

**Lost and/or Missing SCUBA Equipment Survey Form**

Name: \_\_\_\_\_ Rate/Rank: \_\_\_\_\_

Class #: \_\_\_\_\_ Date: \_\_\_\_\_

Item Lost and/or Missing: \_\_\_\_\_

Date Item was Lost: \_\_\_\_\_

Area were Item was Lost: \_\_\_\_\_

**Briefly describe the situation/circumstance concerning the lost/missing gear in the space provided below.**

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Signature: \_\_\_\_\_