#### This portion of form to be filled out by Facility and/or Emergency Coordinator

1. Name and title of person reporting incident:

 Phone number and email address of person reporting incident:

2. Name of Facility:

 Facility Manager:

 Location of Facility:

 Phone number of Facility:

3. Phone number where person reporting spill can be reached:

4. Date, time, and location of incident:

5. Brief description of the incident, nature of the materials involved, condition and size of container (i.e., tank, drum), estimated quantity of materials spilled/released, extent of any injuries, and type of containment or clean up actions taken:

6. Extent of contamination of land, water, or air, if known:

7. Was emergency notification made to 911? YES NO

8. Was facility Manager notified? YES NO

9. Was notification made to Environmental Health and Safety (814-865-6391)?

 YES NO

#### This portion of form to be filled out by Emergency Coordinator

Regulatory Authorities:

For spills/releases that cannot be controlled by the facility

 Police/Fire/Ambulance/County Emergency Management (911) YES NO

 Contact, date, time:

 Pa Emergency Management Agency YES NO

 Contact, date, time:

For spills/releases to the waters of the United States (streams)

 National Response Center YES NO

 Contact, date, time:

For spills/releases to the waters of the Commonwealth (ditches, drainage channels, storm water sewers, sanitary streams, ponds, lakes)

 Pa Department of Environmental Protection YES NO

 Contact, date, time:

 Pa Fish and Boat Commission YES NO

 Contact, date, time:

For spills/releases to Pa Game Lands

 Pa Game Commission YES NO

 Contact, date, time:

Others:

 Agency, contact, date, time: