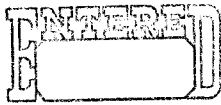


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HEALTH SERVICES DIRECTOR

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CONTRA COSTA
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CONTRA COSTA HEALTH SERVICES

COMPLAINT, INCIDENT, AND NOTIFICATION REPORT FORM

Type (Circle One): C I N

CASE NUMBER: 16-02-04 - 03

Received Date: 02/04/16 Received Time: 15:00 Received By: KA Lead: KA

Incident Date: 2/4/2016 Incident Time: 15:00 Assigned to: Assigned Date:

COMPLAINANT / REPORTING PARTY:

Name: Don Hinshaw RP is from Facility Anonymous

Organization:

Primary Phone Number: 510-526-1164 Secondary Phone Number:

Email:

Address: 5814 Sutter Avenue

City: Richmond State: CA Zip Code:

FACILITY / LOCATION OF INCIDENT:

Name: Don Hinshaw CUPA Facility I.D.:

Phone Number: 510-526-1164

Address: 5814 Sutter Avenue Unit:

City: Richmond State: CA Zip Code: 94572

Location Description: Private Residence

INITIAL INCIDENT DESCRIPTION: 1/2 cup of mercury spilled onto brick front porch

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 checked="" type="checkbox"/> Other: Hq Release

Time Enroute to Scene: 15:25 Time Arrived On Scene: 15:48 Time Departed From Scene: 16:32

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:

<u>Agency Type</u>	<u>Agency</u>	<u>O/N</u>	<u>Contact Person</u>	<u>Phone Number</u>	<u>Case Number</u>
Fire Department					
Law Enforcement					
Air District					
State OES					16-0768

REPORT:

15:00 - Resident Don Hinshaw calls CCHSHMP to report that about 1/2 cup of mercury was spilled onto his front porch located at 5814 Sutter Avenue in Richmond.

15:25 - Specialist Adam Springer departs office in POV and Specialists Ian Williams and Devra Lewis depart office in HM1.

15:48 - CCHSHMP at residence. With Jerome, no mercury is detected at the sidewalk, at the foot of the steps that lead to the patio, or as specialists approached the spilled mercury. Appeared mercury was in a glass container and the container was broken on the brick porch releasing the mercury.

15:52 - CCHSHMP had a safety meeting, as documented in ICS Form 208. Specialists Springer and Williams began vacuuming up the mercury with the mercury vacuum and collecting the broken pieces of glass. Detections of mercury during vacuuming activities ranged between 0 - 24.0 ug/m3. The mercury, broken glass, and PPE were containerized in a 5-gallon bucket with a hazardous waste label. The highest reading of mercury in the area of the spilled mercury following vacuuming activities was 1.9 ug/m3.

16:32 - CCHSHMP departed residence.

17:24 - CCHSHMP arrived back at office.

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

Report Prepared by: KA/DL



Hazardous Materials Spill Report: Cal OES Control #:16-0768
Warning Center to: devra.lewis

02/04/2016 04:20 PM

Governor's Office of Emergency Services
Hazardous Materials Spill Report

DATE: 02/04/2016 | RECEIVED BY Cal OES: Sandra Llavore | Cal OES
CNTRL #:16-0768
TIME: 1611 | RECEIVED BY OSPR: | NRC#:

1.a. PERSON NOTIFYING Cal OES

1. NAME: Karen Abramians | 2. AGENCY: Contra Costa Env.
Health
3. PHONE #: 925-335-3221 | 4. EXT: | 5. PAGER #:

1.b. PERSON REPORTING SPILL (If different from above):

1. NAME: | 2. AGENCY:
3. PHONE #: | 4. EXT: | 5. PAGER #:

2. SUBSTANCE TYPE:

a. SUBSTANCE: / b.QTY: / Amount / Measure / c. TYPE / d. OTHER / e.
PIPELINE / f. Vessel Over => 300 tons

1. Mercury / = / 0.5 / Cup(s) / CHEMICAL / / No / No

2.

3.

g. DESCRIPTION: RP states that substance was reported in by the responsible party. Release occurred due to human error which impacted their brick front porch. Crews are on site to assess the situation and containment is in process. Clean up will be determined and updates will be made when they become avail.

h. CONTAINED: Yes | i. WATER INVOLVED: No

j. WATERWAY: | k. DRINKING WATER IMPACTED: No

l. KNOWN IMPACT: None

3.a. INCIDENT LOCATION: 5814 Sutter Ave

b. CITY: Richmond | c. COUNTY: Contra Costa County | d. ZIP:

4. INCIDENT DESCRIPTION:

a. DATE: 2/4/2016 | b. TIME(Military): 1500 | c. SITE: Residence
| d. CAUSE: Human Error

e. INJURIES: No | f. FATALITY: No | g. EVACUATIONS: No | h.

CLEANUP BY: Co. Hazmat

e. INJURIES #: | f. FATALS #: | g. EVACS #:

5. SUSPECTED RESPONSIBLE PARTY:

a. NAME: Don Hinshaw | b. AGENCY: resident

c. PHONE#: 510-526-1164 | d. EXT:

e. MAIL ADDRESS: 5814 Sutter Ave

f. CITY: Richmond | g. STATE: CA | h. ZIP:

6. NOTIFICATION INFORMATION:

- a. ON SCENE: Co Health | b. OTHER ON SCENE:
- c. OTHER NOTIFIED:
- d. ADMIN. AGENCY: Contra Costa County Health Services Department
- e. SEC. AGENCY:
- f. ADDITIONAL COUNTY: g. ADMIN. AGENCY:
- h. NOTIFICATION LIST: DOG Unit: | RWQCB Unit: 2

AA/CUPA, DFG-OSPR, DTSC, RWQCB, US EPA, USFWS, Co/WP, Co/Hlth, Co/E-Hlth

CONFIDENTIAL REMARKS:

Created by Warning Center on 2/4/2016 4:11:16 PM Last
Modified by Warning Center on 2/4/2016 4:20:56 PM

California State Warning Center
Governor's Office Emergency Services
Phone: (916) 845-8911
Warning.Center@oes.ca.gov

Link to Spill Report:
<http://w3.calema.ca.gov/operational/mal haz.nsf/SpillAllDocs/292A19A61E8CA0A988257F5000010865?OpenDocument>