

Please return this questionnaire to: [multiwave@ucd.ie](mailto:multiwave@ucd.ie)

**Observer information:**

Name: ..... e-mail: ..... Phone: .....

**Event information:**

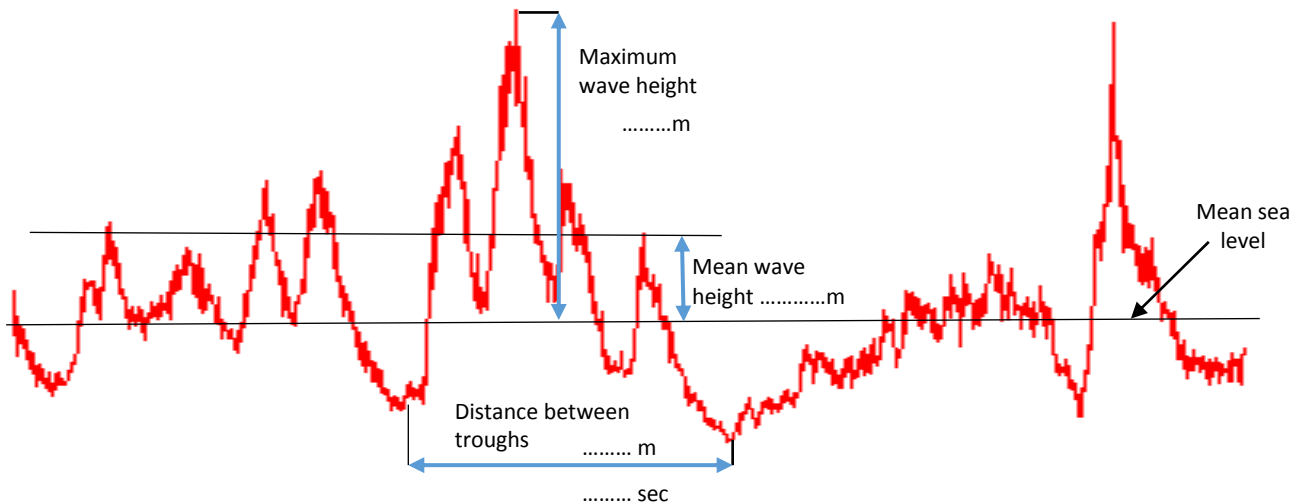
Date (dd/mm/yyyy): ..... Location: ..... lat: ..... lon: .....

Time (when event started): ..... Duration: .....

**Description of sea state:**

Number of large waves: .....

Please provide an estimate of the values in correspondence with the blue arrows in the picture below:



**Mean sea state**

- calm or with small ripples
- small waves, crests breaking
- long waves and some foam
- stormy: big waves and lots of foam
- .....

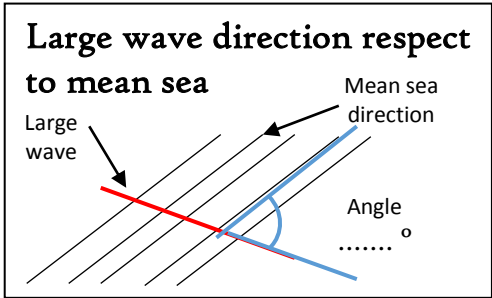
**Surrounding conditions**

Air temperature: .....°C

Barometric pressure: .....hPa

Wind intensity: .....km/h

Wind direction: .....



**Observer position with respect to the event:**

Where did you observe the event from? (boat, lighthouse, helicopter, ...) .....

How high was your location with respect to the mean sea level? .....

**Further details:**

Please provide a description of the difficulties you have experienced while facing the emergency (e.g. “due to the very large sea I was unable to turn in any direction except to steer down sea”) .....

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