

Petroleum Storage Tank Bureau - Initial Incident Report

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|-------------|--|
| Facility ID | |
| Release ID | |
| AI ID | |
| Owner ID | |

Contact Information County: _____ District: _____ Date Received: _____

Caller's Name: _____ Phone: _____

Facility Name: _____

Facility Physical Address: _____ City, Zip: _____

Owner Information

Responsible Tank Owner: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Person: _____ Phone: _____ E-mail: _____

Release Information

Leaking tank type? UST ___ AST ___ Both ___ Unknown ___

Release Confirmed ___ Suspected ___ Cause of release: _____

Reason for suspecting release: _____

Date, time of release: _____ Duration: _____ Volume released: _____

Product lost: Unleaded gas ___ Leaded gas ___ Diesel ___ Waste oil ___ Avgas ___ Jet fuel ___

TCE ___ Kerosene ___ Unknown ___ Other, describe: _____

Has further release been prevented? _____

Describe: _____

Fire authorities been notified? _____ Name: _____ Phone: _____

Has P/I Inspector informed responsible party of its immediate responsibilities? _____

Contaminant saturated soils present? _____ Describe any removal: _____

Hydro-geological Information

Depth to groundwater: _____ Direction of GW flow: _____ Surface waters endangered? _____

Actual/Possible Impacts

Well locations, depths, types: _____

Utility corridors: _____

Vapors in buildings: _____

Source Information - Where did the release come from?

___ Tank ___ Piping ___ Dispenser ___ Submersible Turbine Pump Area ___ Delivery Problem

___ Flex Connector ___ Other (specify): _____

(Please provide as much information as possible about the probable source(s) of the release.)

Facility ID Number or Name: _____ Date of Release: _____

(Additional comments on source of release, if needed.)

Cause Information - Why did the release occur?

Spill Overfill Corrosion Physical or Mechanical Damage Installation Problem

Other (specify): _____

(Please provide as much information as possible about the cause(s) of the release.)

Unknown (**If cause and source of release is not known, please state why below**):

Assignment Information

Report received by: _____ Date: _____ Phone: _____
Assigned to: _____ Date: _____ Phone: _____