## PUBLIC DISPLAY OF FIREWORKS POST EVENT REPORT FORM

## CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD SAN DIEGO REGION

## POST FIREWORKS DISPLAY REPORT

This form shall be completed no later than thirty (30) days following a public display of fireworks event and made available to the San Diego Water Board upon request. Reports shall be submitted to the San Diego Water Board in accordance with the schedule outlined in Section X.B.3 of the Monitoring and Reporting Program.

Completed forms may be submitted electronically on compact disk or by hard copy to the San Diego Water Board office. The San Diego Water Board may accept electronic submission of this form (Check with the San Diego Water Board before submitting electronically).

Name of Organization Hosting the Event		WDID No.					
Contact Person for Organization Hosting the Event:							
Name:							
Phone Number:							
Email:							
Location of Event – Address and GPS Coordinates			Name of Receiving Water(s)				
Date of Display	Time of Display		<u> </u>				
	FROM	to					
Map. Attach a map or diagram identifying the firing range, adjacent shorelines, quays, and docks, any other appropriate features of the firing range and adjacent affected surface water(s). The firing range is that area							
over which fireworks may travel by design or accident and upon which firework pollutant waste may fall. It							
includes the fireworks launching area and adjacent shorelines, quays, docks and the fireworks fallout area.							
Name and License No. of Pyrotechnic	Operators						
4							
1.							
2.							
3.							

Particulars of Display*				Low Level Items*		Ground Displays*			
Shell Size	No. Single Breaks	No. Multi Breaks	Shell Size	No. Single Breaks	No. Multi Breaks	Туре	Qty	Туре	Qty
25 mm			7"			MINES		SETS	
80 mm			8"			ROMANS		DEVICES	
2"			9"			COMETS			
3"			10"			CAKES			
4"			11"						
5"			12"						
6"									
☐ Yes ☐ No If no, ex		ate			Time				
	of debris co		cted from			s dry weight er(s):lbs	wet weigh	nt	
under m properly manage true, acc penaltie:	y direction of gather and the system curate, and s for submit	or supervis I evaluate to or those of complete to tting false in	ion in acc he inform lirectly res o the bes oformation	cordance wi ation subm sponsible fo t of my known, including	ith a systen itted. Base or gathering wledge and the possib	nis application are designed to enset on my inquiry of the information, I belief. I am awaility of fine and intereligibility will be	sure that of the perse the informare that the inprisonme	qualified persons son or persons nation submitt ere are signifi ent. In addition	onnel s who ed is cant

Printed Name:	
Signature:	Date:
Title:	

<sup>\*</sup>May attach a copy of the Pyrotechnic Operator Post Display Report submitted to the Office of the State Fire Marshall to satisfy this requirement.