

NWS Weather Reports

District: _____	County: _____	City: _____	Report time: _____
Time occurred: _____	At intersection: _____	Reported by: _____	
Additional info: _____			
Wind:	Estimated: <input type="checkbox"/>	Trees down: <input type="checkbox"/>	Size: _____ Healthy: yes <input type="checkbox"/>
Speed: _____	Measured: <input type="checkbox"/>	Limbs Down: <input type="checkbox"/>	Size: _____ no <input type="checkbox"/>
Damage incurred? _____			
Rain:	Estimated: <input type="checkbox"/>	Began: _____	Flooding: yes <input type="checkbox"/> Common flooding area: yes <input type="checkbox"/>
Amount: _____	Measured: <input type="checkbox"/>	Ended: _____	no <input type="checkbox"/> no <input type="checkbox"/>
How deep? _____			
Hail size:	Pea: <input type="checkbox"/>	Dime: <input type="checkbox"/>	Penny: <input type="checkbox"/> Nickel: <input type="checkbox"/> Quarter: <input type="checkbox"/> Measured: _____
Cloud Type:	Rotating: <input type="checkbox"/>	Wall cloud: <input type="checkbox"/>	Funnel: <input type="checkbox"/> Tornado: <input type="checkbox"/>

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