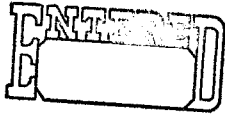


WILLIAM B. WALKER, M.D.
HEALTH SERVICES DIRECTOR

RANDALL L. SAWYER
CHIEF ENVIRONMENTAL HEALTH AND
HAZARDOUS MATERIALS OFFICER



CONTRA COSTA HEALTH SERVICES

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HEALTH SERVICES
HAZARDOUS MATERIALS PROGRAMS

4585 Pacheco Boulevard, Suite 100
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94553-2233
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COMPLAINT, INCIDENT, AND NOTIFICATION REPORT FORM

Type (Circle One): C I N

CASE NUMBER: 17-08-24 - 02

Received Date: 08/24/17 Received Time: 2:55pm Received By: HW Lead: AA

Incident Date: 08/24/17 Incident Time: Assigned to: Assigned Date:

COMPLAINANT / REPORTING PARTY:

Name: Steve RP is from Facility Anonymous

Organization:

Primary Phone Number: 925-446-1506 Secondary Phone Number:

Email:

Address:

City: State: Zip Code:

FACILITY / LOCATION OF INCIDENT:

Name: CUPA Facility I.D.:

Phone Number:

Address: PORT CHICAGO HWY Unit:

City: BAY POINT State: Zip Code:

Location Description: BOTH LEFT AND RIGHT SIDES OF ROAD. From Nichols through Dr. Aycock to Wharf Dr.

INITIAL INCIDENT DESCRIPTION: MULTIPLE LOCATIONS ALONG ROADSIDE - ABANDONED 5 GAL DRUMS OF OIL AND 1 GAL PAINT CONTAINERS. SOME DO NOT HAVE LIDS.

INCIDENT TYPE / DESCRIPTION:

Community Warning System Level (Circle Highest Level): N/A 0 1 2 3

FACILITY	ISO / MCAR	TRANSPORTATION	MISCELLANEOUS
<input type="checkbox"/> Fire or Explosion	<input type="checkbox"/> Fatality (one or more)	<input type="checkbox"/> Tank Truck	<input type="checkbox"/> Storm Drain/Creek
<input type="checkbox"/> Spill or Release	<input type="checkbox"/> > 24 hrs. Hospital, 3 or more people	<input type="checkbox"/> Railroad	<input type="checkbox"/> Drug Lab
<input type="checkbox"/> Startup or Shutdown	<input type="checkbox"/> Flammable Vapor Cloud > 5,000 lbs.	<input type="checkbox"/> On Water	<input checked="" type="checkbox"/> Disposal/Abandonment
<input type="checkbox"/> Flaring		<input type="checkbox"/> Pipeline	<input type="checkbox"/> Odor Complaint
<input type="checkbox"/> Upset		<input type="checkbox"/> Fuel Tank	<input type="checkbox"/> Other:

Time Enroute to Scene: ~15:45 Time Arrived On Scene: 16:25 Time Departed From Scene: ~17:08

REFERRED TO OTHER AGENCY:

DTSC STATE FUNDING (if applicable):

CLU/ERER Number:

STORMWATER STATUS (if applicable):

Actual Discharge Potential Discharge



AGENCIES ON SCENE OR NOTIFIED:

<u>Agency Type</u>	<u>Agency</u>	<u>O/N</u>	<u>Contact Person</u>	<u>Phone Number</u>	<u>Case Number</u>
Fire Department					
Law Enforcement					
Air District					
State OES					

REPORT:

7:77s to pager @ 2:56pm
3:06pm 1209 (DV) & 1223 (TH) dispatched to truck bay for abandonment.
4:01 pm - 1223 reports traffic / enroute when asked for status update.
4:25 - On scene. Multiple dumps of paint and used oil
5:21 - HM3 back in bay.

Additional Required Items: Bill of Lading, Request for Invoice, and Site Safety Plan

Report Prepared by: AA