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# CONTRA COSTA HEALTH SERVICES

ENTERED

## COMPLAINT, INCIDENT, AND NOTIFICATION REPORT FORM

Type (Circle One):  C  I  N

Received Date: 10/10/18 Received Time: 1743 Received By: SH Lead: SH

Incident Date: 10/10/18 Incident Time: 1728 Assigned to: \_\_\_\_\_ Assigned Date: \_\_\_\_\_

CASE NUMBER: 18-10-10 - 04

**COMPLAINANT / REPORTING PARTY:**

Name: Dispatch  RP is from Facility  Anonymous

Organization: Con Fire

Primary Phone Number: \_\_\_\_\_ Secondary Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**FACILITY / LOCATION OF INCIDENT:**

Name: Arthur Road CUPA Facility I.D.: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: Appx. 70 Arthur Road Unit: \_\_\_\_\_

City: Martinez State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Location Description: \_\_\_\_\_

**INITIAL INCIDENT DESCRIPTION:** Vehicle accident spilled approximately 30 gallons of gasoline into storm drain system

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

Time Enroute to Scene: 30 Time Arrived On Scene: 1815 Time Departed From Scene: 2000

**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	Con Fire	O	Capt. Stevens		18104478
Law Enforcement	CHP	O	C Aubert		21352
Air District					
State OES		N			18-6880
Public Works		O	Kevin Harbrecht	925-313-7031	
CA DFW		N			

**REPORT:**

A vehicle accident released approximately 30 gallons of gasoline to the storm drain system. A white Ford Explorer (5CWC309) driven by Robin M King of 2700 B Street Antioch lost control of the vehicle along Arthur Road in Martinez and crashed into Toyota Sienna (7HTS027) and a Toyota Tundra (8Y00088). The Sienna sustained minor body damage but the Tundra had a full fuel tank that released the entire contents into the storm drain system. Upon examination a flammable atmosphere was present in the two storm drain cisterns nearest to the crash. No sheen was visible on the creek where the drains empty. Hazardous Materials Specialists and Con Fire removed absorbed/impounded fuel from the surface drainage. Con Fire departed the scene and CCHSDHMP then worked to remove the fuel that entered the below ground storm water system. Specialists removed impacted sediment from the storm cistern and associated piping to the best of their ability with the tools available. Specialists removed approximately 450 pounds of impacted soil and used absorbent. Hazardous Materials Specialists, CHP and Tow Truck operators worked to stabilize the source (leaking fuel tank). CCHSDHMP departed scene once enough impacted soil was removed from the storm drain to get LEL readings to 3-4%. County Public Works (Kevin Harbrecht) generated a work order so that remainder of the fuel be removed with a line flush the morning of 10/11/18.

At the time of CCHSDHMP departure the source was eliminated, the hazardous atmosphere in the storm drain was attenuated and the surface contamination removed.

Hazardous Materials Specialist notified Cal OES of the incident and was given incident number 18-6880. Con Fire Capt Stevens notified CA DFW of the incident and did not provide an incident number.

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

**Report Prepared by:** \_\_\_\_\_