

**ATTACHMENT C
30-DAY FOLLOW-UP NOTIFICATION REPORT FORM
CONTRA COSTA HEALTH SERVICES**

INSTRUCTIONS: A hardcopy and an electronic copy of this report is to be submitted for all Level 2 and 3 incidents or when requested by CCHS. See Attachment C-1 for suggestions regarding the type of information to be included in the report. Attach additional sheets as necessary. This form is to be used for update reports after the initial 30-day report has been submitted. Forward the completed form to:

ATTENTION: Randall L. Sawyer
Hazardous Materials Programs Director
Contra Costa Health Services
4585 Pacheco Boulevard, Suite 100
Martinez, CA 94553

INCIDENT DATE: March 27, 2015 at 02:50
INCIDENT TIME: 2:50 AM
FACILITY: The Dow Chemical Company, Dowicil Plant

PERSON TO CONTACT FOR ADDITIONAL INFORMATION
Dale Backlund Phone number (925) 432-5508

PROVIDE ANY ADDITIONAL INFORMATION THAT WAS NOT INCLUDED IN THE 72-HOUR REPORT WHEN THE 72-HOUR REPORT WAS SUBMITTED, INCLUDING MATERIAL RELEASED AND ESTIMATED OR KNOWN QUANTITIES, COMMUNITY IMPACT, INJURIES, ETC.:

See attached PDF File.

I. INCIDENT INVESTIGATION RESULTS

Is the investigation of the incident complete at this time? Yes No
If the answer is no, when do you expect completion of the Investigation?

If the answer is yes, complete the following:

SUMMARIZE INVESTIGATION RESULTS BELOW OR ATTACH COPY OF REPORT:

See attached PDF File.

SUMMARIZE PREVENTATIVE MEASURES TO BE TAKEN TO PREVENT RECURRENCE INCLUDING MILESTONE AND COMPLETION DATES FOR IMPLEMENTATION:

See attached PDF file.

For CCHS Use Only:

Received By: _____
Date Received: _____
Incident Number: _____
Copied To: _____
Event Classification Level: _____

30-DAY REPORT, PAGE 2

INCIDENT DATE: March 27, 2015

FACILITY: Dowicil Plant

STATE AND DESCRIBE THE ROOT-CAUSE(S) OF THE INCIDENT:

See attached PDF file.