



MCRD PARRIS ISLAND SPILL REPORT

Your Name: _____
Your Unit/Section: _____

Today's Date: _____
Phone Number: _____

INCIDENT DESCRIPTION

Date of Spill: _____ Estimated Time: _____

Spill Location (Bldg. # / Approx. Location): _____

Unit/Individual(s) Responsible: _____

Material Spilled: _____ Estimated Gallons: _____

Description of Spill (Events, Size, Shape, Surface type, etc.):

Areas Threatened or Damaged

| | | |
|-------------|-----|----|
| Storm Drain | Yes | No |
| Waterway(s) | Yes | No |
| Vegetation | Yes | No |

Potential Dangers

| | | |
|-----------|-----|----|
| Fire | Yes | No |
| Toxic | Yes | No |
| Explosion | Yes | No |

RECOVERY EFFORTS

Responders:

Person Reporting Fire Department Environmental Division

Other _____ Approx. # of Responders: _____

Responder/Cleanup Action(s) (Materials, Equipment, etc. used to cleanup):

NOTIFICATION PROCEDURES

| <u>Department</u> | <u>Phone</u> | <u>Hours of Operation</u> |
|---|---------------------|---------------------------|
| Environmental Division (Mandatory) | 843-228-3102 | 0730-1600 Mon-Fri |
| Fire Department (Emergency Only) | 843-228-3637 or 911 | N/A |
| Emergency Maint. Marines (After Hours/Weekends) | 843-228-2191 | N/A |

Submit form to: PARR_SMB_MCRDPI_ENVIRONMENTAL_COMPLIANCE@usmc.mil