSO-AN: _____
DSO-AN Initial

DSO-AN Send
to:

DVC-ON SIGNATURE: _____ Date: _____

NOS SIGNATURE: _____ Date: _____

Revised 1-04

