

## SPILL OR INCIDENT REPORT FORM

**Instructions:** Complete for any type of petroleum product or hazardous materials/waste spill or incident. Provide a copy of this report to management.

### 1. BIOS/ASU Personnel Involved in Spill Reporting:

Name, Title, and Phone Number: \_\_\_\_\_

Regional Environmental Office: Name, Title, and Phone Number: \_\_\_\_\_

### 2. Contractor

Name and Title of Person Responsible for Spill Response: \_\_\_\_\_

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

### 3. General Spill Information:

Common Name of Spilled Substance: \_\_\_\_\_

Quantity Spilled (Estimate): \_\_\_\_\_

Describe Concentration of Material (Estimate): \_\_\_\_\_

Date of Spill: \_\_\_\_/\_\_\_\_/\_\_\_\_

Time Spill Started: \_\_\_\_ AM \_\_\_\_ PM

Time Spill Ended: \_\_\_\_ AM \_\_\_\_

PM

### 4. Spill Location and Conditions:

Project Title: \_\_\_\_\_

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

Weather Conditions: \_\_\_\_\_

If Spill to Water, Name of Water Body (if ditch or culvert, identify the water body that the structure discharges to):

\_\_\_\_\_

Identify the Discharge Point: \_\_\_\_\_

Estimate the Depth and Width of the Water Body: \_\_\_\_\_

Estimate Flow Rate (i.e. slow, moderate, or fast): \_\_\_\_\_

Describe Environmental Damage (i.e., fish kill?): \_\_\_\_\_

**5. Actions taken:**

To Contain Spill or Impact of Incident: \_\_\_\_\_

To Cleanup Spill or Recover from Incident: \_\_\_\_\_

To Remove Cleanup Material: \_\_\_\_\_

To Document Disposal: \_\_\_\_\_

To Prevent Reoccurrence: \_\_\_\_\_

**Spills to water:** Immediately call Bermuda Maritime Operations Centre (441-297-1010), Department of Environment and Natural Resources (441-239-2303 or 441-239-2356 or 441-239-2318), [pollutioncontrol@gov.bm](mailto:pollutioncontrol@gov.bm)  
**Spills to soil that may be an immediate threat to health or the environment** (i.e., explosive, flammable, toxic vapors): ), Department of Environment and Natural Resources (441-239-2303 or 441-239-2356 or 441-239-2318), [pollutioncontrol@gov.bm](mailto:pollutioncontrol@gov.bm)  
**Note:** Project specific permits may have additional reporting requirements.

**6. Reporting the Spill:**

List all agencies contacted; include names, dates, and phone numbers for people you spoke with:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**7. Person Responsible for Managing Termination/Closure of Incident or Spill:**

Name and Phone: \_\_\_\_\_

Address and Fax: \_\_\_\_\_

**8. Additional Notes/Information (if necessary):**