

# Flame Weeding Event Worksheet

Date/Time: \_\_\_\_\_ Weather: \_\_\_\_\_

Location: \_\_\_\_\_

Contact Person: \_\_\_\_\_ ( ) \_\_\_\_\_

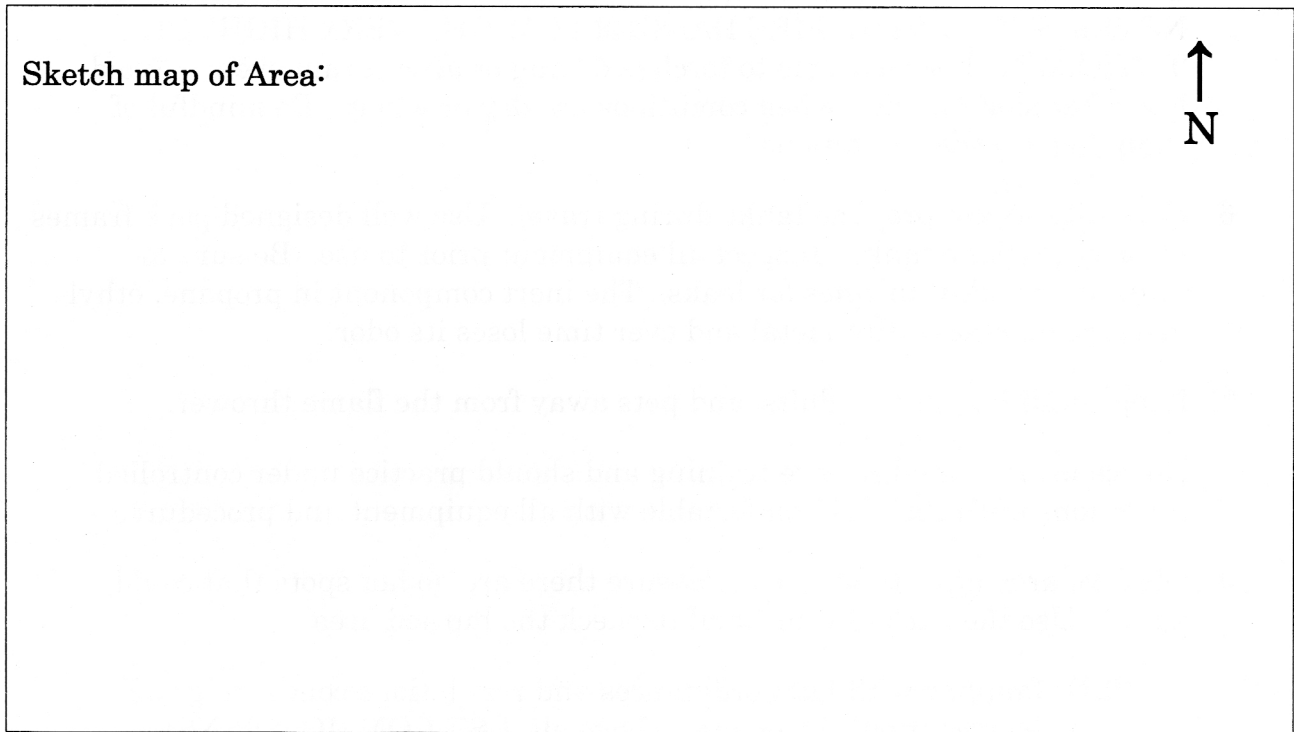
Emergency Contact: \_\_\_\_\_ ( ) \_\_\_\_\_

Safety Liaison: \_\_\_\_\_ First Aid/Burn Kit (Y/N): \_\_\_\_\_

Firefighting Tools: \_\_\_\_\_

Crew Member:	Time In:	Time Out
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

Sketch map of Area:



↑  
N