



DARC Severe Weather Report Form

Date: _____

Time: _____

Scribe: _____

Best viewing direction for Classic Supercell is South of the storm
Best viewing direction for HP Supercell S to SE of the storm

<input type="checkbox"/> Tornado	Ground contact; if no condensation funnel, look for debris field	<input type="checkbox"/> N	<input type="checkbox"/> NE	<input type="checkbox"/> E	<input type="checkbox"/> SE
<input type="checkbox"/> Funnel Cloud	NO ground contact; NO Tornado	Storm Direction (Toward)			
<input type="checkbox"/> Rotating Wall Cloud	Maintains position with respect to rain - SW corner of storm; NE corner for HP Super Cell	<input type="checkbox"/> S	<input type="checkbox"/> SW	<input type="checkbox"/> W	<input type="checkbox"/> NW
<input type="checkbox"/> General Storm Rotation	Mid-level clues: striations, barber's pole appearance, SCUD moving around cloud tower				

<input type="checkbox"/> High Winds	<input type="checkbox"/> 30-44 MPH	<input type="checkbox"/> 45-57 MPH	<input type="checkbox"/> 58-74 MPH	<input type="checkbox"/> 75-89 MPH	<input type="checkbox"/> 90+ MPH	<input type="checkbox"/> N	<input type="checkbox"/> NE	<input type="checkbox"/> E	<input type="checkbox"/> SE
<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured	How? _____				Wind Direction (From)			
						<input type="checkbox"/> S	<input type="checkbox"/> SW	<input type="checkbox"/> W	<input type="checkbox"/> NW

<input type="checkbox"/> Damage	<input type="checkbox"/> Structures	<input type="checkbox"/> Frame	<input type="checkbox"/> Brick	<input type="checkbox"/> Walls	<input type="checkbox"/> Roofs	<input type="checkbox"/> Mobile Homes	<input type="checkbox"/> Power Lines	<input type="checkbox"/> Vehicles
<input type="checkbox"/> Trees	Type: _____	Height: _____	Limb Size: _____	Uprooted	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

<input type="checkbox"/> Hail (odd shape measure long axis)	<input type="checkbox"/> Pea=1/4"	<input type="checkbox"/> Marble=1/2"	<input type="checkbox"/> Penny=3/4"	<input type="checkbox"/> Quarter=1"	<input type="checkbox"/> Golf Ball=1 3/4"	<input type="checkbox"/> Baseball=2 3/4"	<input type="checkbox"/> Estimated	<input type="checkbox"/> Measured
<input type="checkbox"/> Ground Cover				Depth _____				

<input type="checkbox"/> Heavy Rain (2" or more per hour)	<input type="checkbox"/> Flash Flooding	<input type="checkbox"/> Moving Water	<input type="checkbox"/> Depth _____	<input type="checkbox"/> Rivers/Small Streams	<input type="checkbox"/> Streets/Underpassess
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Is the event still occuring?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	How Long Did the Event Last? _____
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<u>Spotter Information</u>	<u>Notes</u>
County _____	
City/Town/Village _____	
Sighting Location - Town Quadrant, Major Intersection, Cross Street, Mile Marker _____	
Event Time _____	
Spotter Name _____	
Amateur Call Sign _____	<input type="checkbox"/> Trained
Time Relayed and To Whom _____	<input type="checkbox"/> County <input type="checkbox"/> 911 <input type="checkbox"/> NWS