



HEARING REQUEST FORM and OTHER REQUESTS FOR ACTION BY THE PROTEST COMMITTEE

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|---|--|---|---------------------|------------------------------------|
| Received Date: 7/10/24 | Time: 0728 | By: SIMPSON TURPIN | Protest Time Limit: | Case Number: |
| 1. Date of Race: | Series: SAIL PARADISE 2024 | Race Number: 3 | | |
| 2. TYPE of HEARING | | <input type="checkbox"/> Request to have a hearing full jury (RRS N1.4(b)) <input type="checkbox"/> Report for DP Penalty (RRS 64.6) <input type="checkbox"/> Request for redress <input type="checkbox"/> Report concerning a Support Person <input type="checkbox"/> Request to reopen a hearing (RRS 66) <input type="checkbox"/> Report of Misconduct (RRS 69) | | |
| 3. MY DETAILS – The INITIATOR – the protestor, the person making the allegation, request or report | | | | |
| Class/Fleet: IRC Div 2 | Sail No/Boat Name: R60 ARCTIC BLONDE | OR | Committee: | |
| Represented By: | Name: PETER COOK | Telephone: 0417 303 310 | | e-mail: pacook1@bigpond.com |
| 4. The RESPONDENT – protestee, committee for redress, support person, person reported for misconduct. | | | | |
| Class/Fleet or Committee: IRC Div 1 | Sail No/Boat Name/Person: STRATACARE FLYAWAY PAUL | Telephone (if known): | | |
| 5. INFORMING the PROTESTEE – If you are protesting, how did you inform the boat of your intention to protest? | | | | |
| By hailing: <input type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| Displaying Red Flag: <input type="checkbox"/> Not required <input type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| Informed some other way: <input type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| 6. The INCIDENT When and Where? | | Diagram (if relevant): Include wind and current. | | |
| Brief Description. WE HAD JUST STARTED RACE 3 WE WERE ON STBD TACK HARD ON THE WIND WHEN STRATACARE BOW PRODDER CONTACTED THE PORT AFT OF OUR YACHT CAUSING SERIOUS DAMAGE PUTTING US OUT OF THE REGATTA. STRATACARE DID NOT ACKNOWLEDGE THE INCIDENT AND DID NOT RETIRE FROM THE SERIES AS RULE 44.1B THERE WAS NO OVERLAP AND THEY WERE CLEAR ASTERN EVEN AT THE TIME OF THE CONTACT DUE TO THE LENGTH OF THEIR PRODDER | | I AM REQUESTING PROTEST COMMITTEE TO PROTEST STRATACARE DUE TO SERIOUS DAMAGE PHOTOS SUPPLIED I MESSAGED THE RACE COMMITTEE AT THE COMPLETION OF THE RACE | | |
| Rules that apply: 2, 12, 14, 44.1B / 60.3A1 69.1B1 | | Names of witnesses: RACE COMMITTEE | | |

Continue on the back of this form or other paper if necessary.

69.2B.



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