



South Carolina State Fire
Office of State Fire Marshal
141 Monticello Trail Columbia,
S.C. 29203
803-896-9800
www.statefire.llr.sc.gov

Malfunction Report

Outdoor or Proximate Audience

Return form promptly to supplier of fireworks and South Carolina State Fire

Display Date: _____ Location: _____

Operator: _____ Assistant: _____

Injury/Death: _____

Name of Injured/Deceased: _____

Type of Shell Involved or Type of Device Involved:

Manufacturer _____

Ex # _____ Serial # _____ Batch/Lot Codes _____ Date Code _____

Type of Ignition (Manual or E-Match) _____

Prop Used _____

Size _____

Effect _____

Type of Malfunction:

Fuse ignited, but nothing else happened _____

Shell exploded in mortar _____

Shell exploded outside of mortar _____

Shell returned to ground and then exploded _____

Shell returned to ground but never exploded _____

Other (explain) _____

Attach Photos:

71-8305.6(A)(4) Operators must notify the OSFM within 24 hours of any fires, thefts, injuries or deaths involving fireworks. The operators shall provide the OSFM with a copy of the report filed with the police department or the incident report from the fire department. Operators must also provide the OSFM with a copy of ATF Form 5400.5.

Signature of Certified Operator