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 Persor	າ Reporting Spill		
Name (typed or printed)		Signature	
Date of Report	Telephone		Email
2. Name, location and typ	e of function causin	g spill.	
3. Commander/superviso	r and phone number	r of org	ganization responsible for spill.
4. Date and time of spill of	liscovery.		
5. Estimated date and tim	ne spill began.		
6. Type and estimated ar	nount of material spi	illed.	
7. Duration of discharge,	rate of release if cor	ntinuino	g.
8. Cause of incident and	equipment/facility in	volved.	
9. Injuries and /or propert	y damage.		
10. Location of spill. Spe	·	oy spill.	
11. Receiving stream or v	vaters.		

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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.
19. General discussion of the incident/additional details.