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**CONTRA COSTA
HEALTH SERVICES**

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HAZARDOUS MATERIALS PROGRAMS

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COMPLAINT, INCIDENT, AND NOTIFICATION REPORT FORM

Type (Circle One): C N

CASE NUMBER: 16-05-10-02

Received Date: 5/10/16 Received Time: 18:36 Received By: DV Lead: DV

Incident Date: 5/10/16 Incident Time: Unknown Assigned to: _____ Assigned Date: _____

COMPLAINANT / REPORTING PARTY:
 Name: EBRP Police RP is from Facility Anonymou
 Organization: _____
 Primary Phone Number: 510-881-1833 Secondary Phone Number: _____
 Email: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____

FACILITY / LOCATION OF INCIDENT:
 Name: EBRP CUPA Facility I.D.: _____
 Phone Number: _____
 Address: _____ Unit: _____
 City: Richmond State: CA Zip Code: _____
 Location Description: PT Pindole Resinial Park

INITIAL INCIDENT DESCRIPTION: Unknown container of yellow liquid

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 type="checkbox"/> Other:

Time Enroute to Scene: _____ Time Arrived On Scene: _____ Time Departed From Scene: _____

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:

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

REPORT:

5/10/16 EBRP Police taped off area near containers

5/11/16

MD, AS went to Pt Pinckney regional park and determined it was Spill of cooking oil used. Transported material back to CCHS Hazmat placed in West County Bin.

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

Report Prepared by: 