

ANNA M. ROTH, RN, MS, MPH  
 HEALTH SERVICES DIRECTOR  
 RANDALL L. SAWYER  
 DEPUTY HEALTH DIRECTOR  
 MATTHEW S. KAUFMANN  
 DIRECTOR OF HAZARDOUS MATERIALS PROGRAMS



CONTRA COSTA  
 HAZARDOUS  
 MATERIALS PROGRAMS

4585 Pacheco Boulevard, Suite 100  
 Martinez, California 94553  
 Ph (925) 655-3200  
 Fax (925) 646-2073  
 ccchazmat@cchealth.org  
 www.cchealth.org/hazmat/

**COMPLAINT, INCIDENT, AND NOTIFICATION REPORT FORM**

Type (Circle One):  C  I  N CASE NUMBER: 210613 - 01

Received Date: 06/13/21 Received Time: 1:07 AM Received By: JP Lead: JP  
 Incident Date: 6/13/21 Incident Time: \_\_\_\_\_ Assigned to: \_\_\_\_\_ Assigned Date: \_\_\_\_\_

**COMPLAINANT / REPORTING PARTY:**

Name: DISPATCH  RP is from Facility  Anonymus  
 Organization: CCCFPD Cal OES # (if applicable) \_\_\_\_\_  
 Primary Phone Number: \_\_\_\_\_ Secondary Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**FACILITY / LOCATION OF INCIDENT:**

Name: RESIDENCE CUPA Facility I.D.: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Address: 3011 GRANT ST Unit: \_\_\_\_\_  
 City: CONCORD State: CA Zip Code: 94520  
 Location Description: X OLIVERA RD

**INITIAL INCIDENT DESCRIPTION:**

CONCORD POLICE DEPARTMENT AND CCCFPD REQUESTING ASSISTANCE WITH FENTANYL INSIDE A RESIDENCE

**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 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 checked="" type="checkbox"/> Other: FENTANYL

Time Enroute to Scene: 1:20 AM Time Arrived On Scene: 2:01 Time Departed From Scene: 2:53 AM

REFERRED TO OTHER AGENCY: CONCORD POLICE DEPARTMENT



**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	CCCFPD	O	CAPTAIN CHRIS HUMMEL		
Law Enforcement	CONCORD POLICE DEPARTMENT	O	SERGEANT JEFF ROSS	925-499-3611	21-5599
Air District					
State OES					

**REPORT:**

AT 1:07 AM, CONTRA COSTA COUNTY FIRE PROTECTION DISTRICT (CCCFPD) DISPATCH CONTACTED CONTRA COSTA HEALTH SERVICES HAZARDOUS MATERIALS PROGRAM (CCHSHMP). CONCORD POLICE DEPARTMENT (CONCORD PD) AND CCCFPD REQUESTED CCHSHMP TO ASSIST WITH FENTANYL INCIDENT.

AT 1:20 AM, SH ENROUTED TO SCENE IN A HAZMAT SUV.

AT 2:01 AM, SH ARRIVED ON SCENE.

AT 2:03 AM, HM1 (JP AND XB) ENROUTED TO SCENE.

AT 2:13 AM, HM3 (AA AND NU) ENROUTED TO SCENE

AT 2:14 AM, HM1 ARRIVED ON SCENE.

SERGEANT ROSS AND CAPTAIN HUMMEL PROVIDED THE LATEST INFORMATION TO CCHSHMP.

AT 2:29 AM, HM3 ARRIVED ON SCENE.

AT 2:45 AM, CONCORD PD COMFIERED THAT THEY NO LONGER NEEDED THE ASSISTANCE FROM CCHSHMP.

AT 2:53 AM, CCHSHMP STAFFS DEPARTED FROM SCENE.

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

Report Prepared by: JP