



OFFICE OF THE STATE FIRE MARSHAL  
FLAME EFFECTS OPERATORS  
AFTER ACTION REPORT



This After Action Report is generated as required by Rules Pursuant to the Utah Fireworks Act R-710-2-8(19)

NAME OF OPERATOR OR ARTISAN	DATE OF EVENT OR SHOW
NAME OF ACT OR PRODUCER	FLAME EFFECTS LICENSE NUMBER
EVEN NAME AND ADDRESS AND/OR LOCATION OF EVENT OR SHOW	VENUE OR COUNTY
<input type="checkbox"/> FLAME EFFECTS – NFPA 160 <input type="checkbox"/> FLAME EFFECTS PERFORMING ARTIST – Fire Artisans/Performer Standards / NAFAA Performer Safety Guidelines	

I hereby certify that I conducted the public display listed above and supervised the flame effects act, show, performance and all operators and/or performers. The list of operators and/or performers who conducted, assisted or performed this flame effect event may be found listed below.

Name	License Number	Address/City/State/Zip	Age

Please use reverse side to list additional personnel.

Were all flammable materials, fuels, pressure cylinders, dispensers, igniters or vessels, cleared, vented, stabilized, shut off and secured appropriately? <input type="checkbox"/> Y <input type="checkbox"/> N
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	YES / NO	EXPLAIN EVENT/MITIGATION (Please use reverse side or additional pages for further explanation.)
Were there any misfires, flame-outs, failures, etc.		
Were there any unauthorized leaks, open flames, jets, flame extensions or non-planned events?		
Were any proximal injuries, singes, flash-burns or documented burn injuries reported or were medics or 911 called to assist?		If yes, list name/address/age
Were there any fires, violations, or irregularities?		
Please explain number, size, types and varieties of flame effects or flame effect tools/devices used for this event and/or show.		

This report must be filed with the Office of the State Fire Marshal by flame effects operators and performers, who present, act, perform and produce programming, before proximal audiences within ten (10) working days following the display or performance. Failure to do so or misrepresenting or concealing any facts or incidents concerning the display and performance shall constitute grounds for license suspension, revocation and/or denial of license renewal.

Office of the State Fire Marshal  
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Fax: 801-256-2386  
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ONLY ONE AFTER ACTION REPORT PER FLAME EFFECTS  
DISPLAY OR PERFORMANCE

(make copies of form as needed)

Signature of Operator

Date