## **SPILL NOTIFICATION REPORT**

For use of this form, see the Installation Spill Contingency Plan (ISCP); the proponent is DPW-ENRD

The organization responsible for the oil, AFFF/PFAS, or hazardous substance spill must submit this information to DPW-ENRD (255-1656; samuel.a.lynon.civ@army.mil; Bldg.1121) using this form. The form should be completed in as much detail as possible the same day that the incident is reported to the DPS Fire & Emergency Services Division and in complete detail within three days of the incident.

1. Contact Info for Person Rep	orting Spill		
Name (typed or printed)		Sign	nature
Date of Report	Telephone	<u>.</u>	Email
2. Name, location and type of	function causing	g spill.	
3. Commander/supervisor and	l phone number	of org	ganization responsible for spill.
4. Date and time of spill discov	very.		
5. Estimated date and time sp	ill began.		
6. Type and estimated amoun	t of material spil	led.	
7. Duration of discharge, rate	of release if con	tinuino	g.
8. Cause of incident and equip	oment/facility inv	olved.	
9. Injuries and /or property dar	nage.		
10. Location of spill. Specify a	areas affected b	y spill.	
11. Receiving stream or water	s.		

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12. Potential dangers (fire, explosion, toxic vapor, etc.).
13. Environmental conditions (wind direction and speed, wave action, current, etc.).
14. Remedial actions taken and estimated completion date.
15. Was a sample taken? (yes or no)
16. Description of assistance required (if any).
17. Anticipated or actual reaction by news media and public to the incident.
18. Actions taken to prevent incident recurrence.
To. Actions taken to prevent incident recurrence.
19. General discussion of the incident/additional details.